

breaking through

University of Ottawa
Institute of Mental Health Research





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A MESSAGE FROM THE DIRECTOR GENERAL



At least one in five Canadians suffers from a mental illness. Episodes of disease impair work, home life and, especially in young people, their education. The cost of these disorders to Canada's health, social and welfare systems is a staggering \$14 billion per year. The cost in human suffering is incalculable.

The Global Burden of Disease study conducted by the World Health Organization, the World Bank, and Harvard University, revealed that mental illness accounts for over 15 percent of the burden of disease. This is more than the disease burden caused by all cancers.

Current treatments for mental illness help many, but there are several who do not respond. Medications are extremely useful. However, these usually control symptoms; they do not cure the disease. And for those who do not respond to therapy, or who are misdiagnosed or left untreated, the results can often lead to interpersonal problems at home or at work, to addictions, poverty, homelessness or even prison.

Those afflicted with mental illness clearly deserve the same degree of care provided to those suffering from other illnesses, such as heart disease. Indeed, through research, we have made some progress toward this goal. Psychosocial research is identifying how environmental and psychotherapeutic interventions can help. Biological, psychiatric and neuroscience research are leading to a better understanding of the causes of mental disorders, and to improved treatments. These approaches offer new hope to those suffering from mental illness and, by showing that these disorders arise from biological causes rather than from weakness of character, they also help erode the stigma and discrimination attached to the disease.

Despite promising research advances, much remains to be discovered about how to successfully treat mental illnesses and, more importantly, how to cure them. Moreover, to provide early treatment and preventative strategies for individuals, we need to find better ways of



The economic burden of these disorders is second only to that of cardiovascular disease, yet Canada invests only 4 percent of its research dollars into mental health research.

identifying those at risk. The lack of support for research remains a major obstacle to the discovery and provision of improved treatment for the mentally ill. The economic burden of these disorders is second only to that of cardiovascular disease, yet Canada invests only 4 percent of its research dollars into mental health research.

**The Promise of the University of Ottawa
Institute of Mental Health Research**

The University of Ottawa Institute of Mental Health Research (IMHR) challenges the notion that people must simply learn to live with mental illness. Therapies have improved during the last few decades. For example, drugs and community treatment have replaced life-long institutionalization. However, this does not mean that we should settle for treating symptoms instead of striving for cures. We are therefore committed to building a future in which we can accurately identify and successfully treat mental illness, and intervene before it takes over people's lives.

This is a daunting challenge. But we believe wholeheartedly that we are equal to it, because we are not in this alone. The University of Ottawa IMHR is becoming the hub of a rapidly growing network of researchers, clinicians and organizations – across this region, Canada, and internationally – who share

a dedication to stopping mental illness as early as possible and ultimately preventing it altogether.

The power of the network arises from our close collaboration with those who share our goals. The University of Ottawa is strongly affiliated with us in this endeavor. The Children's Hospital of Eastern Ontario and its Research Institute are key partners, sharing research expertise in crucial mental health areas such as pediatrics, epidemiology and genetics. We believe in our ultimate success because we have these partners and because we receive such enormous support from the Royal Ottawa Health Care Group (ROHCG), the Royal Ottawa Health Care Foundation and especially the personal contributions of ROHCG clinicians.

As the University of Ottawa IMHR grows, it will serve to integrate and bring together researchers who investigate various aspects of mental disorders, from the molecule to the cell to the patient's bedside. Our vision is a centre of excellence where the free exchange of ideas, knowledge and skills can open new frontiers in the understanding and treatment of mental illness.

Zul Merali, PhD
Director General



THE MENTAL HEALTH OF CANADIANS

Mental illness affects people of all ages, income levels, education and culture. In fact, one Canadian in five will suffer from such a disorder at some time in his or her life, and 3 to 5 percent will become ill enough to experience continuous suffering and persistent disability.

Of the ten leading causes of disability worldwide, five are psychiatric conditions. These include depression, bipolar disorder, schizophrenia, obsessive-compulsive disorders and alcohol abuse. Depression alone will soon become Canada's leading cause of lost workdays. It frequently strikes the young, with half of those affected being under the age of 20. Worse, it often stays with them for the rest of their lives.

Unless action is taken, by 2020, mental illness will be the leading cause of disease burden in Canada. The impact on the health care system, in terms of cost and resources, will be severe. Of the seriously mentally ill,

70 percent are unemployed, and those who take care of them are often lost to the workforce. In the labour force, stress and depression lead to significant absenteeism and loss of productivity. Currently, mental health problems cost Canada's economy \$16 billion in lost productivity every single year. Furthermore, the mentally ill also tend to suffer more from other illnesses, and average twice as many visits to their doctors as other people.

Given the enormous impact of mental disorders on Canadians, on our economy and on our society, it is clear that finding better treatments and developing methods of early detection and prevention will provide profound benefits. The University of Ottawa Institute of Mental Health Research is committed to meeting this challenge on behalf of those who suffer from these illnesses, and for the ultimate good of all Canadians.

a patient's story

"I had panic attacks for 5 years and didn't know what was wrong with me. Until then I'd been able to jump on a plane, go anywhere. But after the panic attacks began to hit, I couldn't go anywhere at all.

When I found out about the studies at the Royal Ottawa Hospital, it changed my life. It let me know that I wasn't alone, that there were people out there just like me who suffered from the same things. To go there and get the support I needed, and be able to go back as often as I needed to – I can't say enough about it. I cannot stress enough how valuable their research program was to me."

Jonathan Baker, former research participant and patient at the Stress and Anxiety Clinical Research Unit



a nursing perspective

Margaret Tansey, Chief of Nursing Practice at the Royal Ottawa Hospital and Joint Appointee at the Faculty of Health Sciences at the University of Ottawa, is beginning her PhD, an undertaking that attests to her belief in the importance of research. She and her nursing colleagues are fully convinced that it is through research that they can make a difference to their patients, and they are very excited by the nursing research that is being done at the hospital. They believe the IMHR is crucial to improving mental health because it uses a multi-disciplinary approach bringing together the vast range of knowledge, therapies and skills needed to help people.

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from bench to bedside:

Translational Research

at the University of Ottawa

IMHR



Anxiety Disorders

Mood Disorders

Schizophrenia

Youth Psychiatry

Forensic Psychiatry



Translational research connects the ideas and discoveries of basic science to investigations into the treatment or prevention of illness.

Researchers at the University of Ottawa IMHR work from “bench to bedside” to promote connections between laboratory work and the needs of patients.

Our vision is to develop a fully integrated approach for the detection and treatment of mental illness.

Founded in 1990 by Dr. Yvon D. Lapierre, Professor Emeritus at the Department of Psychiatry at the University of Ottawa, the Institute has finally made the transition from virtual to reality. Indeed, the foundation Dr. Lapierre laid is becoming the hub of a large network of researchers in hospitals, universities and other organizations in Ottawa and across Canada. It carries out its research in collaboration with a wide range of partners who possess many kinds of expertise; most importantly, it is founded on the widely recognized clinical excellence of the Royal Ottawa Health Care Group. As a result, the research of the University of Ottawa IMHR is not only influencing the clinical care at the hospital, but is helping set new and effective standards of mental health care for people worldwide.

Our current research programs build on our clinical strengths, focusing on five core areas of investigation including anxiety disorders, mood disorders, schizophrenia, youth psychiatry and forensic psychiatry. Our vision is to develop a fully integrated approach to the detection and treatment of mental illness in a unique setting of translational research, with a particular focus on early detection.

Researchers and clinicians work closely together identifying issues most important to those suffering from mental illness and ensuring the effective application of new research findings. Although many on- and off-site clinicians and researchers have significant collaborations with the Institute, only a small number of them are profiled in this next section.



Anxiety Disorders

Anxiety disorders are very common; in fact, they cause moderate to severe difficulties in the lives of 12 percent of Canadians. The symptoms of the illness are chronic feelings of worry, fear and even outright panic that are not related to the person's real situation but which keep him or her from functioning normally.

These disorders include general anxiety, social anxiety, phobias, post-traumatic stress disorder, panic attacks and obsessive-compulsive disorder.



Dr. Diana Koszycki, Associate Professor of Psychiatry at the University of Ottawa, is a renowned expert in the field of anxiety disorders. She is the director of the Institute's Stress and Anxiety Clinical Research Unit. This team seeks to help people who suffer from these illnesses by focusing on three areas: to find methods of early detection for anxiety disorders; to find preventive measures for people who are at risk for developing the disease; and to find more effective anti-anxiety treatments.

Dr. Diana Koszycki is investigating the possibility that genetic abnormalities are associated with the illnesses. She is also trying to find out whether certain genes affect the response to experimentally-induced anxiety in healthy subjects, and whether genetically high-risk children are different from genetically low-risk children in their biological and psychological characteristics. From the clinical perspective, she is investigating the effectiveness of psychotherapy in anxiety disorders.

Dr. Koszycki is also working with Dr. Peter Zwanzger, a Research Fellow, who has come from Ludwig-Maximilians University in Munich, Germany, for a special project that looks at children whose parents suffer from panic and anxiety disorders. The project's goals are better prevention and intervention methods, and the

from left to right
Dr. Diana Koszycki
Dr. Peter Zwanzger
Dr. Jacques Bradwejn



Early detection and prevention of anxiety disorders is an important goal because it can avert so much suffering.

early identification of children who are healthy but who are at high risk for becoming ill.

Finding improved treatments is the particular interest of Dr. Jacques Bradwejn, Chairman of the Department of Psychiatry at the University of Ottawa, Psychiatrist-in-Chief of the Royal Ottawa Health Care Group and Head of Psychiatry of The Ottawa Hospital. He researches anxiety and panic disorders through biology, genetics, psychopharmacology and psychotherapy. He has pioneered research on the role of a brain protein CCK in panic disorder, research that may lead to new diagnostic, preventive and therapeutic avenues. Further to these studies, he is investigating psychological therapies and the effectiveness of new medications and alternative therapies for the treatment of anxiety disorders.

Early detection and prevention of anxiety disorders is an important goal because it can avert so much suffering. With success in these areas and with new therapies for those who are prey to this illness, the unit's researchers feel they can make a great difference in people's lives.



Mood Disorders

from left to right
Dr. Paul Grof
Dr. Anne Duffy
Dr. Jean-Claude Bisslerbe

Varieties of depression are the most common mood disorders. Symptoms include feelings of worthlessness, a loss of interest in normally pleasurable activities, sleep disturbances and changes in appetite. At the other extreme is mania, in which a person displays inappropriate elation, poor judgment and hyperactivity. In bipolar disorder, depression and mania alternate in the same individual.



Depression is so widespread that in any one year, up to 1.5 million Canadians will experience a major attack. Overall, around 8 percent of Canadian adults become severely depressed at some time in their lives. Globally, depression was the fourth leading cause of disease burden in 1990 and by 2020 will be the single biggest cause.

To help those suffering from depression, the Institute's Mood Disorders Research Program investigates the causes of mood disorders and examines how the illnesses develop. Connected to this are studies to find better treatments, along with methods of early detection that will allow these individuals to receive help before they become severely ill.

Dr. Paul Grof, Full Professor of Psychiatry at the University of Ottawa, is the director of the Mood Disorders Research Program. In recognition of his internationally-renowned work in affective disorders, Dr. Grof was recently awarded the prestigious Nola Maddox Falcone Prize for Affective Disorders Research, by the U.S.-based National Alliance for Schizophrenia and Depression (NARSAD). For the past 40 years, his work has focused on the clinical and research aspects of mood disorders and, in particular, on the biological, psychosocial and transpersonal aspects of bipolar disorder. His most important projects include the explorations of these illnesses in terms of genetic contribution, neurohormonal abnormalities and medication. Dr. Grof believes that matching the specific problems and clinical profile of each patient with an individualized, effective treatment will potentially lead to better outcomes and better mental health for people suffering from mood disorders.

Dr. Grof works closely with Dr. Anne Duffy, Associate Professor of Psychiatry at the University of Ottawa, who is the recipient of a Canadian Institutes of

Health Research (CIHR) New Investigator Award. This prestigious award is given to Canada's most promising young health researchers in recognition of their scientific accomplishments.

Dr. Duffy is engaged in a long-term project involving children whose parents suffer from bipolar disorder. Her research has found compelling data about neurocognitive functioning and stress hormone regulation in children.

Discovering causes for the chronic type of mood disorders will contribute to its early detection and lead to better psychological and medical treatments.

Further studies will compare a group of children at risk for mood disorders to a group drawn from the general population. This work will examine biological and psychosocial risk factors in order to understand the evolution of the disease, both in high-risk children and in children whose risk is normal. Dr. Duffy's aim is to identify these illnesses early on and to develop effective strategies for speedy intervention and prevention.

The clinical director of the Mood Disorders Program, Dr. Jean-Claude Bisserbe, Full Professor of Psychiatry at the University of Ottawa, has recently moved to Canada from France to join the Royal Ottawa Hospital. Further to his clinical activities, he is conducting research on people whose symptoms are highly recurrent, or chronic and continuous, rather than intermittent. To understand this aspect of the illness, Dr. Bisserbe looks at a variety of psychological, biographical and biological factors in his patients. He then compares these factors to corresponding ones in patients who have intermittent symptoms and in healthy people. Discovering causes for the chronic type of the illness will contribute to its early detection and lead to better psychological and medical treatments.

Mood disorders have a severe impact on personal lives and on society, the latter through lost workplace productivity and stress on the health care system. The work of University of Ottawa IMHR's Mood Disorders Research Program will benefit everyone by finding better avenues to the early identification and treatment of this illness.





Schizophrenia

Schizophrenia is one of Canada's most serious brain diseases. Affecting about 1 percent of the population, its effects on its victims and their families can be catastrophic. The delusions, social withdrawal, loss of motivation and thought disorders that are the symptoms of schizophrenia cause great pain and distress in everyone touched by the illness.



Schizophrenia occurs more often in people whose immediate family members suffer from the disease, but its exact cause remains unknown. Because of this knowledge gap, researchers at the University of Ottawa IMHR and their collaborators use a multidisciplinary strategy in their work, investigating genetics, family histories, biochemistry and other factors.

Dr. Alain Labelle, Associate Professor of Psychiatry at the University of Ottawa, is the Clinical Director and interim Research Director for the Schizophrenia Program at the Royal Ottawa Hospital. He is examining the genetic aspects of the disease. One approach he uses is to survey patients' families for impairments such as problems with memory retention. If schizophrenia is based on genetic factors, such impairments may help detect which genes contribute to the illness. This may allow researchers to identify people at risk, so that they can get early help if they begin to develop the disease. In the quest for safer and more effective treatments for schizophrenia, Dr. Labelle is also involved in clinical evaluation of newer neuroleptic drugs under development.

The Institute's researchers approach schizophrenia through several collaborative initiatives. Among its partners is Dr. Paul Albert, Full Professor of Cellular Molecular Medicine at the University of Ottawa, and senior scientist at the Ottawa Health Research Institute. Dr. Albert is investigating the role played in schizophrenia by new polymorphisms (genetic mutations) that he has discovered. Because these mutations may provide genetic markers for schizophrenia, they could complement or replace the behavioral tests now used for diagnosing the disease. This work will contribute to earlier detection and treatment. In addition, the genetic knowledge gained in Dr. Albert's research may lead to new drugs to treat the illness.

Another University of Ottawa IMHR collaboration involves Dr. Paul Roy, Assistant Professor at the Department of Psychiatry and Director of the Ottawa



top row

Leonard Wall

bottom row

Dr. Alain Labelle

Dr. Paul Albert

Dr. Paul Roy



First-Episode Psychosis Program (OFEP). In a group effort with three other specialized treatment centres in Ontario, Dr. Roy is collecting extensive clinical and demographic data on first-episode patients to establish a common provincial database, to track multidimensional outcomes within OFEP, and to compare outcomes between the other Ontario treatment

centres and with published international data. The data will also allow for a preliminary examination of outcome predictors in first-episode patients treated in four centres across Ontario. In addition, a novel peer-group intervention is currently being studied.

Dr. Roy is working as well with Dr. Richard Bergeron of the Ottawa Health Research Institute (OHRI)

to evaluate a new augmentation strategy for atypical antipsychotics. A genetics study, designed in collaboration with the Neurosciences Research Department of OHRI, is also being launched.

To promote better communication and support at a grass-roots level, the University of Ottawa IMHR works closely with the community through its partnership with the Schizophrenia Society of Ontario and its president, Leonard Wall. A non-profit volunteer organization, the Schizophrenia Society is an advocate for services and for the elimination of the stigma surrounding mental illness. Collaboration with the University of Ottawa IMHR is important to the Society because research can lead not only to a cure for schizophrenia, but also to ways of improving the lives of families who suffer from the disease.

Unfortunately, a great deal of public misunderstanding and fear is associated with schizophrenia, which causes its sufferers severe difficulty in finding work, shelter and treatment. The nature of schizophrenia causes its sufferers to come into greater contact with the legal and correctional systems, as well as the homeless. They are also much more likely to commit suicide than are healthy people; about 50 percent of those with schizophrenia attempt suicide and 10 percent succeed. But through the research of the University of Ottawa IMHR and its collaborators in the early detection, prevention and treatment of schizophrenia, there is significant hope of helping those afflicted live a balanced life.

**The University of Ottawa
IMHR works closely
with the community
through its partnership with
the Schizophrenia Society
of Ontario.**



Youth Psychiatry

It is very disturbing to note that the incidence of mental illness in younger individuals appears to be on the rise. When mental illnesses strike down young people in their prime, they seriously disrupt their social development, education, career and family plans. The cost to them, to their families, to the welfare and health care systems, and to society as a whole is enormous. To take just two examples: since 1987, hospitalizations for eating disorders in young women under 15 have increased by 34 percent. Suicide, often as a result of depression, is the second most common killer of teens in Canada, accounting for about 45 percent of the deaths among people 15-24 years old. Although the onset of serious mental illness often occurs in this age group, it often falls between the cracks, as they are neither children nor adults. Like with many illnesses, early detection is still the best predictor of outcome in our youth.

from left to right
Dr. Martine Flament
Dr. Rob Milin



These stark numbers conceal a harsh reality that investigators at the Institute's Youth Psychiatry Research Unit confront every day. Among these researchers is Dr. Martine Flament, the unit's director and Full Professor of Psychiatry and Psychology at the University of Ottawa, who came from France to join the University of Ottawa IMHR team in December 2002.

Dr. Flament's work deals with eating disorders and with obsessive-compulsive disorders (OCD) in the young. To understand why OCD therapies work only for some patients, Dr. Flament looks for factors that may predict responses to treatment, such as a family history related to the disease. She also measures biochemical markers to see if they change in ways that reflect the patient's clinical condition. Dr. Flament hopes to combine this research with brain-imaging studies to clarify the best therapies for OCD.

Her research in eating-disorders includes studies of anorexia nervosa and bulimia nervosa. It compares risk factors in different countries by surveying high school students in France, the United States and Canada. One objective is to see if differences in eating habits, attitudes to food, and family values add to risks such as low self-esteem. Greater understanding will help reveal the kinds of treatment that work best for these illnesses and allow earlier diagnosis and intervention.

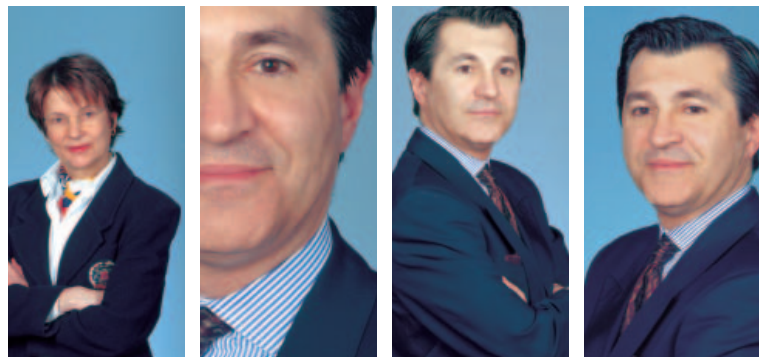
Depression in young people is the field of Dr. Rob Milin, Clinical Director of Youth Psychiatry at the Royal Ottawa Hospital and Assistant Professor of Psychiatry at the University of Ottawa. He and his colleagues are involved in psychopharmacology trials in the treatment of psychiatric disorders in adolescents, including major depressive disorder, Asperger's Disorder and psychotic illness.

His work on depression aims to establish, through family-association genetic studies, the genetic risks for early-onset depression during adolescence. He collaborates with Dr. Duffy and Dr. Grof of the Mood Disorders Research Program to investigate patients who are at high risk for early-onset mood disorders.

In this connection, he will work with a community sample of adolescents who have no significant genetic risk for mood disorders, but who may develop them for other reasons. The project examines these non-genetic causes to see if early intervention can keep the disease at bay, or, if the

person becomes ill, to determine the best treatment. In addition, future research seeks to identify protective factors that might counteract the risk of falling ill with the disorder. Dr. Milin also works in collaboration with the David Smith Centre in the area of adolescent dependence on cannabis.

When mental illnesses strike the young, they often interrupt and derail their life-long plans at a critical phase in their development, resulting in long-term devastation. Thus the field of youth psychiatry and research into the prevention, early identification and early treatment in particular, are critically important. The Youth Unit's research is a profound investment in the future, not just for the young, but for us all.



One project examines non-genetic causes of mood disorders to see if early intervention can keep the disease at bay, or, if the person becomes ill, to determine the best treatment.



Forensic Psychiatry

Forensic psychiatry deals with people whose untreated mental illnesses cause them to commit crimes. These include domestic and social violence, child abuse and sexual offences. These crimes often result in severe emotional, physical and psychological trauma to the victims and society in general.

The Institute's Forensic Psychiatry Research Unit is at the forefront of investigation in the area of sexual offenders. Dr. Paul Fedoroff, the unit's director and Associate Professor of Psychiatry at the University of Ottawa, is working with his team to improve the assessment and treatment of these individuals. The research includes building a database that contains information on the 3,000 patients who have been treated at the clinic.

Dr. Fedoroff also works with people who have deviant sexual behavior but who have never committed a crime, and who are now coming to the Forensic Clinic hoping to find help. In connection with this, he is investigating new medications that appear to both decrease deviant sexual interests and enhance normal ones.

World renowned for his vast experience as a forensic psychiatrist, Dr. John Bradford is the Clinical Director of Forensic Psychiatry at the Royal Ottawa Health Care Group, and Full Professor and Division Head of Forensic Psychiatry at the University of Ottawa. He is well on his way to establishing an innovative Forensic Psychiatric Centre in partnership with Ontario's correctional system. His work examines the development and clinical characteristics of deviations like pedophilia. Distinguishing among types of offenders contributes to the management of risk. Ultimately, with the new Forensic Centre in place, not only will people within the correctional system be treated, but a new opportunity to better research criminal behavior linked to mental illness will lead to a safer society and fewer victims of crime.

top row
Dr. A.G. Ahmed
Dr. John Bradford
Dr. Gina Madrigano

bottom row
Dr. Paul Fedoroff





Early treatment of sexual offenders will help them lead normal lives, prevent harm to others and diminish the burden on the legal and health care systems.

Dr. Gina Madrigano, with a PhD in psychology, brings an additional perspective to the unit's work. She conducts research on sex offenders, specifically with developmentally-delayed and juvenile populations. One of her projects is to validate a risk-assessment protocol for patients in the developmentally-delayed group. The other is to better understand the development of deviant interests. Ultimately, her research will contribute to timely detection, better supervision and treatment of such individuals.

A further focus of the Forensic Psychiatry Research Unit is dysfunctional anger that leads to distress, social and occupational impairment or legal and financial implications. Anger management is the specialty of Dr. A.G. Ahmed, Assistant Professor of Psychiatry at the University of Ottawa. He runs the Anger Disorders Clinic at the Royal Ottawa Hospital, and conducts research into the characterization and classification of subtypes of dysfunctional anger. This research will provide mental-health professionals with the much-needed clinical tools for accurate diagnosis and treatment of anger disorders.

The disorders studied by the Forensic Psychiatry Research Unit are important as they impact upon people and society in very serious ways. Successful, and hopefully early, treatment of these offenders will help them lead normal lives, prevent harm to others and diminish the burden on the legal and health care systems. The research unit's work to discover how to keep people from becoming ill in the first place, and detect illness in time to prevent criminal behaviour, is an important tool to curb domestic and social violence, child abuse and sexual offences.



OUR PARTNERS SPEAK

The University of Ottawa IMHR is committed to working in a collaborative model and has established many partnerships with other centres. At the local level, for example, we will research brain imaging with the University of Ottawa Heart Institute, and we are close partners with the Children's Hospital of Eastern Ontario (CHEO) and the CHEO Research Institute. We have developed strong links with both of Ottawa's universities, developing collaborations with many of their departments and institutes, and have established a formal affiliation with the University of Ottawa.

Across Canada, we cooperate with major mental health research centres, including the Centre for Addiction and Mental Health in Toronto and the Douglas Hospital in Montreal. Internationally, the Institute's unique approach to mental health is drawing the interest of people with strong research, clinical and academic backgrounds, helping us recruit researchers from Canada and around the world. As well, we are working to reverse the brain drain by bringing home Canadians currently undertaking leading-edge research abroad.

Through these partnerships and through those with the Royal Ottawa Health Care Group, the Associates-in-Psychiatry and the Royal Ottawa Health Care

Foundation, the University of Ottawa IMHR helps integrate research, education, teaching and clinical services to provide patients with the very highest quality of psychiatric care. This is the best formula in the world for helping people who suffer from mental illness.

Royal Ottawa Health Care Foundation

Research represents hope and promise for the future. Philanthropy is the vehicle to make an investment in family, friends and neighbours and play an active role in the realization of significant advances in mental health research. The Royal Ottawa Health Care Foundation is proud to be a committed partner in realizing the vision of the University of Ottawa IMHR.

Timothy Kluke, President and CEO

Royal Ottawa Health Care Foundation

By investing in research, the University of Ottawa IMHR will continue to impact on virtually every aspect of medicine. From heart disease to cancer, research is the fuel for the improvement of the human condition, and the Institute will be a centre for fostering innovative ideas, education, and world-class research and its applications. An investment in the University of Ottawa IMHR is an investment in all our future.

Barbara Corkum, Chair, Board of Directors

Royal Ottawa Health Care Foundation



Royal Ottawa Health Care Group

As the partner most closely involved with the University of Ottawa IMHR, we are keenly aware of the Institute's crucial importance to the future of mental health. Studies have consistently shown that strong research programs in a health care environment also mean excellence in patient care, as well as gold standard education of those training to work in the field of mental health and neuroscience. This partnership gives us the best methods of finding new and better treatments for mental illness and offers us the best hope that a cure is ultimately on the horizon.

George Langill, CEO

Royal Ottawa Health Care Group

The mandate of the Royal Ottawa Health Care Group is to provide very specialized mental health care, and the key to success is linking clinical services and research. So we were very glad to be able to partner with the University of Ottawa IMHR right from the beginning, and help it become one of the premier mental health research facilities in the world.

Jeffrey Dale, Chair, Board of Directors

Royal Ottawa Health Care Group

University of Ottawa

The establishment of strong partnerships between the IMHR and the University of Ottawa will greatly enhance the research opportunities at both the Institute and the University. The links between the Institute and the University are natural ones, because we share a common interest in supporting mental health research through

our faculties of medicine, health sciences and social sciences. The synergy that will result from this partnership will allow us to tackle the most challenging and exciting mental health research issues that might otherwise be difficult to address.

Dr. Gilles Patry, Rector and Vice-Chancellor

University of Ottawa

Studies have long shown that patient care is optimized when research and education are well integrated with, and have relevance to, clinical activity. The University of Ottawa IMHR is perfectly positioned to capitalize on this important integration and become a world leader in mental health research. As a result, individuals and families who suffer from mental disorders will benefit from the latest advances coming from researchers in the Institute. The University of Ottawa is proud to be an important partner in this bold initiative.

Dr. Peter Walker, Dean, Faculty of Medicine

University of Ottawa

Associates-in-Psychiatry

The partnership between the Associates-in-Psychiatry and the Department of Psychiatry's research existed before the birth of the University of Ottawa IMHR, and for many years we have supported, participated in and made financial contributions to important mental health research. We are more committed than ever to see the Institute flourish because we know it directly benefits our patients and their families.

Dr. Reghuvaran Kunjukrishnan, Chair

Associates-in-Psychiatry, Royal Ottawa Hospital



from left to right
Timothy Kluke
Barbara Corkum
George Langill
Jeffrey Dale
Dr. Gilles Patry
Dr. Peter Walker
Dr. Reghuvaran Kunjukrishnan



THE FUTURE OF MENTAL HEALTH RESEARCH

The University of Ottawa IMHR is establishing a network for integrated research in the early identification and treatment of mental disorders. As this network grows, it will bring the best researchers and clinicians together to look at mental health from many perspectives including the cognitive, experiential, psychosocial, behavioral, genetic, neuroendocrine, neuroanatomical and neurochemical aspects.

The core of this network will be located in a new state-of-the-art research tower, which will provide a full range of leading-edge technologies needed to confront the challenge of mental illness. Here, researchers from Ottawa, Canada and the world will use the Institute's cutting-edge tools as they work with our clinical and research teams to share their knowledge, skills and expertise. Facilities such as evaluation suites and innovative information technologies will contribute to the pursuit of research excellence, helping the Institute become a home for talent at the forefront of genetics, brain imaging, behavior, neuroscience and clinical work.

Members and collaborators of the Institute will have access to state-of-the-art facilities and a dynamic environment, within which they will share their energies and ideas in pursuit of a common goal. The Institute and its partners are committed to the goal of reducing the enormous economic and social burden of mental illness and, most importantly, reducing the terrible price it exacts in human suffering.

Research Chairs

A key strategy for building a critical mass of world-class researchers is through the creation of endowed research

chairs. The University of Ottawa IMHR has created such chairs in mood disorders, schizophrenia and stress and anxiety disorders. These chairs are academic positions led by senior scientists who develop and direct teams of leading researchers. The chairs are financed through the generous contributions of stakeholders including ROHCG and its clinicians, private and corporate donors, the ROHC Foundation, and the University of Ottawa.



Dr. Pierre Blier, renowned scientist and clinician, is the inaugural holder of the Endowed Research Chair in Mood Disorders at the University of Ottawa IMHR. The exciting developments at the Institute have contributed to the repatriation of Dr. Blier from the University of Florida. Prior to his move to Florida, he had been a professor of Psychiatry at McGill University. He has published over 200 scientific

papers, and is one of the most highly cited clinician-scientist in the field. He has received several awards including the Medical Research Council Centennial Fellowship, Scholarship and Scientist Award, the Canadian College of Neuro-Psychopharmacology Young Investigator Award, and more recently the prestigious Max Hamilton Award from the Collegium Internationale NeuroPsychopharmacologicum. His main clinical interest is in the pharmacotherapy of major depression, especially with treatment-resistant individuals. By exploring the mechanisms at work in antidepressant and anxiolytic treatments, he is successfully treating patients that fail to respond adequately to standard antidepressant medications. As an active clinician, Dr. Blier strives to bring his scientific discoveries in the laboratory directly to his patients.