



# Eastern Missouri Psychiatry

Vol. 33 No. 1 January 2007

Newsletter of the Eastern Missouri Psychiatric Society (EMPS)

\*\*\* A District Branch of the American Psychiatric Association \*\*\*

## Ryall Elected to Lead APA's Midwestern Region

In May 2006, St. Louis Psychiatrist Jo-Ellyn Ryall, MD was voted by members of APA's midwestern district branches to become their representative to the legislative body of the APA, the "Assembly". The Assembly has seven geographical areas; the midwestern area designated Area IV. Dr. Ryall is therefore *Area IV Representative to the APA Assembly*. Dr. Ryall succeeds Ronald Burd, MD of North Dakota, who was elected Recorder of the APA Assembly in May. Prior to her new position, Dr. Ryall served for several years as the Deputy Area IV Representative to the Assembly.

Dr. Ryall received her medical degree and residency in Washington University, where she also served for several years on the clinical faculty.

Currently, she is in private practice in the St. Louis area. Dr. Ryall has a long history of public service to psychiatry and medicine. She is on the Executive Council of the EMPS, and in the past has served as the society's President. As EMPS' former Public Affairs Chair, Ryall has addressed mental health and community organizations. For two years, she was also a regular guest on "Your Mental Health", a weekly segment on an NBC-TV affiliate. In addition, she co-chaired the "Mental Illness Awareness Coalition of Metropolitan St. Louis", which educates the public about mental illness.

Ryall is a past Chair of APA's Committee on Bylaws, and has also been active in lobbying Missouri lawmakers in Jefferson City in support of mental health legislation. Ryall is a

past Vice-Chair of the Council on Constitution & Bylaws of the American Medical Association (AMA), and a Missouri delegate to the AMA.



**Jo-Ellyn Ryall, MD**  
*Area IV Representative to the  
APA Assembly*

## EMPS Gets New Exec. Director



**Rebecca DeFilippo, MS,  
MBA, CMP**  
*EMPS Executive  
Director*

EMPS has named Rebecca DeFilippo its new Executive Director. Ms. DeFilippo will succeed Gordon "Ron" Garrett, who retired last December. Effective January 1, 2007, DeFilippo will manage day-to-day operations of the society, with an emphasis on membership recruitment and retention, medical education, communications, and financial management.

Born and raised in Youngstown, Ohio, DeFilippo earned master's degrees in education from Youngstown State University and in business administration from Illinois State University. She is a Certified Meeting Professional. DeFilippo has extensive experience with continuing medical education meetings and conferences and in association management. Since 1997, she has owned

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*The President's Column*

## Our Psychiatric Society Can Do Even Better

By Jack Croughan, MD, EMPS President

**E**MPS has several opportunities to pursue this coming year: First, we must continue to respond appropriately to efforts to enact Psychologist Prescribing legislation.

Next, we need to institute CME-based education programs that are both relevant and scheduled regularly so that membership can count on high quality programs at a predictable frequency to meet at least a significant proportion of requirements for license renewal.

Next, we need to increase our membership and hence our society income to allow us to pursue at least the above two goals. Lobbying costs regarding legislation are expensive. Costs of speaker honoraria and member dinners at CME programs have been met historically by grants from the pharmaceutical companies. This practice however is being frowned upon at the national level of APA and many District Branches are looking to other avenues of income. If each of you would bring in one new member every year we'd be home free on the income side of our goals.

Next, we should be more relevant than just a practitioners' guild. There

are many local and statewide areas of mutual interests looking for input from societies such as ours. There are also many areas of problems we could and should be looking into to weigh in for change as advocates for our clients and patients when likely no one else may be speaking with as loud a voice as we should be able to muster.

Finally, I am very pleased to announce that we shall have a new Executive Director starting January 1st, 2007. She is Rebecca Defilippo. I am very pleased she will be joining us. She will be working with us on a parttime basis. She has considerable experience in all of the areas of concern to us. A separate article in this newsletter describes more about her. Please welcome Ms. Defilippo as you come into contact with her through the society's activities.

In conclusion, our society is only successful to the extent that each member offers their wisdom, energy and expertise to achieve our goals. As such, if there is just one of you who is interested in one or more of the above goals, or if you have other ideas you want the society to pursue, I encourage you to be in contact with me. My office number is (314) 725-4004.



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### OFFICERS 2006-2007

#### *President*

Jack Croughan, M.D.

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Sundeep Jayaprabhu, M.D.

#### *APA Assembly Representative*

Garry M. Vickar, M.D.

#### *Deputy APA Assembly Representative*

Vadim Baram, M.D.

#### *Immediate Past President*

Jay Meyer, M.D.

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Lawrence Kuhn, M.D.

#### *Forensic Psychiatry*

Michael Jarvis, M.D., Ph.D.

#### *Geriatric Psychiatry*

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#### *Legislative Affairs*

Eduardo Garcia, M.D.

#### *Members-in-Training*

Chris Loynd, D.O.

#### *Membership*

Jo-Ellyn Ryall, M.D.

#### *Newsletter*

Daniel Mamah, M.D.

#### *Private Practice Psychiatry*

Garry M. Vickar, M.D.

#### *Public Affairs*

Collins Lewis, M.D.

### APA AREA 4 COUNCIL

#### *Representative*

Jo-Ellyn Ryall, M.D.

# SLU Psychiatry Chair Resigns

By Arturo Taca, Jr., M.D.

**D**r. Joan Lang, Chair of the SLU Dept of Psychiatry, resigned her position as of July 30, 2006. She moved cross-country to live with one of her daughters in the Santa Barbara area of California and reports that she loves the lack of routine but misses the professional relationships she left behind.

Upon her resignation, the Dean appointed Dr. Hilary Klein Interim Chair of the Department. Dr. Klein had been Vice Chair of Psychiatry for the previous five years.



Joan Lang, MD  
Outgoing Chair



Hilary Klein, MD  
Interim Chair

## New Exec. Director

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*RD+2 Meeting Management*, which provides complete meeting planning and management services for nonprofit and corporate clients. As an independent contractor, she has provided

onsite management for pharmaceutical industry and other corporate meetings and events, and for continuing education meetings aboard cruise ships. She also has planned and managed annual meetings for NAMI-Missouri, NAMI St. Louis and military reunion groups. In addition, she has overseen newsletter publication for several nonprofit organizations.

At the Missouri Institute of Mental Health (MIMH), a center for policy, research and training of the University of Missouri-Columbia School of Medicine, she managed a weekly visiting speakers series and more than 40 state, national and international conferences annually. Topics included psychiatric disorders, substance abuse, autism, ADHD, genetic disorders, child abuse, and brain trauma. Also while at MIMH, she served in a leadership role with the Mental Illness Awareness Coalition and, in 1993, received the EMPS Award of Excellence for her efforts to market the Coalition's educational activities.

DeFilippo also served as assistant executive director with the Community Behavioral Healthcare Association, based in Springfield, Ill., where she managed legislative forums, annual meetings, member communications, and member recruitment and retention efforts for the statewide trade association. She was a registered lobbyist with the Illinois General Assembly.

DeFilippo is an active member of Meeting Professionals International (MPI)-St. Louis Area Chapter. She helped St. Louis win MPI's coveted Chapter of the Year award for three consecutive years, and the St. Louis chapter named DeFilippo its Planner of the Year in 2005 and 2003.

She has also published articles on the meetings industry and medical case management in *The Meeting Professional* and *The Case Manager*. DeFilippo resides in Fenton, Mo.

## Forensic Psychiatry Expands at SLU

By Arturo Taca, Jr., M.D.

**O**n January 1, 2007 Dr. Alan Felthous, nationally known forensic psychiatrist, will join the faculty at SLU Department of Psychiatry. The Department will begin providing psychiatric care to the St. Louis County Jail and the Juvenile Jail, thereby expanding their forensic activities into the correctional sphere. The Department is very hopeful about plans to start a forensic fellowship program as soon as feasible.

Dr. Felthous, most well-known for his publications on aggression and on the Tarasoff doctrine, will be the President of the American Academy of Psychiatry and the Law next year.



Alan Felthous, MD  
President-Elect,  
American Academy  
of Psychiatry and  
the Law

## Wash U Alumni to Become APA President



Carolyn Robinowitz, M.D.  
APA President-Elect

**C**urrent APA President-elect Carolyn B. Robinowitz, M.D. received her medical training in St. Louis, graduating from the Washington University School of Medicine in 1964. She later underwent residency training at the Albert Einstein College of Medicine in New York. She is currently in private practice in Washington D.C., where she had been a Professor and Academic Dean at Georgetown University School of Medicine. At the APA, Dr. Robinowitz was the founding Director of

the Office of Education, and she has also served as President of the American Board of Psychiatry & Neurology and the American College of Psychiatrists.

Robinowitz will not be the first APA President trained in St. Louis. Rodrigo Munoz MD, who was president between 1998 and 1999, is a former psychiatry resident at Washington University. Dr. Robinowitz will assume the APA presidency for a year following the next APA general meeting in May, 2007.

# Missouri Attorney General Addresses Psychiatrists

By Daniel Mamah, MD

"Psychiatry and Law" was the theme of the talk by Missouri Attorney-General Jay Nixon addressing local psychiatrists on October 26th, 2006 at the Pomme Restaurant in Clayton, MO.

The Attorney General underscored that consistent budget cuts to Missouri's Department of Mental Health have resulted in adverse effects, including increased psychiatric hospitalizations, more transfers of mentally ill individuals into the correctional system, and increased homelessness. "Every penny invested in mental health services lessens the burden in other areas", he stated. He also mentioned that more efficient vocational rehabilitation programs are still needed in the State's correctional system.

Mr. Nixon expressed his disapproval of the recent Medicaid cuts in the State, which will sunset on July 1st, 2007, mentioning that about 28,000 children will be affected and left without health insurance. The state's Medicaid program is up for reauthorization in the Legislature next year.

The Attorney General also emphasized that disparities continue to remain in both outpatient and inpatient psychiatric treatment. He stated that the Government should not undervalue health services provided to those with mental illness (compared to physical illness), stating that "mental health parity is long overdue". He outlined three major goals for



Missouri Attorney-General Jay Nixon

Missouri: 1) to broaden prosperity of its citizens, which would involve fostering tertiary educational opportunities, 2) to create an effectively working state government, and 3) to ensure that Missouri is competitive worldwide in research technology.

In response to questions from the

audience, Mr. Nixon also commented on the ballot initiatives in the November 2006 elections. He indicated his support for raising the tobacco tax, stating that Missouri ranks 50th in the nation (with only a 17 cent tax per pack of cigarettes) and that smoking in teens has risen over the years. On the stem cell research initiative, Mr. Nixon also stated that these decisions are best determined by the scientists and not politicians.

Attorney General Nixon urged psychiatrists to get more involved with legislative issues affecting mental health care. "Nobody understands these issues better than psychiatrists", he remarked. "Your voice must be heard by the legislature, on behalf of the people you serve: the mentally ill".

Mr. Nixon also had some thoughts on how mental health advocacy may be improved. He advised that psychiatrists should become familiar with the State representatives in their districts, and arrange visits. "Call and make an

appointment. They will see you", he stated. Additionally, he emphasized the importance of speaking with *one voice*, such as through a psychiatric society, which significantly magnifies the influence of lobbying. Finally, he encouraged those affected by mental illness to also participate in advocacy efforts.

The event, which concluded with a presentation entitled *Bipolar Disorder and Geodon* by Jo-Ellyn Ryall, MD, was sponsored by Pfizer Inc.



At center, Mr. Nixon speaks from a podium (embossed with the Attorney Generals seal) to local psychiatrists at the Pomme Restaurant in Clayton, MO

## Mamah on DSM-V Task Force

**M**ay 2006, St. Louis Psychiatrist Daniel Mamah, MD was appointed to the DSM-V Task Force by the American Psychiatric Association until the publication of the manual. Dr. Mamah is currently on faculty at Washington University School of Medicine. His current research areas of focus are structural neuroimaging in schizophrenia and substance-related disorders, and psychiatric epidemiology.

The near 25-member Task Force, chaired by David Kupfer MD (and vice-chaired by Darrel Regier, MD, MPH) will oversee the development of the diagnostic manual which is expected to be published in 2011.



**Daniel Mamah, MD**  
Member DSM-V Task  
Force (2006-2011)

## Dr. Marcu Receives YWCA Award

**D**r. Mirela Marcu is being honored on Dec 7th at the Millenium Hotel with one of the 2006 YWCA Leaders Awards. This award recognizes her unique contributions to the immigrant and disenfranchised populations of St. Louis. Dr. Marcu treats the homeless mentally ill and Bosnian refugees. She also serves as a board member of Community Access to New Americans. This newest award follows her recognition last year by NAMI with the 2005 Mortimer Goodman Award for exemplary community service.



Members of the DSM-V Task Force and APA Staff (November 2006)

## DSM-V Prelude Website

**W**[www.dsm5.org](http://www.dsm5.org). That is the internet address of the APA created web site designed to keep the public and professionals informed about the plans and ongoing activities surrounding the development of DSM-V. The web site also provides an opportunity for psychiatrists to highlight problems with the current diagnostic system, and provide suggestions for improvement. This is important to the development process of the diagnostic manual, which has an anticipated publication date just five years away. Psychiatrists can also register to receive a newsletter which provides regular updates on the DSM-V process.



## Missouri Not Considered a “Mental Health Professional Shortage Area”

By Chris Loynd, DO

**T**he minimum employment requirement for a National Health Service Corps (NHSC) Scholar psychiatrist is to find a Mental Health Professional Shortage Area (MHPSA) Score of 19 or higher. Currently, on the NHSC registry there are no such sites within a 500 mile radius from the state of Missouri. The following article analyzes the means of measuring MHPSA scores and the lack of NHSC sites in Missouri.

Each state has a designated primary care office to determine the areas in most need and to calculate Health Professional Shortage Area (HPSA) scores. MHPSA scores can range anywhere between 0 and 25, with the highest scores representing the areas in most need of medical providers. These scores are used to coordinate attention to the areas in the country with the greatest medical shortage in order to allocate available resources appropriately. The National Health Service Corps (NHSC) utilizes medical providers willing to work in underserved areas of the country. In return, the NHSC pays the medical education for each provider in the form of a scholarship or a loan repayment program. For each year of tuition covered by the NHSC the provider in turn provides a year of medical service to a designated HPSA.

The major factor that determines a HPSA is the ratio of patient population to physician providers. In addition, an MHPSA score considers the poverty level, the percentages of youth and elderly, the amount of alcohol and drug abuse in the area, and the amount of travel time to the nearest source of care. Currently, in order for a NHSC scholar in the field of psychiatry to "match" at a possible underserved MHPSA, the minimal requirement is a score of "19". At the time this article was written, the entire United States only had twenty nine listings on the NHSC registry meeting the minimal criteria. The majority

of those listings are prisons in Texas, Arizona, or California.

It is difficult to imagine with all the mental health needs in this country that only twenty nine listings are considered the most underserved, and not one of them is within the state of Missouri. Looking further, of the twelve sites that are not prisons, one of them is the Whittier Street Health Center in Roxbury, Massachusetts. More so, if one were to locate this clinic on a map, it is just over 3 miles away from Harvard Medical School and the



Massachusetts General Hospital network. An HPSA can be designated based either on its particular location, which is the usual default mechanism, or can be calculated based on a particular population (e.g. the homeless population or the low income population) or a specific institution (e.g. a correctional facility).

The Boston clinic apparently was able to designate itself as a HPSA based on the homeless population it serves. According to most recent estimates, the number of homeless people living in Boston is about 8,015. The recent estimate of homeless people in St. Louis is a little over 10,000. Based solely on the numbers, it appears that if Boston can be ranked as one of the most medically underserved homeless populations in the country then clearly the population in St. Louis with more homeless people would qualify as equally underserved, unless, per capita, there are more psychiatrists in St. Louis than in Boston. However, New England is believed to have

more psychiatrists than any other part of the country.

There is a clinic in St. Louis called Grace Hill which provides a majority of medical care to the homeless population. Yet, there are no psychiatrists on staff to attend to their mental health needs, despite the total patient population tallying some 30,000, and about 12,000 of them are homeless. In addition, when looking at the HPSA scores for Grace Hill currently the HPSA scores for "medical" designation is 7, whereas the HPSA scores for mental illness designation is 9, indicating a greater shortage of mental health providers. Despite there being a handful of primary care providers and not one full time psychiatrist, the difference between the two HPSA scores does not seem to be much different: only a two point difference.

In contrast, when looking at the medical HPSA score of 3 at the Whittier Street Clinic in Boston with its 13 adult medical providers and comparing it to the MHPSA score of 19, you see a big difference. How can this major difference in scores be explained within the same population, especially when there are already two psychiatrists providing services? I was informed by the primary care office for the state of Missouri that one cannot compare the HPSA scores between states. It would seem logical that a scoring system utilized by a federal organization such as the NHSC should be standardized so that HPSA scores from different states can be equally compared and so the scores can remain consistent and accurately represent the HPSAs in most need. Currently, it appears such a standardized scoring system does not exist. As a result, there are many underserved mentally ill throughout the country that are clearly underrepresented.

Further, another point of disparity and difference resides in the comparison of MHPSAs with other "medical" HPSAs. Nationally, there are about 436 medical sites listed on the NHSC registry, compared to the 29 sites for psychiatry. At the time this article was written, in Missouri there were 25 sites listed as opportunities for a NHSC scholar, but not one of them



# Missouri Legislative Report 2006

By Mo McCullough, EMPS Legislative Lobbyist

Once again, the 2006 legislative session proved to be as eventful and contentious as those of years past. The definition of "eventful" depends on which party you ask, with the majority party calling it a huge success and the minority party calling it a big bust. There were 2048 bills and resolutions filed and only 167 passed. A majority of those 167 were consent bills (bills with no opposition). So as you can imagine, a few good bills passed, a few good bills died and, fortunately, so did a few bad bills. Overall, was it a successful year? You be the judge.

For the Eastern Missouri Psychiatric Society it was a successful year. We kept from passing HB 992 & SB 635

which would have allowed those over 21 years old to ride motorcycles without helmets; HB 1447 & SB 1128 which would have created prescribing psychologists; HB 1452 & SB 1034 which would have given Licensed Professional Counselors (LPCs) the right to diagnose; SB 1041 which would have created the crime of "knowingly receiving, selling, or obtaining personal health information without consent"; and SB 1210 the "false claims" Medicaid fraud bill. We passed SB 905 which was the medical malpractice bill. Also, the Dept. of Mental Health came out better in this year's budget. They came out with more money for mental health facilities, programs and salaries.

In 2007 there will be several new faces in the Missouri General Assembly but I'm afraid some of the same old issues will return. Among other things, you can count on the LPCs wanting to diagnose, the psychologists wanting to prescribe and motorcycle drivers wanting to seriously injure themselves.

Again in 2007 the EMPS, working together with other allied provider groups, will be fighting for you in Jefferson City. If you are not currently a member of EMPS or you know a colleague who has not yet realized the necessity of being represented in the halls of the Capitol, please sign up today. We're fighting for your patients.

## MH Shortage Area

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for a psychiatrist. Can we then assume from this that Missouri's major health concerns are all "medical", and Missouri, as a whole, is quite mentally healthy?

Despite there being no opportunities for an NHSC scholar to find psychiatric work in Missouri, what's worse is the criteria for designating a mental HPSA is higher when compared to other medical HPSAs. Essentially, as a scholar this translates into a psychiatrist needing to find a HPSA score of 19 or higher as opposed to a score of 14 or higher for other medical scholars.

One can argue the reason for such psychiatric limitations in Missouri is because the majority of underserved mental health needs are simply in other states. Also, the reason the criteria is higher for designating a MHPSA as a potential NHSC site could be because there are not many NHSC scholar psychiatrists. Since the NHSC commitment is centered on serving the areas most in need, the fewer scholars going into psychiatry will naturally have to go to areas with higher HPSA scores, and, therefore, have a harder time designating

other potential sites. However, this does not appear to accurately demonstrate the areas in greatest need for mental health care, especially since the majority of NHSC designated approved MHPSAs are prisons in California, Arizona, and Texas.

One can accept that the majority of MHPSAs are correctional institutions. But, it does not seem fair or objective to have the majority of approved sites located in only three states, especially when correctional institutions are all scored equally, with the majority of them having scores of 21 or higher. Is it truly possible that three states have the bulk of the most underserved mentally ill in their correctional facilities? If so, how does one differentiate a similar correctional institution in another state that has a lack of psychiatrists on staff. For example, I discovered that the only location in Missouri with a MHPSA score of "19 or higher" was the Federal Correctional Institution (FCI) in Springfield. Once again, like other FCI's, its MHPSA score was 21, yet unlike the FCI's or state prisons in California, Arizona, and Texas, it was not recognized as a NHSC potential site of employment for a psychiatry scholar to be placed. Only after rigorous research and communications with the appropriate people was I

able to get it listed as a potential job opportunity. *So, now Missouri has a site where an NHSC scholar can serve.*

Is the reason these certain sites are listed on the NHSC Job Opportunity webpage because these job vacancies have remained empty for the longest time? Or, is there more political and legal attention focused on these institutions for some reason which makes the need to fill these vacancies more expedient? If so, is the NHSC webpage list of job opportunities truly an accurate representation of the most underserved mental health needs in the country? How can individual states with similar underserved psychiatric needs get the proper recognition so that NHSC scholars willing to go to these states or already residing in these states can offer their services to places or populations of equal need?

Answering these questions will further alleviate the great shortage of mental health resources that exists beyond what is currently advertised. In addition, the NHSC scholars will have more options to pick from as future job opportunities of equal disparity, and clearly the disparity exists and is rather profound.

## Membership Update 2006

*EMPS welcomes the following new members:*

**Dawn Brown, MD**  
**Aura Eberhardt, MD**  
**Ericka Goodwin, MD**  
**Mollie Gordon, MD**  
**Sherifa Igbal, MD**  
**Shannon Jennings, MD**  
**Rachel Morel, DO**  
**Chinva Murali, MD**  
**Shajitha Nawaz, MD**  
**Amit Rathi, MD**  
**Mercy Sabapathypillai, MD**  
**Sheryl Salaris, MD**  
**Karim Saleh, MD**  
**Rangsun Sitthichai, MD**  
**John Wilkaitis, MD**  
**Daolong Zhang, MD**

## “Invisible Wristbands” for Mental Health Awareness

*By Daniel Mamah, MD*

**C**olored silicone wristbands have fast become an affordable fashion trend, with the purpose of raising awareness, showing support and raising funds for various causes. In November, 2006, the APA Assembly unanimously passed an Action Paper submitted by the Eastern Missouri Psychiatric Society, which proposed the development of transparent wristbands to bring attention to mental health related issues.

Currently, no specific wristband exists for mental health awareness. The transparency of the proposed bands symbolizes that mental health disproportionately goes “unnoticed” in our society. Despite the enormous prevalence of mental illness (about 20%), there are often insufficient public education forums, disproportionate research funding and under-funded public mental health systems.

The proposed “invisible wristbands” would also be debossed with the abbreviated APA slogan “Healthy Minds”, which is non-stigmatizing and conveys hope for improvement. If approved by the APA Board of Trustees, the wristbands would be available through the APA and at various APA meetings and functions by mid-2007.



## NAMI Walks the Path to Success

**T**he National Alliance for the Mentally Ill (NAMI) St. Louis held its fourth annual Walk on Saturday, June 3rd 2006 to raise awareness and funds for mental health causes. NAMI is the leading grassroots advocacy organization dedicated to improving the lives of those with mental illnesses and their families. About 850 people participated in the 3.1 mile walk from the Upper Muny Parking Lot in Forest Park, including several EMPS members.

Gross receipts were \$102,000 (exceeding the fundraising goal of \$100,000), which included the amounts brought in

by the NAMI “Walk Partners”: the Independence Center, BJC Behavioral Health and the Crider Center. NAMI St. Louis offers agencies serving those with mental illness the opportunity to participate in the Walk as a Partner, enabling them to keep 50% or more of the funds they raised for patients' needs and various mental health programs.

The Walk also included free refreshments, giveaways, music and various entertainment activities. Next years NAMI Walk will take place on Saturday, May 26, 2007 at 9 a.m. at the same location.



EMPS members Jay Meyer, MD (left) and Jo-Eilyn Ryall, MD (right) pose for the cameras at the NAMI Walk



Participants at the NAMI event begin the 3.1 mile walk in Forest Park

# *A Better Way to Treat Alcohol & Drug Addiction*



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Centers of America**

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*Call Assisted Recovery Center's 24-hour help line (314) 645-6840 for a free, confidential, no-obligation consultation.*

## Resident & Fellow Turnover (July, 2006)

### New Residents, SLU

- \* Dawn Brown, MD (SLU)
- \* Elena Luchanok, MD (Vitebsk, Belarus)
- \* Rachel Morel, DO (Kirksville, MO)
- \* Amit Rathi, MD (Maulana Azad, India)
- \* Karim Saleh, MD (Ains Shams, Egypt)
- \* Rangsun Sitthichai, MD (Chulalongkorn, Thailand)
- \* Jaime Hook, MD (PGY-2; SLU)



### Outgoing Residents, SLU

- \* Heather Brice-Hill, MD (Started own practice in Indianapolis, IN)
- \* Sherifa Iqbal, MD (Private practice with Allied Behavioral Consultants, STL)
- \* Ratna Mogullapu, MD (VA at Jefferson Barracks; on faculty at SLU)
- \* Jennifer Shashek, MD (Private practice in Edwardsville, IL)
- \* Arturo C. Taca, Jr., MD (St. John's Mercy Medical Center, STL; St. Mary's Hospital.; Medical Director of Assisted Recovery Centers of America)



### New Residents, Wash U

- \* Megan Auchenbach, MD (St. George's)
- \* Douglas Cook, MD (Case Western, OH)



- \* Brianne Disabato, MD (Mt. Sinai, NY)
- \* Davinder Hayreh, MD (SLU)
- \* Joshua Hogins, DO (Kansas City Univ)
- \* Christopher Maley, MD (U Tennessee)
- \* William Newman, MD (Vanderbilt)
- \* Kelechi Ogbuokiri-Loynd, MD (SLU)
- \* Daniel Yahya, MD (UMDNJ)
- \* Belinda Yu, MD (Wash U)

### Outgoing Residents, Wash U

- \* Jennifer Colvin, MD, PhD (Child Psych. Fellowship, Duke Univ.)
- \* Ellen Edens, MD (Master of Psychiatric Epidemiology program at Wash U; BJC Behavioral Health Clinic - North)
- \* Michelle Nichols, MD (Psychosomatic Fellowship, Brigham & Women's Hosp)
- \* Ginger Nicol, MD (Child Psych. Fellowship, Wash U)
- \* Stephanie Purcell, MD (Hospitalist, CO)
- \* Sanjeev Rao, MD (St. Anthony's, STL)
- \* Mini Tandon, DO (Child Psychiatry Fellowship, Wash U)
- \* Jeffrey Vander Kooi, MD (Clinical practice, STL)
- \* Amy Walton, MD (Hospitalist, Belleville, IL)



- \* Sofia Yahya, MD (Truman Memorial VA affil. with Univ. of Missouri-Columbia)

### New Geriatric Psych Fellows, SLU

(There were no new fellows in 2006)



### Outgoing Geriatric Psych Fellows, SLU

- \* Sanjeev Kamat, MD (Private practice at St. Alexis Hospital, STL)
- \* Aura Eberhardt, MD (VAMC in Springfield, MO)
- \* Katherine Buchowski, MD (Center Pointe Hospital, STL)



### New Child Psych. Fellows, Wash U

- \* Meg Corrigan, MD (Residency: Washington University)
- \* Petra Lipsmeyer, MD (Residency: Henry Ford, MI)
- \* Arif Mirza, MD (Residency: University of Rochester, NY)



### Outgoing Child Psych. Fellows, Wash U

- \* Sasha Khosravi, DO (now in Iowa)
- \* Syed Khan, MD (now in Indiana)
- \* Sridevi Gavirneni, MD (still in Missouri)



## Washington University School of Medicine Conte Center

**Principal Investigator: John G. Csernansky, M.D.**  
**Sponsored by: National Institute of Mental Health**

The major goal of the Conte Center is to improve understanding of the underlying causes and mechanisms of schizophrenia, especially during its earliest phases. The Conte Center is currently studying MRI (Magnetic Resonance Imaging) scans of patients with schizophrenia, and their healthy siblings.

Volunteers are needed, who have a diagnosis of schizophrenia, and healthy biological siblings between the ages of 9 and 30. Participation will involve a no-cost MRI (Magnetic Resonance) scan, plus 8-10 hours of interviews and cognitive testing. Participants in the study will not need to change their current treatments. Every participant will receive compensation for his/her time.

**For further information, please call:**  
**(314) 747-2162**  
**[www.conte.wustl.edu](http://www.conte.wustl.edu)**

## OBITUARIES

### Edward H. Kowert, MD, 88

**E**dward H. Kowert, MD, a retired board certified psychiatrist, teacher, editor and publicist, died on June 10, 2006, in his 88th year of life. Dr. Kowert practiced psychiatry in the St. Louis metropolitan area for nearly half a century. He was an associate professor of psychiatry at Washington University School of Medicine and member of the Barnes-Jewish medical staff. He served in the U.S. Army as a medical officer in World War II.

Dr. Kowert completed his psychiatric residency at Washington University, working at the veteran's clinic on Pine Street and the City Sanitarium with Dr. Edwin Gildea. Dr. Kowert began his private practice in 1949, often seeing patients for free if they couldn't afford to pay. An avid Sailor, Dr. Kowert published many works related to his specialty in psychiatry. He served as president of the Eastern Missouri Psychiatric Society in 1963, and edited its newsletter from 1968 to 1987. Dr. Kowert also was an authority on the life and experiments of Dr. William Beaumont, "The Father of Gastric Physiology" and a founding member of the Missouri State Medical Society.

Dr. Kowert is survived by his wife Marguerite Kowert, three daughters Jean and Cynthia Kowert and Anne Prohov, and a grandchild, Jennifer Prohov.



### George Saslow, MD, PhD, 99



**G**eorge Saslow, M.D., Ph.D., emeritus professor of psychiatry at the Oregon Health & Science University School of Medicine and one of the founders of modern psychiatry, died Sept. 16, 2006, in Portland, Ore. He was 99.

Dr. Saslow was Professor of Psychiatry at Washington University in St. Louis from 1943-1955 and Clinical Professor of Psychiatry at Harvard Medical School from 1955-1957. His passion for teaching began early in life, and remained his lifelong calling.

In the 1970s, Dr. Saslow was a member of the task force on nomenclature and statistics for the American Psychiatric Association's third edition of the Diagnostic and Statistical Manual (DSM III). Saslow mentored generations of health care professionals from many disciplines. He was a pioneer in providing inpatient milieu therapy (including families, aides and custodians as significant contributors to the mental health of the community), use of group therapy with students and colleagues as well as with clients, and started one of the nation's first mental health inpatient crisis units.

He is survived by his children: Michael G. Saslow, Rondi Saslow, Steven Saslow and Marguerite Saslow; granddaughters: Sarah S. Brown and Robin S. Brown; sisters-in-law: Melvene Ipcar Dyer-Bennet and Dahlov Zorach Ipcar, nieces and nephews.

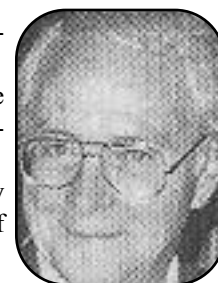
### John S. Schengber, MD, 74

**P**sychiatrist John S. Schengber, MD, a resident of Des Peres, died Thursday August 10th, 2006 of prostate cancer at St. John's Mercy Medical Center in Creve Coeur. He was 74 years old.

Dr. Schengber received a bachelor's degree from Xavier University in Cincinnati in 1952. He entered the Army, serving in Japan from 1952 to 1953 and reaching the rank of corporal. He then returned to his studies, graduating from St. Louis University School of Medicine in 1959.

In 1966, Dr. Schengber began his career in teaching as an associate professor of psychiatry at St. Louis University School of Medicine. He served in private practice for nearly 40 years in west St. Louis County. He was on the staff of hospitals including St. Mary's Health Center in Richmond Heights.

Among survivors are five sons, Dr. David Schengber, Michael Schengber, Robert Schengber, Stephen Schengber, Edward Schengbers; a sister, Mary Ann Hart of Atlanta; and eight grandchildren.



### Conrad S. Sommer, MD, 100



**D**r. Conrad S. Sommer, a psychiatrist and poet, died May 2nd, 2006 at his residence in Ladue. He was 100.

Born in Peoria, Illinois, he received a bachelor's degree from Bradley University and medical degree from the University of Illinois. In the mid-1940's, Dr. Sommer joined the staff of the former St. Louis County Hospital. He also taught at Washington University and served as a consultant for the Forest Park Children's Center, which would later merge with Edgewood Children's Center.

In 1956, Dr. Sommer was a founder of the St. Louis Psychoanalytic Foundation, where he was a past president and former medical director. He later founded the Gestalt Institute of St. Louis. He worked as a consultant and therapist for many decades.

Dr. Sommer wrote several books of poetry, including "Tender Poems for Tough Times", in 1983. The book related his experiences to religious faith, meditations and prayers.

In addition to his wife of 40 years, Lee Abrams Sommer, he is survived by two sons, Robert Sommer and Michael Sommer, two daughters, Barbara Sommer and Susan Sommer, three stepdaughters, Sandra Abrams, Sally Best and Cathy Specter, and 10 grandchildren.



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## Upcoming Events

1. **The Seventh Annual Guze Symposium on Alcoholism.** *Date:* Thursday, February 15th, 2007 (8.00 am - 5.30 pm). *Location:* Eric P. Newman Education Center, Washington University Medical Center, St. Louis, MO. *Contact:* Deb Hughes, (314)286-4444, [guzesymp@matlock.wustl.edu](mailto:guzesymp@matlock.wustl.edu) or visit [www.alcoholdependence.org](http://www.alcoholdependence.org).
2. **Mental Health Needs of Returning Soldiers and Their Families.** *Date:* March 8th-10th, 2007. *Location:* Holiday Inn Executive Center, 2201 I-70 Drive, SW, Columbia, MO. *Contact:* Rose Procter, (573)445-3823, [rprocter@centurytel.net](mailto:rprocter@centurytel.net).

We strive to make content in future issues of *Eastern Missouri Psychiatry* more representative of our membership, and encourage our members participation in its creation.

For communications regarding the newsletter, or to include articles, events or advertisements in future publications contact the Editor at:

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