

Practice Research Network ■ American Psychiatric Association ■ 1400 K Street, NW ■ Washington, DC 20005

New Leadership for APIRE and the PRN

The PRN would like to welcome Darrel A. Regier, M.D., M.P.H., and Joyce C. West, Ph.D., M.P.P., who will provide new leadership for the American Psychiatric Institute for Research and Education (APIRE) and the PRN, respectively.

Dr. Regier, who began his position as Executive Director of APIRE, and Director of the Office of Research on March 1, 2000, has provided both national and international scientific leadership in epidemiology, health services research, as well as diagnosis and classification. He comes to the Institute after working at the National Institute of Mental Health (NIMH) for 25 years, where he last served as Associate Director for Epidemiology and Health Policy research. Among his many accomplishments at NIMH, he organized and led the Epidemiologic Catchment Area (ECA) study, directed three research Divisions covering the

areas of Epidemiology, Prevention, Clinical Research, and Health Services Research. Before coming to NIMH, he completed his psychiatry residency at Massachusetts General Hospital where his interest was in community psychiatry, particularly at the neighborhood level of interaction with primary health care. As the new Director of APIRE, Dr. Regier has an interest in developing the capacity of the PRN to generate research to inform national health policy issues such as parity-level insurance coverage for mental disorders. In addition, he would like to develop the potential of the PRN to evaluate hypotheses that may enhance the validity of the DSM-IV diagnostic criteria and its clinical utility in predicting clinical course and treatment response.

Joyce C. West, Ph.D., M.P.P., became the new PRN Director at the beginning of this year. She first joined the APA in 1993,

and has played an active role in the development of the APA's research initiatives. In her first position at the APA, Dr. West worked closely with Drs. Pincus and Zarin to develop and manage the PRN and its core data collection efforts as Manager of Research in the Office of Research. More recently, Dr. West served as the Associate Director for Research in the APA Office of Quality and Improvement and Psychiatric Services where

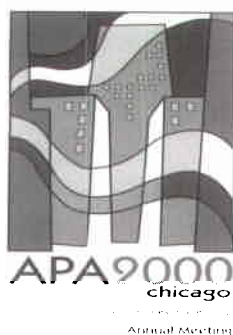
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Future Research for PRN

The PRN needs your help! In this edition of PRN Update, you will find an insert listing potential areas of future study for the PRN. Lend your views and let us know which topics you feel are most important.

PRN Events at the APA Annual Meeting in Chicago

This year's Annual Meeting takes place in Chicago from May 13-18th and the PRN is pleased to announce the following related events. We hope that you can join us!



◆ **PRN Member and Liaison Reception**, Monday, May 15th, from 3-4:30 pm, 5G, Fifth floor, Chicago Hilton. PRN staff, members, and liaisons will gather to discuss PRN operations, research findings and other issues of interest and concern to PRN

members. We encourage input from attendees on a wide range of PRN-related topics.

◆ **"Conformance with Quality Indicators in Routine Practice"** Tuesday, May 16th from 2 - 5 pm, Room E253 C, Level 2, McCormick Place Lakeside. This symposium will highlight how PRN data has been used to assess the extent to which routine practice is consistent with evidence-based practice guidelines treatment recommendations.

◆ **"Race-ethnicity and Variations in Psychiatric Conditions, Health Care Coverage and Treatment among Psychiatric Patients"** Wednesday, May 17th from 3 - 5:00 pm, Hall E, Level 2, McCormick Place Lakeside. This poster presentation will examine variation in psychiatric conditions

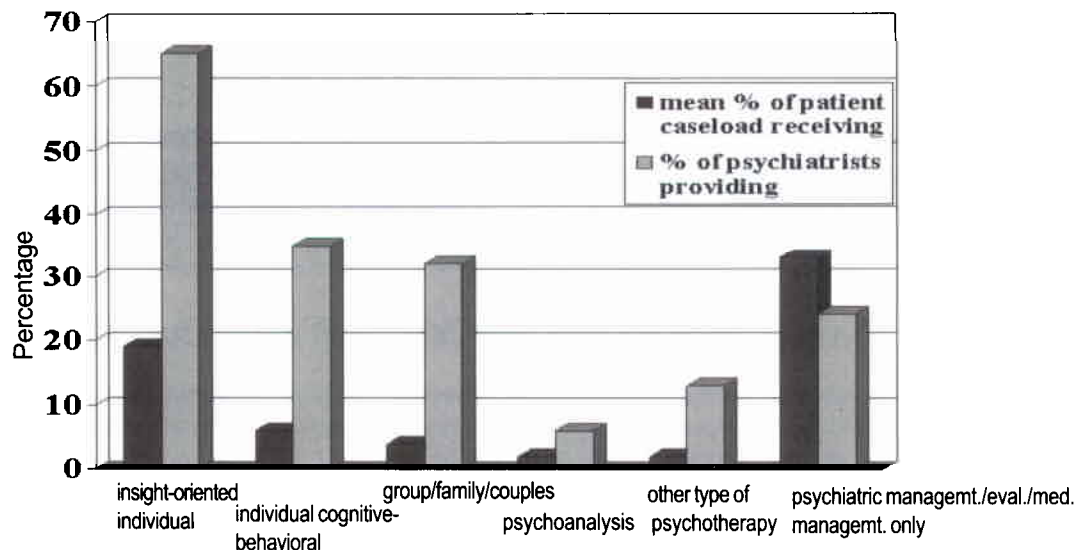
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Remember: PRN members receive one hour of Category II CME credit for each hour that is spent attending PRN-related events!

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Psychotherapy by Psychiatrists: Preliminary findings from the 1998 National Survey of Psychiatric Practice (N=896)



Are psychiatrists commonly providing psychotherapy to their patients?

In recent years, concerns have arisen regarding the ability of psychiatrists to provide psychotherapy to their patients given the limitations put forth by third party payers. In addition, with the significant advances in psychopharmacology, psychopharmacologic treatments are becoming more commonly used by psychiatrists than psychotherapy (Pincus et al., 1997).

The PRN has been working on developing ways to better characterize how much and what type of psychotherapy psychiatrists are practicing today. Our first attempt at this was incorporated in the 1998 National Survey of Psychiatric Practice (NSPP), which asked a random sample of 1500 APA members to report the percent of their patients receiving different psychotherapy techniques during a typical work week.

The figure above presents preliminary findings from our analysis of psychiatrists' responses. By far, the most commonly reported type of psychotherapy was insight-oriented individual psychotherapy. However, the data suggests that one-quarter of psychiatrists did not use any specific type of psychotherapy with their patients and that one-third of psychiatrists' patients were not receiving psychotherapy from their psychiatrist. Please note that for this analysis, psychiatric management was not considered a specific type of psychotherapy.

Future analysis plans of these data

include assessing to what extent these findings differ from what psychiatrists reported 10 years ago in the 1988-89 APA Professional Activities Survey and identifying factors associated with the current findings (such as the role of health plans, characteristics of the psychiatrist's training, patient caseload and impact of work settings). Research is also being under-taken using data from the 1999 SPPT to characterize the specific methods, focus, and content of psychotherapy that is being provided by psychiatrists.

Spread the Word!
PRN Resources Available to
Members and Liaisons

If you are planning or are interested in giving a presentation on the PRN, we encourage you to take advantage of our PRN presentation materials. Copies of slides and transparencies from a number of PRN presentations are available to members and liaisons upon request. Also available are PRN brochures, reprints of articles on the PRN, and data from PRN studies.

In addition, if you plan to give a presentation on the PRN, or if you have presented recently, please let us know the date of the meeting and the purpose of your talk. Call 1-800-713-7123 for more information or to request materials.

PRN Area Liaisons

<i>Area 2</i>	
James E. Nininger, M.D.	212.879.8338
<i>Area 3</i>	
Jorge A. Pereira-Ogan, M.D.	302.654.6353
<i>Area 4</i>	
Richard Balon, M.D.	313.993.3416
<i>Area 5</i>	
Martin J. Kommor, M.D.	304.341.1500
<i>Area 6</i>	
Michael Gitlin, M.D., P.C.	310.206.5133
<i>Area 7</i>	
James E. Campbell, M.D.	602.978.1844
<i>Minority/Under-represented</i>	
Albert C. Gaw, M.D.	617.687.2615

PRN Staff

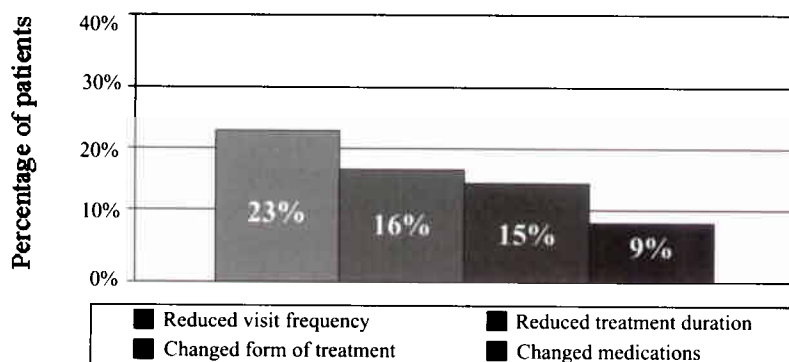
Darrel A. Regier, M.D., M.P.H. Executive Director, APIRE	
John S. McIntyre, M.D. Chair, Steering Committee	
Joyce C. West, Ph.D., M.P.P. PRN Director	
Ana Suarez, M.P.H. PRN Research Associate	
Amy Pettit, B.A. PRN Junior Research Associate	
Diane Herbeck, M.A. PRN Project Manager	
Eve Kupersanin, B.A. PRN Network Coordinator	
Max Sederer, B.A. PRN Research Assistant	
Diana Fitek, B.A. PRN Research Assistant	

Tel: 800.713.7123
 Fax: 202.789.1124
 e-mail: apaprn@psych.org

(Events, cont. from page 1) observed in racial-ethnic minority and nonminority patients, comparing the patients' sociodemographic characteristics, health plan characteristics, diagnoses, severity and complexity of conditions, as well as treatments received.

◆ **“Treatment of Substance Use Disorders in Routine Clinical Practice”** Thursday, May 18th from 2 – 5 pm , Continental Ballroom A, Lobby Level, Chicago Hilton. This symposium will review the characteristics of routine treatment of substance use disorders and provide an update about the effectiveness of new treatments available for these disorders. ■

Financial considerations resulted in the following treatment modifications: (1997 SPPT, N=1,228 patients)



APIRE

Recent Findings from PRN Studies: Access to Psychiatric Care

This is the first of a regular series of articles that will relate findings from several PRN studies to a specific area of research. In this article, we highlight key findings regarding access to care, using findings from both the 1998 *National Survey of Psychiatric Practice* (NSPP) as well as the 1997 *Study of Psychiatric Patients and Treatments* (SPPT). Data from the 1998 NSPP at the psychiatrist level shows us that changes have occurred in the extent and intensity to which psychiatrists are involved in direct patient care, which may be related to the psychiatrist's perceived impact of financial considerations on the provision of treatments as reported on the patient level data in the 1997 SPPT.

Findings from the 1998 National Survey of Psychiatric Practice (NSPP) as compared to the 1988-89 Professional Activities Survey (PAS): Changes in Psychiatric Practice:

When data on the psychiatrist's professional activities and patient caseload were compared across these two surveys, we found that:

◆ Psychiatrists decreased time spent in direct patient care (from 67% to 59% per week) and increased time spent on administrative activities (from 12% to 23%).

◆ On average, psychiatrists treated 4 more patients per week (from 35 to 39 patients), but spent less time with each patient (from 55 to 42 minutes).

Findings from the 1997 Study of Psychiatric Patients and Treatments *

For one-third of patients in the 1997 SPPT, their psychiatrists reported that financial considerations (such as managed care limitations, patient's resources or limitations of a public system) had adversely affected the provision of “optimal” treatments. The figure above shows the proportion of patients for whom the treatment regimen was modified due to financial considerations in the following ways: reduced visit frequency; a change in the form of treatment; reduced treatment duration; changed medications. In addition, we found that:

◆ Patients more likely to have their psychiatrist report that financial considerations adversely affected “optimal” treatments had the following characteristics:

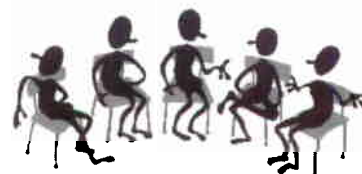
◆ They were more severely ill; had a comorbid mental condition; a psychosocial problem; and a substance use, dependence, or personality disorder.

◆ They received treatment through

a managed care plan or plan with managed care financial or utilization management techniques.

Access to psychiatric care is one of several potential areas of future PRN research (please see insert). Future studies and/or analyses will seek to examine the factors that affect access to specific psychiatric treatments in more depth.

*This data was part of a presentation, “Can Services Research Help Shape Public Policy? The Role of a Medical Specialty Society” made in January 2000 at the Harvard Medical School by Steven M. Mirin, M.D., APA Medical Director, and Joyce C. West, Ph.D., M.P.P., PRN Director. ■



PRN Member Highlights

"PRN Member Highlights" is a regular feature of PRN Update. In each issue, readers are introduced to a few randomly selected PRN members. The column showcases the diversity of practice settings, professional activities, and clinical interests of PRN psychiatrists.

Brenda C. Solomon, M.D., a PRN member since 1998, is in a full time medical psychoanalytic psychotherapy and psychoanalytic practice in Chicago. Upon finishing her psychiatric residency in 1968, she was one of the few female psychiatrists who maintained an office at home as well as in the heart of the city. When she began practice, she was inundated with referrals of adolescent girls since there were so few female psychiatrists available. Additionally, she was often sought after to be a spokesperson for women as patients and professionals. Currently, Dr. Solomon sees eight patients 4-5 times per week for psychoanalysis, all of whom are private pay. Five of those are professionals seeking analytic training. While she prescribes psychotropic medications to both her analytic and therapy patients where indicated, she consults a psychopharmacologist for more complex situations involving medications.



Dr. Solomon teaches Ethics and Psychoanalysis, as well as serves on various committees and supervises candidates in training at the Chicago Institute for Psychoanalysis. She is also a Clinical Assistant Professor of Psychiatry at the University of Illinois Abraham Lincoln School of Medicine where she supervises residents. In 1980, she was appointed to the APA's Committee on Women and later became Chair of the Committee.

Her interest in the PRN is multifaceted: "Since my son, Zachary Solomon, is a psychiatrist (two years post-residency), I am personally as well as professionally interested in this research for the next generation. I am particularly concerned that the young psychiatrists of today do not have sufficient psychodynamic training in their residencies and are relegated to practicing only psychopharmacology."

Kirby Pate, M.D., a PRN member since 1998, has a large, private multidisciplinary practice in Nashville, Tennessee. He treats adults and maintains an interest in insomnia and non-medical treatments. In addition, he is involved in forensic psychiatry, which involves mostly civil matters.

Dr. Pate coordinates the curriculum for the first PostGraduate Year students at Vanderbilt and delivers lectures on issues such as sleep and private practice.

Dr. Pate believes the PRN is important for psychiatry because "We need numbers to validate our intuition, numbers only attainable through survey research." ■

(**Leadership, cont. from page 1**) she was responsible for developing and implementing the APA's evidence-based quality improvement research and evaluation agenda. In this capacity, she developed and tested evidence-based quality indicators for the treatment of specific mental disorders and also conducted managed care research examining how patterns and quality of care vary across difference types of health plans. Dr. West holds a master's degree in public policy from the Kennedy School of Government at Harvard University and a doctor of philosophy degree in mental health services research from Johns Hopkins University.

As Director of the Institute, Dr. Regier will work with Dr. West, the PRN collaborators, scientific advisors and members in shaping the direction of some of the PRN's most important initiatives, including: 1) setting research priorities through the development of a strategic research agenda (*please see insert in this newsletter*); 2) building productive collaborations to more fully utilize the PRN's research capabilities; 3) developing and testing methods to conduct longitudinal clinical effectiveness studies; 4) conducting more rigorous psychometric validation studies to enhance the integrity of data; 5) adding further technological sophistication to current data collection methods (e.g., internet-based data collection); 6) continuing to attract funding to advance the PRN's research initiatives. ■

Recently Published PRN Articles

The following is a list of the most recently published articles using PRN data. Copies of these articles will be available to those who attend the PRN Member and Liaison Reception at the APA Annual Meeting on Monday, May 15th from 3 – 4:30pm.

- ◆ Chung JY, Suarez AP, Zarin DA, Pincus HA: Psychiatric Patients and HIV. *Psychiatric Services* 1999, 50(4): 487
- ◆ Colenda CC, Pincus HA, Tanielian TL, Zarin DA, Marcus SC: Update of geriatric psychiatry practices among American psychiatrists: Analysis of the 1996 National Survey of Psychiatric Practice. *American Journal of Geriatric Psychiatry* 1999; 7:279-288
- ◆ Pincus HA, Zarin DA, Tanielian TL, Johnson JL, West JC, Pettit AR, Marcus SC, Kessler RC, McIntyre JS: Psychiatric patients and treatments in 1997: Findings from the American Psychiatric Practice Research Network. *Archives of General Psychiatry* 1999; 56:441-449
- ◆ Tanielian T, Cohen H, Marcus S, Pincus H: General medical care for psychiatric patients. *Psychiatric Services* 1999; 50:637
- ◆ Zarin DA, West JC, Pincus HA, Tanielian TL: Characteristics of health plans that treat psychiatric patients. *Health Affairs* 1999; 18:226-236

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