Antidepressants in Children and Adolescents: An Update

by J. Lynn Taylor, M.D.

There has been attention and controversy in the media over the past year regarding the safety of common antidepressants used to treat depression and anxiety in children and adolescents. Now seems to be a good time to review the safety of these agents, as well as current ideas and recommendations for the treatment of these disorders in children and teenagers.

Over the span of my career in child psychiatry, our understanding of the frequency of depression and anxiety in these age groups has changed considerably. In the mid-1980s, psychiatrists did not think young children could be depressed. It was assumed that depression began after puberty, with the incidence increasing to adult rates throughout the teenage years. When researchers actually began to ask children and adolescents, it turned out that not only does depression exist, but children are able to talk about their depression and the feelings of hopelessness and helplessness that so often accompany depression. A confounding factor is that we now know from research that parents often do not know if their children are depressed or anxious, but are good at identifying behavior problems. Therefore, parents are better reporters of behavior disorders, and children are better reporters of depressive and anxiety disorders.

Also in the mid-1980s, the treatment of depression began to change. Prior to that, the medications used to treat depression had many side effects. Researchers were unable to demonstrate that any of these medications worked very well treating depression in children. During the 1980s, new medications were introduced. These were selective serotonin reuptake inhibitors (SSRIs). These medications were much easier to take than the earlier drugs and were also more effective. In fact, for the first time, researchers were able to prove that medications were effective in treating depression and anxiety in children and adolescents. Over the next 15 years, the use of these medications increased dramatically.

Last year, the Food and Drug Administration (FDA) became concerned...
Note from the Chairman

Dear Friends:

The Department of Psychiatry in the UAMS College of Medicine is moving forward at an incredible pace, and we are extremely excited to share all the good news with you.

Our biggest announcement is that UAMS Psychiatry has returned to providing inpatient care to all age groups. Steve Blevins, M.D., has begun working as the attending UAMS psychiatrist at The Bridgeway Hospital in Maumelle for adults referred there under our care. Benjamin T. Nimmo, M.D., is the UAMS attending psychiatrist in our new acute psychiatric teaching unit at Methodist Behavioral Health Hospital for child and adolescent care in Maumelle. This is a tremendous advancement as we plan for our own inpatient treatment facilities in the Psychiatric Research Institute on the UAMS campus.

Plans are coming together for the UAMS Psychiatric Research Institute, one of only nine similar institutes in the nation. The architects are incorporating state-of-the-art technology with designs that will be functional, as well as aesthetically pleasing. Faculty and staff members recently visited the Western Psychiatric Institute & Clinic in Pittsburgh, the Institute of Psychiatry at the Medical University of South Carolina in Charleston and the Generose Building of St. Mary’s Hospital at the Mayo Clinic in Rochester, Minn. These visits provided concepts and insight that will help us design the best possible facility.

Twelve new faculty members have joined us during our recently completed past academic year. The newest faculty members are Steve Blevins M.D., Ben Nimmo, M.D., Alan Budney, Ph.D., and Catherine Stanger, Ph.D. We have also added much-needed new professional administrative staff, including Renie Rule as our senior development officer and Jennifer Gordon as our communications specialist, who is also the editor for Mind Matters.

In this issue, we have decided to focus on depression, its causes and how society reacts to it. After actress Brooke Shields made a courageous move by releasing Down Came the Rain, a very personal book about her battle with postpartum depression, actor Tom Cruise belittled her illness and her choice to take medications to help her through a difficult time. The American Psychiatric Association and other organizations released a joint statement on Mr. Cruise’s comments, with which I agree and have included in this issue.

In this issue of Mind Matters, Lynn Taylor, M.D., the director of our Division of Child and Adolescent Psychiatry and the medical director for our Programs for Young Adults, has provided us with a clear and eye-opening look at the use of antidepressant medications with children and adolescents. As many of you know, there has been a great deal of controversy in the medical and pharmaceutical fields on this subject in the past year.

I continue to be very proud of the excellent clinical programs and the marvelous clinicians who provide the care. Recently, a very successful executive told me that Terry Kramer, Ph.D., our chief psychologist for psychotherapy, had saved his life, and he now has an entirely different view of his world.

I also was told by someone at my dentist’s office about the life-changing work being done at Arkansas CARES and how the women and their children were receiving treatment that could be obtained from only our department. Similarly, I learned that the adult daughter of one of my patients — who I had indirectly tried to get into treatment for substance abuse — had found her own way to our Substance Abuse Treatment Clinic. She is now successfully engaged in treatment, perhaps for the first time in her life.

Finally, I was also delighted to learn that one of our former fellows and now our newest faculty member, Ben Nimmo, M.D., has successively treated a child with autism. The grateful mother is now referring more children with the illness to Dr. Nimmo and our developmental specialist, Rachel Bowman, Ph.D.

Once again, thank you for your continued support and encouragement as we move forward into a new era for the UAMS Department of Psychiatry. While we may change on the outside, we will still provide the best psychiatric care on the inside.

Best Wishes,

G. Richard Smith, M.D.
Beautiful Minds Looks at Alcohol Abuse

Beautiful Minds in May addressed the problem of alcohol abuse in today’s society as Chris Cargile, M.D., of the UAMS Department of Psychiatry, presented “Alcohol: How Much is Too Much?”

Cargile said that while society’s definition of alcohol abuse may be arbitrary, statistics paint a bleak picture:

- As many as 15 percent of Americans meet criteria for alcohol abuse or dependence at some time in their lives.
- Alcohol is associated with 100,000 deaths annually through highway fatalities, murders, suicides and alcohol-related disease.
- Alcohol costs the nation about $100 billion annually and is estimated to account for 15 percent of health care costs.

So, how much is too much? Cargile said signs of alcohol abuse include any one of the following:

- Failure to fulfill major obligations at work, school and home
- Recurrent use in situations that are physically hazardous
- Related legal problems
- Continued use despite social and interpersonal problems caused or exacerbated by alcohol

A person may be alcohol dependent if he or she exhibits three or more of the following:

- Develops a tolerance and needs more alcohol to achieve the desired effect
- Shows signs of withdrawal
- Drinks more over a longer period of time than was intended
- Tries unsuccessfully to control his or her alcohol consumption
- Spends a great deal of time getting, using and recovering from the effects of the alcohol
- Gives up important social, occupational or recreational activities in order to drink
- Uses alcohol despite knowing it will cause or exacerbate other physical or psychological problems

Other red-flag situations can be identified by the acronym CAGE:

Have they attempted to Cut down unsuccessfully?

Are they Annoyed by another’s criticism of their drinking habits?

Do they act Guilty about their alcohol use?

Do they need an Eye-opener in the morning?

Resources for more information on alcohol addiction and abuse include Al-Anon Family Group Headquarters Inc., Alcoholics Anonymous World Services Inc., the National Council on Alcoholism and Drug Dependence Inc., and the Centers for Disease Control and Prevention. Also, feel free to consult our expert clinicians, in both the Programs for Adults (686-5900) and Programs for Young Adults (686-5300).

Beautiful Minds

Beautiful Minds was founded as a way of enhancing and broadening people’s understanding of the UAMS Department of Psychiatry’s services and resources, while supporting and educating one another. A major goal is to dispel the myths and stigma surrounding mental illness and to bring this hidden topic out into the open. The name, The Beautiful Minds, was selected to symbolize the Academy Award-winning movie and the positive impact its success has had on mental illness.

Luncheons are scheduled for Sept. 14 and Nov. 9. If you are interested in attending the luncheons and you are not currently on the mailing list, please contact Ellon Cockrill at ercockrill@uams.edu or call (501) 425-0392.
that these medications may be causing some serious side effects, especially in children and teenagers. In reviewing information on all of the clinical trials of SSRIs in this population, they discovered a possible increase in suicidal thoughts and behavior. Since the medications are so widely used by pediatricians, family practice doctors and psychiatrists, this caused a major uproar throughout the medical community. To make sure this was a real finding, the FDA asked the Department of Child and Adolescent Psychiatry at Columbia University to reanalyze the data. This past summer, the results of that analysis became public and it was determined that there was a real increase in both suicidal behavior and thoughts in the group receiving SSRIs compared to the group receiving placebo. (A placebo is a “sugar pill” used to compare two active drugs in clinical trials to determine if a drug is effective and safe.) Two percent of the children and adolescents in the placebo group had suicidal behavior and/or thoughts. Four percent of the group treated with SSRIs had suicidal behavior/thoughts. This is an increase over the placebo group, but the increase is only 2 percent out of several thousand patients. It is also very important to emphasize that there has never been a suicide in all of the children in clinical trials treated with SSRIs.

Many physicians are concerned that we not throw the baby out with the bathwater. These drugs have been found useful and effective for millions of patients. In fact, the actual suicide rate for adolescents has been steadily decreasing since the mid-1980s. Many researchers in the area of teen suicide prevention have attributed this to the introduction of the SSRIs, which have led to better treatment of depression in teenagers. It is important also to realize that untreated depression is associated with many bad outcomes – such as poor quality of life for a child, missed school days, increased headaches and abdominal pain – and with suicide attempts and completed suicides.

So, the next question is how do we best treat children and adolescents with depression by making sure those children who need treatment receive it, while those who don’t are not exposed to unnecessary risks? First, it is important that the child receive a thorough assessment to determine the diagnosis. If the child is suffering from mild depression, current recommendations include treatment with cognitive behavioral therapy (CBT). CBT is a specific type of psychotherapy that has been found effective for the treatment of depression. CBT teaches the patient to recognize the negative thoughts and behavior that can lead to, or worsen, depression. Following recognition of these thoughts and behaviors, the patient is taught how to change them and actually practices these changes between therapy sessions.

If the depression is moderate to severe, pharmacological treatment is recommended, keeping in mind that untreated depression has a higher risk for suicidal behavior than the medications do. Current guidelines recommend more careful monitoring of the patient once medication is

“...untreated depression is associated with many bad outcomes – such as poor quality of life for a child, missed school days, increased headaches and abdominal pain – and with suicide attempts and completed suicides.”
begun or during changes in the dosage. This may include weekly visits initially and during dosage changes. During these times, parents are asked to observe their child carefully and report any changes in behavior, worsening of the depression, or suicidal thoughts or behavior.

In summary, antidepressant medications do carry a risk, but untreated depression is more risky than the medications. It is important for children and adolescents with depression to receive thorough evaluation and careful treatment. Parents should monitor their children closely during the initiation of treatment and report their concerns to their physicians without necessarily waiting for their next scheduled visit.

New Faculty and Senior Staff

The Department of Psychiatry in the UAMS College of Medicine welcomes several new faculty and senior staff members:

- Steve Blevins, M.D., Assistant Professor, University Hospital Division
- Alan Budney, Ph.D., Professor, Center for Addiction Research
- Shawn Clark, Instructor, Arkansas State Hospital Division of Behavioral Health Services
- Megan Edwards, Psy.D., Assistant Professor, Arkansas Health Center
- Jennifer Gordon, Communications Specialist, Psychiatry Administration
- Stuart Harris, M.D., Associate Professor, University Hospital Division
- Ben Nimmo, M.D., Instructor, Child and Adolescent Psychiatry Division
- Michelle Ransom, M.D., Instructor and Fellow, Division of Behavioral Health Services
- Renie Rule, Senior Development Officer, Psychiatry Administration
- Catherine Stanger, Ph.D., Associate Professor, Center for Addiction Research
- Tracy Stecker, Ph.D., Assistant Research Professor, Division of Health Services Research and Central Arkansas Veterans Healthcare System

Psychiatry Residency Education Program is Finalist for Prestigious Award

The UAMS Department of Psychiatry’s Residency Education Program is one of four national finalists for the American College of Psychiatry’s prestigious Creativity in Psychiatric Education Award.

The Residency Education Program’s Showcase Portfolio program was reviewed in early August. The program, which began in 1999, was developed in the Department of Psychiatry with help from the Office of Educational Development. It is now run largely by Robert Jarvis M.D., and Ben Guise, M.D. It has gained national attention by requiring residents to create a portfolio of their most challenging work and rate their competency.

James Clardy, M.D., professor of psychiatry and associate dean for graduate medical education in the College of Medicine, was the leading force behind the program’s development.

Healthy food and healthy living go hand in hand at CAREfully Catered, a nonprofit organization created in 2004 to support Arkansas CARES (Center for Addictions Research, Education and Services), a program of the UAMS Department of Psychiatry.

The program provides a training environment for women who have graduated from CARES and other residential treatment programs. By working with certified executive chef Kenneth Jones, the women gain the skills they need to work in food service and support their families. Proceeds from the catering program go back to helping other women break the cycle of addiction.

Patrons of CAREfully Catered can expect high-quality, nutritious soups, salads, entrées and desserts at competitive prices. CAREfully Catered focuses on providing meals that are tasty, attractive and low in fats and sugars.

To obtain more information or to schedule a catering job, call Jones at (501) 626-7279 or e-mail him at CAREfullycatered@sbcglobal.net.
In Brooke Shields’ bestselling memoir, *Down Came the Rain*, the actress shares her personal battle with postpartum depression and brings national attention to a mental illness suffered in silence by many women.

Yet, soon after the book’s release this spring, actor Tom Cruise began degrading Shields for turning to psychiatry and psychiatric medications for help, stating she could have taken vitamins instead. Cruise’s comments are based on his belief in Scientology, a religion based on the books of L. Ron Hubbard.

The American Psychiatric Association, the National Alliance for the Mentally Ill and the National Mental Health Association have responded to Cruise’s comments in the following statement:

“While we respect the right of individuals to express their own points of view, they are not entitled to their own facts. Mental illnesses are real medical conditions that affect millions of Americans.

FACT: Over the past five years, the nation has more than doubled its investment in the study of the human brain and behavior, leading to a vastly expanded understanding of postpartum depression, bipolar disorder and attention-deficit/hyperactivity disorder. Much of this research has been conducted by the National Institutes of Health and the nation’s leading academic institutions.

FACT: Safe and effective treatments are available and may include talk therapy, medication or a combination of the two. Rigorous, published, peer-reviewed research clearly demonstrates that treatment works.

FACT: Medications can be an important and even lifesaving part of a comprehensive and individualized treatment plan. As in other areas of medicine, medications are a safe and effective way to improve the quality of life for millions of Americans who have mental health concerns.

FACT: Mental health is a critical ingredient of overall health. It is unfortunate that, in the face of this remarkable scientific and clinical progress, a small number of individuals and groups persist in questioning its legitimacy.

FACT: Mental illnesses are highly treatable, and seeking help is a sign of strength. It is irresponsible for Mr. Cruise to use his movie publicity tour to promote his own ideological views and deter people with mental illness from getting the care they need.”

UAMS Receives Grant to Increase Awareness of Depression During and After Pregnancy

Arkansas women battling depression during or after pregnancy need to know they have a special avenue for help through the University of Arkansas for Medical Sciences (UAMS).

The ANGELS (Antenatal and Neonatal Guidelines, Education and Learning System) program at UAMS was recently awarded a $250,000 federal grant to create a bilingual, statewide public awareness campaign designed to reduce the stigma associated with depression during and after pregnancy. The project, called DREAM (Depression Relief Education in Antenatal Medicine), will work to increase the awareness, screening and resources needed for treatment of this mental illness.

FACT: Many women experience what is referred to as ‘baby blues’ (when a woman cries easily for three to seven days following the birth of her child). This generally passes quickly without treatment, and the mother is soon able to enjoy her baby. It is when depression lasts longer (more than two weeks) during or after pregnancy that we get worried because it can affect the growth of the fetus and the bonding between the baby and mother,” said Curtis Lowery, M.D., medical director of the ANGELS program, director of the Division of Maternal-Fetal Medicine and professor and director of obstetrics for the UAMS College of Medicine.

FACT: Depression is a real physical illness impacting the entire body,” said Linda Worley, M.D., associate professor of psychiatry and obstetrics and gynecology and co-director of the grant. “It needs to be recognized and effectively treated during pregnancy and postpartum. Many confidential treatment options are available, and the only person who needs to know is your doctor.”

The grant will provide funding for surveys to physicians within Arkansas regarding their current practices and needs to address the issue and a media campaign that will bring the issue to the public. The project will conclude with a second survey to physicians to determine if the campaign was effective. The ANGELS Call Center is already available for questions from women with high-risk pregnancy or depression and their physicians at (501) 526-7425 or toll-free (866) 273-3835.
**Renie Rule Hired as New Development Director**

Renie Rule, formerly the chair of the Department of Psychiatry Advisory Board, accepted the position of senior development officer for the Department of Psychiatry in July.

Rule has been a dynamic force for the department as a member of the Advisory Board and the Communications Committee. While she must resign from those positions, she has taken on the responsibility of guiding the efforts to raise the remaining needed funds to build the new Psychiatric Research Institute.

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**Budney and Stanger Join Center for Addiction Research**

Alan J. Budney, Ph.D., and Catherine Stanger, Ph.D., recently joined the Department of Psychiatry and Behavioral Sciences in the UAMS College of Medicine to continue their research in the Center for Addiction Research (CAR).

Both Budney and Stanger were recruited from the Departments of Psychiatry and Psychology at the University of Vermont in Burlington. Budney is coming to UAMS as a professor, and Stanger is coming as an associate professor.

Budney’s research interests include dependence on marijuana, cocaine, methamphetamine and other substances, particularly in adolescents. Stanger’s research interests include adolescent substance abuse, behavioral parent training, improving the outcomes for children of substance-abusing parents and child psychopathology.

Budney received his master’s degree (M.S.) and doctorate (Ph.D.) in clinical psychology from Rutgers University in New Brunswick, N.J. He graduated with high distinction with a bachelor’s degree (B.S.) in psychology from Pennsylvania State University.

Stanger received her master’s degree (M.S.) and doctorate (Ph.D.) in clinical psychology from Rutgers University in New Brunswick, N.J. She graduated magna cum laude with a bachelor’s degree (B.S.) in psychology from Georgetown University in Washington, D.C.

Both researchers hold numerous grants and are held in high regard by Warren Bickel, Ph.D., director of the CAR and the Willbur D. Mills Chair in Alcoholism and Drug Abuse Prevention.

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**New Ventures: Bringing Awareness to Addiction**

New Ventures is making great strides with its focus on addiction. The task force brings together faculty from the UAMS Department of Psychiatry and community leaders to investigate mental health needs in the community.

Partnerships to provide inpatient care began this summer with The Bridgeway Hospital in Maumelle for adult care and with an acute psychiatric teaching unit at Methodist Behavioral Health Hospital in Maymelle for child and adolescent care. Steve Blevins, M.D., is the attending UAMS psychiatrist at Bridgeway, and Benjamin T. Nimmo, M.D., is the attending psychiatrist at Methodist.

The new Center for Addiction Research received a great deal of media attention this summer. Warren K. Bickel, Ph.D., the director of the center, gave several interviews, including a spot on Channel 11 that generated more than 100 calls to the department from people seeking to participate in clinical trials.

The Partners in Behavioral Health Sciences Program, which provides workshops on mental health issues to school teachers, held courses on alcohol addiction, tobacco and eating disorders. All three courses received media attention. Judge Vic Fleming, a New Ventures task force member, led part of the course on alcohol addiction, showing teachers information he shares with teenagers as part of his outreach against alcohol abuse.

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**Residency Awards Banquet**

The Department of Psychiatry Residency Education Banquet was held June 15 to honor the graduating residents, psychology interns and child fellows. Outstanding faculty members and residents were also recognized.

![Emile Eckart, M.D., G. Richard Smith, M.D., and Justin Hunt, M.D., congratulate Puru Thapa, M.D., who received the Emile Eckart, M.D., Award, along with the Robert F. Shannon, M.D., Award.](image1)

Michelle Ransom received the Lloyd Rader, M.D., Award, presented by Steve Blevins, M.D.

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**Robert Jarvis Receives Award**

Robert Jarvis, M.D., has been awarded the Junior Faculty Award from the Association for Academic Psychiatry (AAP). He is one of only six faculty members across the country to receive the award.
Join the Friends of UAMS Psychiatry!

The Friends of UAMS Psychiatry is a group of concerned citizens who encourage research, help overcome stigma, improve public awareness of effective treatment, and ensure the availability of mental health services and providers. Many thanks go to the more than 200 people who have joined the Friends since last July, the beginning of our fiscal year. Individual memberships start at $25 and may be submitted in the attached envelope. Call Ellon Cockrill at (501) 686-5483 for information on how you can make a difference.

Contact Us

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Save the Date!

Hunter’s Moon on the River
Hot Jazz and Great Food
A Friends of UAMS Psychiatry Event
6 p.m., Monday, Oct. 17