



# Synapse



THE WEST HUDSON PSYCHIATRIC SOCIETY NEWSLETTER

Published Bimonthly

November-December 2003 EDITION

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## Mental Illness Awareness Week

It's Mental Illness Awareness Week. I must confess that in prior years I hadn't paid much attention to this event. For a busy psychiatrist, every week is mental illness awareness week. But of course, the people who need to be more aware are the great majority of humanity who are not psychiatrists. On reflection, there really seems to have been a sea of change in public attitudes towards psychiatry since the American Psychiatric Association launched Mental Illness Awareness Week about 15 years ago. It was just about then that I started working as a consulting psychiatrist at Helen Hayes Hospital, a rehabilitation facility for patients with a variety of chronic medical problems. Many patients were clearly in need of psychotropic medications or psychotherapy, but patients and families

very often reacted to such recommendations with dismay or denial, rejecting anything smacking of "mental illness".

Today, requests for psychiatric input for the care of these medical patients as often as not comes from the patients or families themselves. People seem much more aware of and accepting of our various treatment modalities, generally trusting that they are necessary and effective. There are many reasons for this good and important change. I think a major factor is that there is no arguing with our effectiveness. Most of our interventions lead to some improvement in people's lives.

The excitement of the many recent advances in the brain sciences has also

captured the imagination of the educated public. Public education campaigns such as Mental Illness Awareness Week and Depression Screening have helped reduce



some of the negative connotations of psychiatric diagnoses. The media have picked up on this, portraying psychiatrists and our patients in a more benign, though unrealistic and sometimes ridiculous, light. There is much more that needs to be done, of course, to continue reducing the stigma of mental illness, a stigma that has clearly negative consequences such as the inexcusable disparity of payments for psychiatric diagnoses. For starters, we might brag more. Despite attempts by other disciplines to blur our role in patient care, despite attempts by parasitic psychiatric-carve-out organizations to grossly limit psychiatric care, we continue to perform unique and invaluable services for our patients. We have much of which to be proud. ▲

*Andrew Hornstein, M.D.*

## APA's Election Guidelines Emphasize Dignity, Courtesy, and Fairness

With the announcement of the Nominating Committee's selection of candidates for the 2004 election, the campaign season is under way, and members, particularly those wishing to support a candidate, will want to be familiar with the campaign guidelines.

The APA Elections Committee is charged with establishing procedures, with the approval of the Board of Trustees, for equitable voting of the membership. These procedures are documented in the election guidelines section of the Operations Manual.

The intent of the guidelines is "to encourage fair and open campaigning by APA members on a level playing field; foster opportunities for candidates to educate their colleagues about the issues and about their experiences and views; keep costs down; and maintain dignified and courteous conduct appropriate to the image of a profession." Personal attacks against opponents are not permitted.

Of utmost importance is the stipulation that candidates and their supporters must use their own resources for election activities. Use of APA, district branch, or

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## Drug Money

As many of you may know, for many years, including during my tenure as President of the West Hudson Psychiatric Society, I have been very vocal on the subject of our accepting money from pharmaceutical companies for educational and other purposes. I have always strongly believed that the huge amounts of money expended by the pharmaceutical companies in promoting their products to physicians, had to have a major impact on our prescribing practices, based not on solid

research, but on our need to please the drug companies for supporting us financially. It was inconceivable to me that some of our colleagues actually believe that they were immune from the influence of the money provided to them for "educational purposes" I have also, always believed that the materials provided to us directly, by pharmaceutical drug representatives were biased and manipulated in the companies' favor.

But, all of these beliefs were simply based on personal opinions and I never had solid research to back up those opinions. Now, thanks to research by Dr. Joel Lexchin, MD, Associate Professor, School of Health Policy and Management, York University, Toronto, Ontario, Canada, we now have some solid research to back up these assertions. This research was published in the British Medical Journal this year and was also published in an interview in the journal "Currents in Affective Illness," Vol. 22, #9, September 2003. The following are excerpts from those publications:

**A.** "The source of funding of medication trial influences its results, and if you don't look at who has funded the trial, and you take the results at face value, you may get a distorted impression of how useful the medication is and end up prescribing it in situations where it is not appropriate."

**B.** "When the examined relationship between sources of funding and experimental outcome, we found that drug trials funded by pharmaceutical companies were four times more likely to produce positive results than drug trials funded by other sources. This applied to trials of psychiatric drugs, oral contraceptives, drugs for arthritis and drugs for cancer. It was a bias across the board."

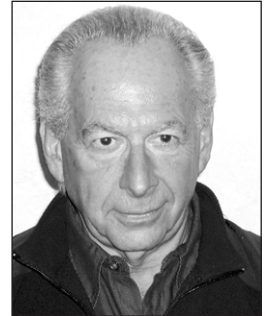
**C.** "One source may be selective publication. Evidence suggests that trials funded by drug companies were not as likely to be published and that when they are published, they are more likely to appear in journal supplements. Journal supplements usually contain studies that have been presented at a symposium about a single product and they are usually

edited by a guest editor rather than by the regular journal editor. Both the symposium and the supplement are typically funded by the company that makes the product. Studies have found that the material in supplements is not as rigorously peer reviewed, as are studies in the regular editions of a journal and that the conclusions of studies in supplements are less likely to match the data in the 'results' sections. We find mismatches between the content of papers and the conclusions in their abstracts in Medline."

**D.** "Another source of bias, a very important one, may be choice of comparator agents. Drug company trials are more likely to use placebos than active controls as comparators and it is much easier to demonstrate superiority of an active drug over placebo than over another active product. When drug companies do use active controls, they often choose inappropriate dosages — either too high, which may cause the control to have more side-effects, or too low, which may make the control less effective."

**E.** "Surveys have shown that when there is a relationship between academia and industry, there are often clauses allowing a publication to be held up for commercial reasons — to get a patent on a product, for example, or to be sure that material isn't published so soon that it might allow competitors to get a leg up on the company that sponsored the research."

**F.** "Drug companies are profit-driven, and therefore have a problem from the outset: on one hand, they want information that is accurate and fair; on the other hand, they want information that allows them to sell as much product as they can. Those objectives conflict when a company conducts or funds a study that finds its drug no better than or



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SYNAPSE designed by Lydia Dmitrieff

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## Making the Future Better than Today: NKI Psychiatrist Dr. Jerome Levine receives NAMI Award for Distinguished Leadership in Research

**ROCHESTER N.Y.**--- As one of the nation's most prominent pioneers in psychopharmacology, psychiatrist Jerome Levine, M.D., Deputy Director of the Nathan Kline Institute for Psychiatric Research (NKI) and Professor of Psychiatry at the New York University School of Medicine, has received accolades and awards from professional and scientific colleagues over the years. But no other award has been as personally meaningful as the one that was presented to him by the National Alliance for the Mentally Ill of New York State (NAMI-NYS) at its 21st annual meeting and educational conference, recently held in Rochester, New York. Dr. Levine was named recipient of the "Distinguished Leadership in Research Award" for his "dedication to the well-being and future of people with mental illness and their families."

As chief of psychopharmacology research at the National Institute of Mental

Health for nearly two decades (1967-1985), Dr. Levine was one of the architects who helped design the Federal government's program of psychopharmacology research that supports studies to develop safe and effective medications for the treatment of mental illness. Because of the development of new pharmacological agents with fewer side effects, more persons with serious mental disorders are able to function in the community with outpatient treatment and supports.

Since Dr. Levine joined NKI as Deputy Director in 1994, he has been a strong advocate for the inclusion of families and consumers as members of the Institute's Institutional Review Board (IRB) (that oversees human studies in NKI's \$25 million portfolio of psychiatric research) and he has played an instrumental role in promoting the rapid dissemination of research findings to clinicians and families.

With more than 50 affiliates and 6500 members across New York State, NAMI-NYS is a grassroots, self-help, support and advocacy organization dedicated to improving the lives of individuals affected by serious mental illnesses such as schizophrenia and mood disorders. The award was presented to Dr. Levine by Rena Finkelstein, a Board member of NAMI-NYS and co-president of NAMI-FAMILYA, the Rockland County NAMI affiliate.

"We are very fortunate to have someone of Dr. Levine's intellect, experience and integrity in a leadership role at NKI. Research is our hope for the future," says Mrs. Finkelstein.

In accepting the award, Dr. Levine said, "This award is particularly meaningful because families are so deeply affected by these illnesses and play such an important role in both advocacy and recovery for their loved ones." ▲

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## The Gaia Hypothesis and the Destiny of Man

*"The concept of Mother Earth, or as the Greeks called her long ago, Gaia, has been widely held throughout history. As a result of the accumulation of evidence about the natural environment and the growth of the science of ecology, there has recently been speculation that the biosphere may be more than just the complete range of living things within their natural habitat of soil, sea and air."*

- James Lovelock

**W**hat is the Gaia Hypothesis? Simply stated, it is the belief that our earth is one huge living entity greater than any prehistoric animal we have discovered. The Gaia hypothesis was devised by atmospheric chemist James Lovelock, working for NASA, and the world-renowned microbiologist Lynn Margulis. In their 1979 publication *Gaia: A New Look at Life on Earth* they wrote: "The entire range of living matter on Earth from whales to viruses and from oak to algae could be regarded as constituting a single living entity capable of maintaining the Earth's atmosphere to suit its overall needs and endowed with faculties and powers far beyond those of

its constituent parts." They defined Gaia as "a complex entity involving the Earth's biosphere, atmosphere, oceans and soil; the totality constituting a feedback of cybernetic systems which seek an optimal physical and chemical environment for life on this planet."

The idea was so new and unprecedented that the peer review process for its publication was slow and generally negative. Their proposal regarding the existence of a living Earth was regarded as unscientific and at best a poetic metaphor. According to the Gaia hypothesis, the history of life on Earth can be regarded as a progressive modification of the planet's chemistry and temperature by biological organisms acting in ways that enhance their own survival and flourishing. The Earth's atmosphere, for example, was modified over billions of years, by photo-synthetic microorganisms, from one that was predominantly carbon dioxide and methane, into its present oxygen-rich state. This oxygen-rich atmosphere set the stage for the evolution of multicellular life forms which ushered into the "Cambrian explosion" that took off

some 570 million years ago. The term "Cambrian explosion" is used to denote the appearance of animal phyla which preceded the beginning of the Cambrian geological period and continued through out this geological period.



During the Cambrian period there was a vast diversification of life, and finally the colonization of the Earth by plants and animals. Then, 250 million years ago, as the result of a catastrophic event 95% of the life forms were extinguished. The leading explanation of these mass extinctions are attributed to the havoc caused by asteroids slamming into the earth. Every time, following these catastrophes, Gaia picked up the thread and started over again. Dinosaurs and flowering plants eventually evolved to dominate the earth. This was the Cretaceous period some 146 to 65 million years ago. The asteroid that brought the Cretaceous period to an end is estimated to have been 10 miles wide, creating the 110-mile diameter Chicxulub crater off Mexico's Yucatan Peninsula. Other massive asteroids, some 10 times larger, have visited the earth from time to time, causing havoc on the slowly evolving life forms. Each time Gaia went about restructuring and reviving the Biosphere.

Commenting on this indefatigable attempts of Gaia to reestablish life on earth led James Lovelock to ask the question "To what extent our collective intelligence is also part of Gaia? Do we as a species constitute a Gaian nervous system and a brain which can consciously anticipate environmental changes?" Ronald Bailey has posed the interesting possibility that having gotten tired of getting whacked by asteroids she has evolved technologically sophisticated, big-brained mammals who can travel in

*Continued on next page* 

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**Gaia Hypothesis, cont'd.**

space as a way of protecting herself from asteroids. Calling it 'just a thought' that perhaps like antibodies that protect the body from invading disease organisms, humans can defend Gaia from extraterrestrial intruders!

The earth's atmosphere today is 79% nitrogen, 21% oxygen with traces of carbon dioxide, methane and argon. As we know, this is crucial to the survival and subsistence of life on earth. Compared to this, the atmospheric compositions of Mars and Venus are 95-96% carbon dioxide, 3 to 4 % nitrogen, with traces of oxygen, argon and methane which is not conducive to the development of life forms as we know them. In the 1960s James Lovelock was asked by the Jet Propulsion Laboratory and NASA to help design experiments to detect life on Mars. Lovelock, on the basis of the analysis of the gaseous composition of the Martian atmosphere predicted that no life would be found on Mars - because of the 'dead equilibrium' of its atmosphere.

Looking from the perspective of outer space he saw the earth, not so much as a planet adorned with diverse life forms, but a planet transfigured and transformed by a self-evolving and self-regulating living system. By the nature of its activity it seemed to qualify as a living being. He named it Gaia, the Greek Goddess which drew the living world from Chaos. Gaia is not a synonym for the biosphere and it is not simply the collection of life forms on the planet termed the biota. The biosphere and the biota taken together form a part, but not the whole, of Gaia. The rocks, the air, the oceans are all parts of Gaia. Gaia has a continuity with the past back to the origins of life and to the future as long as life persists. Gaia can not be known just by knowing individual species or life forms living together. Gaia is a total planetary being. Gaia, according to this hypothesis, is a living entity and that its temperature, oxidation, acidity are in a state of dynamic homeostasis maintained by active feedback processes operated automatically.

Stephen Miller in a brilliant review of James Lovelock's book: *The Ages of Gaia* makes some very interesting observations on the concepts of Gaia. One of his comments is that perhaps there is awareness appropriate at every level of the life process. Perhaps that is a property of life. We might assume that the production of the human species is a great step upward for Gaia, a sort of rapidly evolving brain tissue. Or that Gaia prepares the earth as a cradle and crucible of consciousness evolving. Miller states "Other analogies come to mind; are we part of her arsenal of interplanetary spores? What stage would Gaia be in now? Is our species part of her maturity or an incubation period? Is Gaia herself somehow part of a larger living being, perhaps on a galactic scale? If so how do the cells of this larger being remain in communication? Will we eventually be able to experience something of the awareness which Gaia has?"

Lovelock points out that Gaia, being ancient and resourceful enough to have carried out these successive changes of the planet in spite of asteroid collisions and other setbacks, herself is probably not endangered by the relatively momentary depredations of the human species as it befouls and cripples the biodynamics of its environment. Rather, the danger is to the human race, not only by our own actions, but also by Gaia's reaction to them.

When Lovelock first expressed his ideas about Gaia, the science behind his constructs was still very sketchy and provoked a storm of criticism. But it also aroused much research and thinking, and raised our consciousness to

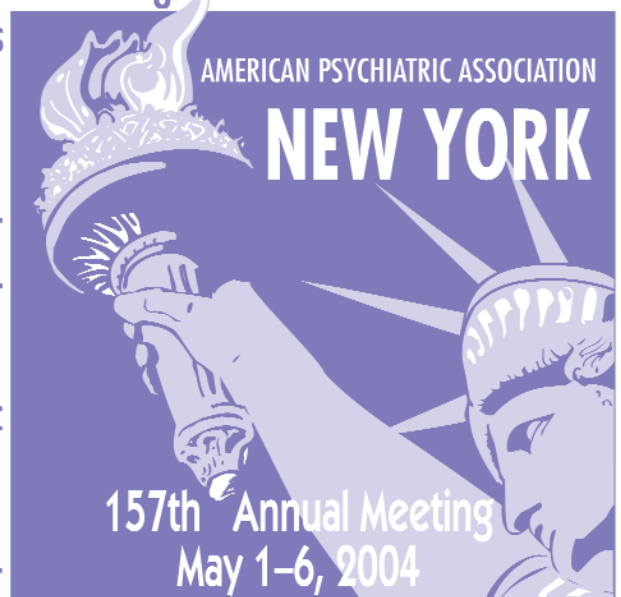
newer possibilities awaiting us. As Teilhard de Chardin noted over half a century ago, "the human person is the sum total of fifteen billion years of unbroken evolution now thinking about itself." By the same reasoning we are not separate beings on Gaia: We are a mode of being of Gaia. Gaia's story is our common sacred story.

In the beginning of his book *The Dream of the Earth*, Thomas Berry says, "One of the most remarkable achievements of the 20th century is our ability to tell the story of the universe from empirical observation and with amazing insight into the sequence of transformations that has brought into being the Earth, the living world, and the human community. There seems, however, to be little realization of just what this story means in terms of the larger interpretation of the human venture." Ultimately, we are called to consciously participate in the further evolution of the universe through love and knowledge. The meaning of the Gaia theory lies through that door. Indeed with love, wisdom and humility man could wear the mantle of Gaia's consciousness. ▲

*Syed Abdullah, M.D.*

**Dissolving the Mind-Brain Barrier**

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**Drug Money, cont'd.**

inferior to somebody else's drug. Economic drive may affect the accuracy of their findings and I believe that we have, in fact, shown that the economic motivation creates a bias that outweighs the motivation to produce fair and accurate findings."

**G.** "The data we examined shows that research funded by drug companies is less likely to be published than research funded by other sources. The studies that the drug companies choose not to publish would not likely be those reporting positive findings. There have been instances in which drug companies have tried to suppress publication of material unfavorable to them. The story about thyroid replacement medication is one example; another is what happened to iron chelation therapy. In the thyroid medication studies, the researcher found that the generics were bio-equivalent and the drug company which produced the drug Synthroid, the thyroid medication made by Boots Pharmaceuticals, would not agree to allow publication of those findings, threatening to sue the researcher. She withdrew her paper."

**H.** "A well-known case also involves the non-steroidal, anti-inflammatory drug Celebrex. In that study focusing on side-effects, the study published in JAMA was

for a six-month period of study and showed fewer GI adverse effects with Celebrex. It turned out that the study had actually run for a year, not six months, and for the actual duration of the study, Celebrex had no fewer side-effects than the NSAIDS it was being compared to. This data was not mentioned in the original JAMA paper and only came to light when people compared the JAMA paper to material posted on the FDA website."

**I.** "There is also evidence that a lot of ghost writing goes on, where companies hire communication firms to write up a trial and then pay a prominent medical person to put his or her name on the paper. In those instances, it is like that the trial will be biased in favor of the company's product."

**J.** "The single largest direct funder of pharmaceutical research is the pharmaceutical industry. In the US, the industry spends tens of billions of dollars a year on research."

**K.** "What is surprising is the naivete of many doctors in assuming research is not biased. You ask doctors, for instance, whether they think they are influenced by drug promotion, and a common response is, 'Me? Never! My colleague down the hall may be, though.' Many physicians are naive

about what drug companies do. Drug companies do what is in their best interests. They don't deliberately hurt people (maybe), but they do fund research that they believe will produce positive results. They do have people write articles and then get other people to be listed as the authors; they do withhold information; and they do try to suppress publication. It may also be that doctors believe that, while researchers can be bought and may be biased, journal editors and the peer review process will eliminate bias. In reality, journals have trouble finding reviewers who are not associated with drug companies. I don't think anyone has looked at whether editors and peer reviewers believe that the studies they review may be deliberately biased by those who fund them."

**L.** "Studies have also shown that pharmaceutical companies that manufacture less safe drugs try to confuse physicians' reasoning by denying that there is a corroborative evidence base or assert that the safer drug is really no safer. Drug companies have certainly done that with their detailing."

**M.** "Another important issue is one in which both efficacy and safety information about newer drugs is not as well known. When a product comes on to the market, it has been tested during pre-approval trials in maybe five or six thousand carefully selected patients who may differ in many respects from the patients who make up the 'market' for whom the drug is intended. Side effects that are not relatively common just won't have been detected during pre-approval testing. Thus, an older drug, such as Lithium, which has been around for many years, during which all of its side-effects have been discovered will not fare as well against newer drugs whose pre-approval testing is based only on six months of study."

**N.** "In interpreting disclosure statements that accompany published papers, physicians should assess who funded the study, whether it was a pharmaceutical company, another kind of business or

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## APA Announces Candidates For 2004 Election

*Steven Sharfstein, M.D., and Jagannathan Srinivasaraghavan, M.D., have been selected to run for president-elect in APA's 2004 election. APA's Nominating Committee also selected candidates for several other trustee positions.*

The APA Nominating Committee announced last month that Baltimore psychiatrist Steven Sharfstein, M.D., and Jagannathan Srinivasaraghavan, M.D., of Anna, Ill., will compete in APA's 2004 election for president-elect of APA.

Sharfstein, APA's senior vice president, is president of the nonprofit Sheppard Pratt Health System in Baltimore and clinical professor and vice chair of the department of psychiatry at the University of Maryland Medical School. He served as APA secretary from 1991 to 1995 and is a former APA deputy medical director.

Srinivasaraghavan (also known as Dr. Ashok Van) is professor and chief of the Division of Community and Public Psychiatry at Southern Illinois School of Medicine and medical director of the Choate Center for Mental Health in Anna, Ill. He is also the Caucus of Asian-American Psychiatrists' representative to the APA Assembly.

For the first time since APA's Board of Trustees voted last year to downsize itself by eliminating one of the two vice-president positions and the members approved that change in the 2003 election, there will no race for vice president this year. APA's other vice president, Pedro Ruiz, M.D., was elected in 2003 for a two-year term, which expires in 2005.

The position of APA treasurer is also up for election next year, and the candidates are Patrice Harris, M.D., of Decatur, Ga., and Carolyn Robinowitz, of Bethesda, Md. Harris is APA's outgoing trustee-at-large, and Robinowitz is a member of the Board of Directors of American Psychiatric Publishing Inc. Both serve on the APA delegation to the AMA, Harris as an alternate delegate and Robinowitz as a delegate.

Also in compliance with the Board's

downsizing plan, the treasurer elected in 2004 will serve as treasurer from May 2004 to May 2005 and will serve as secretary-treasurer from May 2005 to May 2006. The current secretary, Nada Stotland, M.D., was elected in 2003 for a two-year term, which expires in 2005. A secretary-treasurer will be elected in 2006 for a two-year term.

The race for trustee-at-large is the only three-way race in the 2004 election to date. (Candidates who wish to run by petition have until October 15 to submit their petitions.) The candidates are Renée Binder, M.D., of San Francisco, Jeffrey Geller, M.D., M.P.H., of Worcester, Mass., and Michael Vergare, M.D., of Philadelphia. Binder is chair of APA's Committee on Judicial Action, Geller is a member of the Council on Social Issues and Public Psychiatry, and Vergare is chair of the Council on Member and District Branch Relations. All three also serve in the

Assembly: Binder is the Area 6 representative, Geller is the Area 1 representative, and Vergare is a Pennsylvania Psychiatric Society representative.

In the race for member-in-training trustee-elect, John M. Kuzma, M.D., of the University of Iowa in Iowa City, will run against Daniel T. Mamah, M.D., of Washington University in St. Louis.

Two of APA's seven Areas will elect a trustee this year. By press time only one candidate

had been announced for Area 3 trustee: incumbent Roger Peele, M.D., of Gaithersburg, Md.

Vying for the position of Area 6 trustee are Barry Chaitin, M.D., of Newport Beach, Calif., and Thomas Ciesla, M.D., of Santa Monica, Calif. Chaitin is chair of APA's Council on Healthcare Systems and Financing, and Ciesla is a Southern California Psychiatric Society representative to the APA Assembly.

Election ballots will be mailed to all voting members on January 5 and must be returned by February 5. Candidates' biographies and statements will be published in the December 5 issue of Psychiatric News. ▲

*Reprint of APA News article by Catherine F. Brown*

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## Drug Money, cont'd.

organization or a government agency. One must also ask what kind of results would be in the best interests of the sponsor and then look at whether the results match that. If they do, one must read the paper much more critically. One must also be especially critical when reading editorials or papers that do not present original research, because as interpretations, they're especially likely to be biased. Clinical trials may be biased, but at least they describe their methods and show data.

As a result of this new material, I sincerely believe that we must rethink our long-term practice of accepting money from pharmaceutical companies to fund our district branch educational activities. As a matter of fact, I also believe very strongly that we should never accept a speaker from a pharmaceutical company's "panel" or one who is "sponsored or funded" by a pharmaceutical company for one of our district branch's education meetings. We have learned in this past year, as we have

listened to presenters whose names are well known in the psychiatric literature, but who are funded by pharmaceutical companies, that they are extremely biased toward the company paying for their appearance at our meetings.

Isn't it time that we, as psychiatrists, took a stand against behavior by pharmaceutical companies which has contaminated our practices and which will very likely have a deleterious effect on our patients? ▲

*Alan J. Tuckman, M.D*

## Election Guidelines, cont'd.

Area Council/state association resources or personnel is prohibited. The limits on the number of letters that each person may write were established because the committee believes that 400 letters (or 100 for Area office) is a manageable number for any member wishing to support a candidate.

With the increased use of e-mail, the guidelines for use of electronic media should be noted carefully. While there are no limits on the number of campaign messages that may be sent by e-mail, members wishing to support candidates

in this way must include the words "APA Campaigning" in the subject line.

Further, the only APA-supported list serve that may be used for campaigning is Member-to-Member. List serves of other psychiatric organizations may be used for campaigning only if permitted by those organizations.

APA's Web site will once again contain information about candidates, with links to the homepages of candidates who have Web sites.

The Elections Committee encourages

members to get involved in the election process, to support the candidates of their choice, and to encourage others to do so by writing personal letters to friends and colleagues or by personal contact. The committee is open to any suggestions the membership has to improve or change the guidelines. Most importantly, we encourage you to vote and to urge your colleagues to do the same. Ballots will be mailed January 5, 2004. Election information will be included in the December 5 issue of Psychiatric News. ▲

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