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CAMH Science: Centred on Discovery

Science Synopsis from the
Research Program
Volume One, Issue Four

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From the Desk of Darryl Yates, Director of Research Operations

Discover, Share, and Apply New Knowledge – this is just one of CAMH's goals that provides strategic clarity and focus to our mission, vision, and values. As a leader in mental health and addictions research, all members of the Research Program are committed to achieving this goal. From scientists to analysts, from laboratory technicians to administration staff, our work is pushing the boundaries of discovery and creating positive change in the community.

But how do we know we are reaching our goal? What indicators do we have to tell us we're on the right path? The Research Program is now collecting and analyzing information such as scientific publications, staff recruitment, external funding, media relations, and technology transfer. We are using these indicators to measure our impact in the academic community, the broader community, treatment and industry.

Already we've learned that 28% of our scientists are amongst the most highly cited researchers. This confirms that CAMH is home to scientific leaders who are not only generating important research, but also teaching the scientific leaders of tomorrow.

Our external funding continues to grow each year, enabling our scientists to continue to improve understanding, treatment, and public policy for mental illness and addictions. Local, national and even international media are sharing more stories about CAMH research. In 2005/06 research stories generated 42% of the CAMH media coverage, and we are poised to exceed this number for 2006/07.

These are just a few examples of our commitment to discovering, sharing and applying new knowledge. And as we look towards the coming year, and the future of the Research Program at the redeveloped Queen Street site, we will continue to be a scientific leader of change for mental illness and addiction.

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Got a story idea you'd like to share? Contact the editor at leah_kirkpatrick@camh.net. All suggestions and comments are welcome

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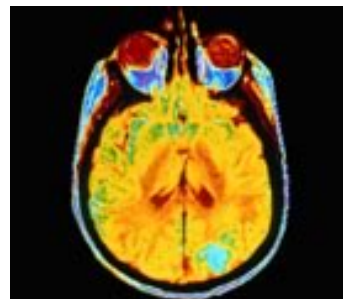
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Winter 2007 News and Events

Recognition in Research

Congratulations. Good job. Well done. Thank you. A few kind words of recognition can mean so much to people. In our busy days, we don't always take time to recognize the people around us, and help ensure they get the encouragement they need to keep doing a great job. The CAMH Outstanding Research Employee Awards (C.O.R.E) program is changing this for the Research Program. In just two years, the C. O.R.E Awards has become a signature event that is setting the standard for recognition in Research. [more](#)



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Mission Barrio Adentro:
The Right to Health and Social Inclusion
in Venezuela.



 Pan American
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Organization
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World Health Organization

Mission Barrio Adentro

The WHO/PAHO report *Mission Barrio Adentro: The Right to Health and Social Inclusion In Venezuela* chronicles the origin, development and impact of Venezuela's strategy for restructuring and transforming their entire health system. One of *Mission Barrio Adentro's* many achievements was integrating mental health prevention into the health care system.

CAMH's Dr. Carles Muntaner, CAMH Psychiatric and Addictions Nursing Research Chair, acted as an advisor to the Venezuela Minister of Health Francisco Armada, who created this program, and co-authored the WHO/PAHO report. "This is a landmark study of community participation in health care reform," Said Dr. Muntaner.

For a copy of this study in English, French or Spanish visit [Mission Barrio Adentro: The Right to Health and Social Inclusion In Venezuela](#)

Press Release: New Dopamine Brain Target Discovered

A team of Canadian researchers, lead by Dr. Susan George and Dr. Brian O'Dowd at the Centre for Addiction and Mental Health (CAMH), discovered a distinct dopamine signalling complex in the brain. Composed of two different types of dopamine receptors, this novel target may have a significant role in understanding and treating schizophrenia.

Visit [New Dopamine Brain Target Discovered: Potential Breakthrough for Schizophrenia](#)

[Treatment](#) for more information.

Technology Transfer

CAMH's Technology Transfer office is committed to translating scientific discoveries into practical applications. Visit [CAMH Signs Exclusive Technology License Agreement with Epigenomics AG](#) to learn more about one of our ideas that is changing the world.

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Alcohol, Depression and Gender

Two studies by CAMH's Dr. Kathryn Graham provide new information on alcohol consumption, depression, and gender.

Published in *Alcoholism: Clinical and Experimental Research*, January 2007 Dr. Graham's study [Does the Association Between Alcohol Consumption and Depression Depend on How They Are Measured?](#) looked at the associations between depression and alcohol use. Uniquely, this study examined this relationship separately for women and men. Dr. Graham's work found that how researchers measure alcohol consumption and depression, as well as examining gender, are key issues when interpreting findings on the relationship between alcohol and depression. These findings provide critical clarification of the relationship between alcohol consumption and depression.

Results indicate that:

- Depression is most strongly related to a pattern of binge drinking.
- Those who usually drink less than two drinks per occasion and never drink as much as five drinks are less depressed – for both measures of depression – than former

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drinkers. This relationship with drinking pattern is greater for women than for men.

- The overall relationship between depression and alcohol consumption is stronger for women than for men, but only when depression is measured as meeting a clinical diagnosis of *major depression*.
- There is no gender difference when depression is measured as *recent depressed feelings*, which is commonly done in research on this topic.

This information will be essential for future research intended on identifying causal directions and mechanisms. Also, this data suggests that clinicians treating women for depression need to be concerned about women's use of alcohol.

Other recent work by Dr. Graham shed new light on antidepressants use and the impact on the link between depression and alcohol use. Published in the *Canadian Medical Association Journal (CMAJ)*, February 27, 2007, this work explored the relationship between use of antidepressants and level of alcohol consumption, examining whether using antidepressants affected the link between depression and level of alcohol consumption.

The research concluded that women suffering from depression consumed more alcohol than women who did not experience depression, regardless of antidepressant use. This finding is significantly different than rates found in male counterparts. While men suffering from depression generally consume more alcohol than non-depressed men, those who use antidepressants consume alcohol at about the same level as non-depressed men.

The study also revealed:

- Overall, participants in the survey experiencing depression drank more alcohol than did non-depressed respondents.
- Men taking antidepressants consumed significantly less alcohol than depressed men who did not use antidepressants.
- Non-depressed men consumed 436 drinks per year, compared to 579 drinks for depressed men not using antidepressants, and 414 drinks for depressed men who used antidepressants
- For women, the alcohol use remained higher whether those experiencing depression took antidepressants or not. The numbers are telling: 179 drinks per year for non-depressed women, 235 drinks for depressed women not using antidepressants, and 264 drinks for depressed women who used antidepressants

This type of research, which specifically looks at gender differences, helps find important clues to tailor treatments. Further research is needed to assess whether these findings are due to drug effects or some other factor.

More information on this study is available at [Alcohol consumption and the use of antidepressants](#).

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New Pieces in Autism's Genetic Puzzle Discovered

An international group of scientists identified a chromosomal region that may provide new leads towards a better understanding of the genetic basis of autism - a severe neurodevelopmental disorder afflicting as many as 1 in 165 Canadian children. Although it is generally agreed that a strong genetic basis underlies the condition, the causes of autism are still unknown. The completion of this study is a milestone event in furthering our understanding of autism. It builds on existing autism genetics research, brings scientists much closer to identifying susceptibility genes for the most common forms of autistic disorder, potentially providing improved treatment and even diagnostic tools.

CAMH's Dr. John Vincent worked with a team of 136 researchers from nine countries as part of the Autism Genome Project. This group shared their resources, making it possible for the team to analyze DNA from approximately 1,600 families, performing the largest autism linkage scan (i.e. tested enough genetic markers to query the entire genome) to date. The team also analyzed variations of large pieces of DNA, or copy number variations (CNVs), in these families.

This linkage analysis enabled the team to implicate a previously

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unidentified region of chromosome 11, while the CNV analysis identified neurexin 1 (a member of a family of genes believed to be important in neuronal contact and communication), among other regions and genes in the genome. The neurexin finding highlights a group of neurons - glutamate neurons – and the genes affecting the neuron's development and function. This finding suggests that neurexins play a critical role in autism spectrum disorders, in some individuals.

Dr. Vincent will continue to play a role in the Autism Genome Project, as researchers work on this global scientific effort to map the genes responsible for causing autism.

Through his work at CAMH, Dr. Vincent is also taking a different approach to understanding autism. In a preliminary study using large families with autism in Pakistan, Dr. Vincent and colleagues are treating autism as a single gene disorder in each separate family.

They hope to learn from unique features of the population they are studying. In many families in Pakistan intra-family marriages are very common. This means that if there is a genetic abnormality, it may be present in both mother and father, and then inherited twice, i.e. one copy of the abnormality inherited from the mother and one from the father, in some of their children. As a consequence, rare recessive diseases can recur with high frequency within the family.

Dr. Vincent hopes that by studying this genetically unique population, his team will find enough evidence to identify a specific autism gene or genes, or to narrow down the region of investigation to a small part of one chromosome. They could then combine this family data with existing information

from other lines of research to identify a new gene in a specific region.

Visit [Using Genetics to Unlock Autism's Mysteries](#) for more information on Dr. Vincent's work at CAMH.

More information on the recent work from the Autism Genome Project is available from *Nature Genetics* at: [Mapping autism risk loci using genetic linkage and chromosomal rearrangements](#)

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Women and Problem Gambling

Gambling opportunities are everywhere, and continue to expand rapidly. With this, researchers have noted a dramatic increase in the number of gamblers and gambling-related problems. Historically a male-dominated activity, gambling is becoming a mainstream activity for women. Approximately one third of problem gamblers are women, yet there is limited gender-specific research and treatment.

To help address this knowledge gap, CAMH's Roberta Boughton, M Ed, Addiction Therapist at the Problem Gambling Service, headed up a Provincial study that involved the largest known sample of Ontario women who are gambling at a problematic level but who are not in treatment. One purpose was to consider the vulnerability and co-morbidity factors of female problem gamblers.

The analysis showed that:

- 24% of respondents reported having a sibling with psychiatric problems, and 38% had a father with drug or alcohol problems;
- 69% experienced emotional abuse, 46% experienced physical abuse, and 28% experienced sexual abuse as an adult;



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- The most common concurrent problem was smoking (48%), followed by binge eating (27%) and compulsive shopping (24%). 9% reported alcohol use problems, and 8% reported drug use problems. The rates of all problematic behaviours were higher than those found in the general population.
- 71% of respondents reported seeking professional help for mental health concerns; and
- 45% of the sample reported having suicidal thoughts, while 29% had made suicide attempts.

These results demonstrate that problem gambling tends to be part of a complex combination of mental health and substance use problems, and poorly developed coping strategies due to turbulent personal and family history. This information helps us understand what makes women vulnerable to problem gambling, supports the need for further research and gender –specific treatment, and provides direction on shaping effective prevention and intervention strategies targeted at women.

Visit [Vulnerability and Comorbidity Factors of Female Problem Gambling](#) for more information.

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The Positive and Negative Effects of Alcohol

There is growing evidence of alcohol-related harms, as well as acknowledgement of the health benefits of moderate consumption for some consumers. A new report from CAMH, funded by Health Canada, provides an overview of the positive and negative health, psychological and social outcomes attributable to alcohol consumption in Canada.

Led by Dr. Jürgen Rehm and a team of CAMH researchers, *Overview of positive and negative effects of alcohol consumption - implications for preventive policies in Canada* also provides separate estimates of alcohol consumption by different socio-demographic categories; incorporates the alcohol specific outcomes into a larger framework of determinants of health; and provides a summary of evidence-based prevention strategies.

Using international literature and recent evidence from Canada, the report clearly outlines the complex and multi-dimensional relationship between alcohol consumption and health and social outcomes. For example, while alcohol consumption is linked to beneficial and detrimental health and social consequences, the net health consequences are overwhelmingly detrimental. It is estimated that 6.2% of all deaths among those under age 70 were due to alcohol

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in Canada in 2002. The health benefits are mainly restricted to cardiovascular protective effects of light to moderate drinking that occurs only in older age groups. Overall, alcohol consumption was estimated to be responsible for 8,103 deaths (females 2,360; males 5,744), but also prevented 3,845 deaths (females 1,595; males 2,250) in Canada for the year 2002.

The report also outlines that the psychological and social consequences of alcohol consumption may also be beneficial as well as detrimental. Alcohol is responsible for beneficial effects regarding perceived health, mood enhancement, stress reduction, sociability, social integration, and mental health. However, there are detrimental consequences concerning public disorder, workplace, education, family and social relations, violence (including domestic violence) and criminality.

Overall, Dr. Rehm and his team suggest that governmental interventions (e.g. taxation, drinking driving laws and their enforcement, low density of retail outlets) may be the most cost-effective with respect to alcohol-attributable harm. However, their analyses also indicate that future research and interventions should pay increased attention to determinants of health.

For a PDF copy of the study visit [Overview of positive and negative effects of alcohol consumption - implications for preventive policies in Canada](#) (English) or [Surviv des bienfaits et méfaits de la consommation d'alcool - incidence sur les politiques de prévention au Canada](#) (French).

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