



Institute of Psychiatry, Psychology & Neuroscience

Academic Psychiatry

Divisional Digest

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Welcome to the seventh edition of the Academic Psychiatry Divisional Digest. Thank you for all your numerous contributions.

Any feedback for future editions would be greatly appreciated.

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Welcome from our Vice-Dean, Prof Allan Young

Welcome to the Academic Psychiatry Divisional Digest for September 2020. We have compiled this update on our activities against a background of a few months of unprecedented events which have impacted the world, the UK, King's and the IoPPN as well as everyone in Academic Psychiatry. The Covid-19 Pandemic is on-going and as I write seems to be possibly flaring up again in some countries. It seems clear that we are not out of the woods yet and it is not clear when we all will be.



The Pandemic has been testing for all of us but I am very proud of the way that our Division of Academic Psychiatry has coped with these turbulent events. Although all have played an important role, a few individuals and groups should be given special thanks. Foremost amongst these are our Professional Services Staff who have worked exceptionally hard and shown great resourcefulness and flexibility and continue to do so. The challenges related to the Pandemic would have been impossible for us to cope with without their extraordinary contribution. Similarly, a great thanks should be extended to all our staff involved in security, cleaning and building integrity: again without their essential efforts we would be unable to function. Another area which has been greatly "stress-tested" is education.

be of vital importance for our core mission of education. Many of our academics have been extremely active and helpful in the crisis. A number of our experts have been advising the Government and many have been redeployed or prioritising clinical work to aid the NHS in these troubled times. It goes without saying that many academics have been critically involved in our educational efforts and their efforts are noted with many thanks. Lastly, it has been heartening to observe how our students, who are in many ways the foundation of the IoPPN, have responded and coped with these difficult circumstances.

Although at times it seems as though the virus dominated everything many other important matters have arisen and we in Academic Psychiatry continue to play our full role in the IoPPN and KCL's evolving interaction with wider societal changes. As we slowly return to campus I'm sure we will face fresh challenges and equally sure that we will cope with these too. I'm also pleased that we will be able once again to principally focus on our activities relating to education about and research into the causes and treatment for mental ill-health.

One of our Divisional Education Leads (Dr Tom Spencer) has been redeployed to the NHS and while this is vital it means that the burden on Drs Kravariti and D'Oliveira has been even greater. I extend to them our grateful thanks for their efforts which are and will continue to

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Farewell Professor Malcolm Lader



PROFESSOR MALCOLM LADER OBE

The Addictions Department has lost one of its longest-serving members Dr Malcolm Lader, Emeritus Professor of Clinical Psychopharmacology.

Malcolm began his career as an MRC scientist at the Institute of Psychiatry more than fifty years ago and made notable contributions to the use of psychophysiological measures in investigations of anxiety and the effects of medications thereon.

Many psychiatrists and psychologists passed through his group went on to exceptionally productive careers in psychopharmacology. He is best known for his studies on the dependence and abuse of benzodiazepines that had a major impact upon the extent of their use as prescription medicines.

Malcolm passed away earlier this month after a short illness.

“The outcome of successful withdrawal is gratifying, both in terms of improved functioning and abstinence from the benzodiazepine usage. Economic benefits also ensue”.

Professor Malcolm Lader, 2009

Growing numbers of alcohol-related hospital admissions linked to local spending cuts

A new study by the Addictions Department, has shown an association between increases in alcohol related hospital admissions and decreases in spending on alcohol services since they came under the responsibility of local authorities in 2012.

In March 2012 the [Health and Social Care Act \(HSCA\)](#) transferred the responsibilities of commissioning specialist drug and alcohol services from the NHS to local authorities. In 2018 there were nearly 25,000 deaths related to alcohol in England, and data collected during the COVID-19 pandemic has shown that [nearly one in five daily drinkers have further increased the amount they drink since lockdown](#) ([Alcohol Change UK](#)).

Published in [The British Journal of Psychiatry](#), the study showed an association between the level of spending on treatments for alcohol misuse at the local authority level and the number of alcohol-related hospital admissions since the HSCA has come into force.

According to the analysis, if the average local authority reduced its net annual spending by 5 per cent on treatment for those with alcohol misuse problems there would be an expected associated average increase of 60 alcohol-related hospital admissions for that local authority per 100,000 people per year. To put this

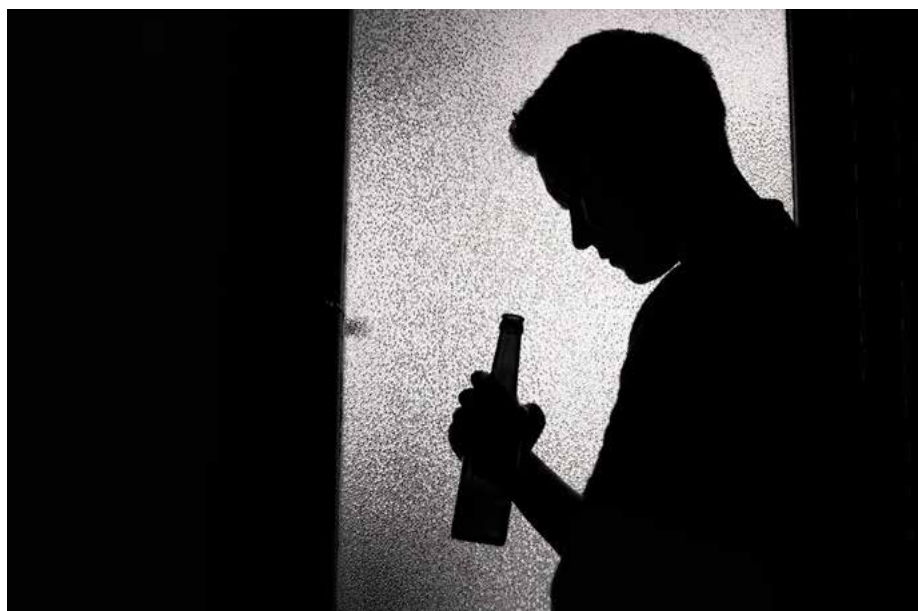
reduction in spending into context 5 per cent of annual expenditure per local authority is on average 18p per person. This is the first study known to assess the relationships between alcohol-related hospitalisations, the provision of specialist alcohol treatment and money spent on alcohol services at the local authority level in England. This in turn has been affected by reductions in the government’s public health grant to local authorities.

The study analysed data from 2012 to 2019 on the expenditure on alcohol services, the provision of specialist alcohol treatment and the level of alcohol-related hospitalisation from 152 local authorities in England. The study showed that, since the HSCA was passed, on average local authorities have decreased annual net spending on treatment for alcohol misuse treatment by £147 per 1000 people and the net spending for prevention and reducing alcohol misuse by £88 per 1000 people.

[Dr Emmert Roberts](#)
MRC Clinical Research Fellow

[Dr Colin Drummond](#)
Professor of Addiction Psychiatry

DOI: <https://doi.org/10.1192/bjp.2020.120>



Single dose of main psychoactive component of cannabis could induce short-lived psychiatric symptoms



Researchers from Psychosis Studies Department, King's College London have investigated the impact of short-term use of two important psychoactive constituents in cannabis on healthy volunteers: delta-9-tetrahydrocannabinol (THC) and cannabidiol (CBD).

By analysing the results from 15 studies involving a total of 331 participants, the research showed that a single dose of THC could induce psychiatric symptoms in people with no history of psychotic or other major psychiatry disorders.

Published in *Lancet Psychiatry*, the research considered the effects of THC and CBD on different types of psychiatric symptoms. The study, which only included research on healthy volunteers, showed that the largest effect of THC compared to a placebo was recorded for general symptoms which included depression and anxiety (effect size of 1.01). For positive symptoms, such as delusions and hallucinations which are often experienced in schizophrenia, the acute administration of THC showed an effect size of 0.91 across the studies, whilst for negative symptoms such as blunted affect and lack of motivation, there was an effect size of 0.78.

Cannabis is one of the most widely used psychoactive substances worldwide, with 6-7% of the population in Europe using it every year, over 15% in the USA and around 188 million people globally. The drug has been legalised in 11 US states, Canada and Uruguay and policymakers

elsewhere are deliberating whether to allow the medicinal use of cannabis products.

Four of the 15 studies examined the effects of CBD on psychiatric symptoms induced by THC in healthy volunteers. Analysis of these studies showed that CBD did not induce any of the three types of psychiatric symptoms. There was no consistent evidence across the four studies that CBD moderates the effects of THC in healthy volunteers.

The doses of THC in the meta-analysis ranged from 1.25mg to 10mg, leading to peak THC blood levels of 4.56 to 5.1 ng/ml when orally administered and 110-397 ng/ml when injected or inhaled. These blood levels are comparable to those seen shortly after smoking a single typical cannabis joint containing 16-34mg of THC.

Researchers considered a range of important variables that could moderate the effects of these two cannabis constituents. Their analysis showed that intravenous administration of THC was associated with greater positive symptoms than inhaled THC, and that positive symptoms induced by THC were lower in tobacco smokers compared to those who did not smoke tobacco. Researchers highlighted that the association between tobacco use and effect of THC on positive symptoms should not be interpreted as a recommendation to use tobacco to counter the effects of THC. Tobacco smoking is associated with lower levels of the receptor in the brain to which THC

binds called the cannabinoid 1 receptor (CB1R), which could mean smokers are less sensitive to effects of THC.

An increase in age was associated with more negative symptoms induced by THC. Sex, dose, current cannabis use, frequency of cannabis use and type of THC had no moderating impact on the effects.

The authors highlight several limitations to their study. Their finding that psychotic symptoms were not moderated by level of dose or by prior cannabis use contrasts with results from several studies and may reflect limited power in the analysis. They suggest that further work is needed to clarify the effects, particularly at the level of individual symptoms.

The authors identified potential publication bias, where significant findings are more likely to be published than lower effect sizes. However, they found that the better the quality of the study, the greater the effect size, suggesting that their results - which also included lower quality studies - may in fact underestimate the size of the effect of THC on inducing symptoms.

Dr Oliver Howes
Professor of Molecular Psychiatry

DOI: [https://doi.org/10.1016/S2215-0366\(20\)30074-2](https://doi.org/10.1016/S2215-0366(20)30074-2)

Improvement in cognitive skills and well-being in people with bipolar disorder

CfAD researchers (led by [Professor Allan Young](#) and coordinated by [Dr Rebecca Strawbridge](#)) have found promising results in a proof-of-concept clinical trial targeted at improving cognition in people with bipolar disorder.

They found that adding cognitive remediation therapy (CRT) to usual treatments for 12 weeks led to an improvement in a wide range of cognitive skills (spanning memory, attention, processing speed, multitasking, verbal fluency, and learning), as well as enhanced well-being. The study was funded by the National Institute of Health Research and has been published in [Bipolar Disorders](#).

Currently, there is no known treatment for cognitive impairments in patients with bipolar disorder. The study used an evidence-based CRT programme called [CIRCuiTS](#) (Cognitive Interactive Remediation of Cognition and Thinking Skills), which was pioneered by [Professor Dame Til Wykes](#) for people with psychoses. The CIRCuiTS programme is partly computerised and partly therapist-guided, and it allows participants to practice multiple cognitive skills closely related to real-life activities that become progressively more difficult.



This trial was a proof-of-concept study and the team are now planning a larger study to indicate whether CRT is efficacious for those with bipolar disorder.

Dr Rebecca Strawbridge
Post-doctoral Research Associate

DOI: <https://doi.org/10.1192/bjp.2020.128>

Lithium in drinking water linked with lower suicide rates



Naturally occurring lithium in public drinking water may have an anti-suicidal effect – according to a new study from Brighton and Sussex Medical School (BSMS) and the Institute of Psychiatry, Psychology & Neuroscience at King’s College London.

Published in the [British Journal of Psychiatry](#), the study collated research from around the world and found that geographical areas with relatively high levels or concentration of lithium in public drinking water had correspondingly lower suicide rates.

Lithium, sometimes referred to as the “Magic Ion”, is widely and effectively used as a medication for the treatment and prevention of manic and depressive episodes, stabilising mood and reducing the risk of suicide in people with mood disorders. Its anti-aggressive properties can help reduce impulsivity, aggression, violent criminal behaviour and chronic substance abuse.

Lithium is a naturally occurring element and is found in variable amounts in vegetables, grains, spices and drinking water. It is present in trace amounts in virtually all rocks, and is mobilised by weathering into soils, ground and standing water, and thus into the public water supply.

Recent studies have also linked lithium to reduced incidence of Alzheimer’s disease and other dementias.

[Professor Allan Young](#) commented “This synthesis and analysis of all available evidence confirms previous findings of some individual studies and shows a significant relationship between higher lithium levels in drinking water and lower suicide rates in the community.”

He added, “The levels of lithium in drinking water are far lower than those recommended when lithium is used as medicine although the duration of exposure may be far longer, potentially starting at conception. These findings are also consistent with the finding in clinical trials that lithium reduces suicide and related behaviours in people with a mood disorder.”

The study involved systematic review and meta-analysis of all previous studies on the subject – conducted in Austria, Greece, Italy, Lithuania, UK, Japan and USA – which correlated naturally occurring lithium levels in drinking water samples and suicide rates in 1,286 regions/counties/cities in these countries.

The study is published in the *British Journal of Psychiatry*. It was supported by BSMS, and part-funded by the National Institute for Health Research (NIHR) Biomedical Research Centre at South London and Maudsley NHS Foundation Trust and King’s College London.

Dr Allan Young
Professor of Mood Disorders

DOI: <https://doi.org/10.1192/bjp.2020.128>

Genes related to inflammation and stress may help tailor treatments for depression

New research has found that measuring levels of inflammation and stress-response in the blood may provide useful information to show which patients with depression will or will not respond to treatment with antidepressants. In addition, these findings could potentially help towards developing personalised treatments for depression that involve the use of anti-inflammatories.

The study was led by King's College London and involved researchers from IRCCS Istituto Centro San Giovanni di Dio Fatebenefratelli (Brescia, Italy), University of Milan (Italy), University of Cambridge, University of Oxford, University of Glasgow, Cardiff University, and Janssen Pharmaceutica.

Published in [Translational Psychiatry](#), the study examined the blood from 130 patients with major depressive disorder (MDD) and 40 healthy controls to understand how gene expression - the process which signals the production of new molecules - could be used to distinguish those patients with treatment-resistant depression (TRD) from those who are responsive to medication. The participants were recruited as part of the [Biomarkers in Depression \(BIODEP\) Study](#).

About 1 in 5 people suffer from depression in the UK and up to one third of these are considered resistant to treatment, which means that medication has no measurable effect and they have fewer options for managing their depression.

“While there is overwhelming evidence of increased inflammation in depression it is still unclear how exactly this occurs and what it looks like at the level of chemistry within the body. In this study we show for the first time that it is possible to distinguish patients with depression who do not respond to medication from those who are responding to the antidepressant medication, based on the levels of well-known measures of inflammation and the presence of molecular mechanisms that put this inflammation into action. This could potentially provide a means



to assess which treatment options may be more beneficial from the outset.” – said author on the paper, [Dr Annamaria Cattaneo](#).

The researchers observed notably stronger molecular signs of inflammation and stress in both the patients who were not responding to antidepressant treatment and patients who were medication-free, compared with patients with depression who were responsive to medication and healthy controls. These findings support the growing evidence that patients that do not respond to antidepressants or have untreated depression have heightened inflammation compared with controls.

Previous research has shown that high levels of C-reactive protein (CRP) in the blood indicate some degree of inflammation in the body and, in the present study, researchers found higher levels of blood CRP in both patients that were resistant to treatment and medication-free patients compared with patients with depression who were responsive to medication as well as healthy controls. Likewise, researchers reported that the expression of several inflammation-related genes (including IL-1-beta, IL-6, TNF-alpha, and P2RX7) was also increased in both treatment resistant and medication-free patients. Some of the 16 genes measured in this paper had never before been measured in human blood.

Researchers also examined indicators of stress and found that both the treatment resistant and drug-free patients have reduced numbers of glucocorticoid receptors which are involved in the body's stress response. With reduced numbers of receptors, the body's ability to buffer stress through hormones such as cortisol is diminished, which increases the risk of more severe forms of depression.

“Our study has provided important insight into the mechanisms that can explain the link between inflammation and depression which will especially impact the future of personalised psychiatry. While much of drug-based intervention currently relies on a ‘trial and error’ approach, studies such as this implore investigation into identifying sub-groups of patients with depression – such as treatment resistant patients with inflammation – so that patients may be guided directly to treatment strategies which work best for them.” said Professor Carmine Pariante

[Dr Annamaria Cattaneo](#)
Research Student, Psychological Medicine

[Dr Carmine Pariante](#)
Professor of Biological Psychiatry

DOI: <https://doi.org/10.1038/s41398-020-00874-7>

Sir Robin Murray receives the SIRS Lifetime Achievement Award



PROFESSOR SIR ROBIN MURRAY

Sir Robin Murray is Professor of Psychiatric Research in the Department of Psychosis Studies. His research explores the causes of schizophrenia and bipolar disorder, and looks towards developing better treatments for these disorders. He is best known for his role in establishing the neurodevelopmental hypothesis of schizophrenia, particularly in how environmental risk factors contribute to this disorder.

He is ranked as one of the most influential researchers in psychiatry by Thomson Reuters' Science Watch and 3rd in

schizophrenia research. He is also one of only 5 psychiatrists ever elected as Royal Society Fellows. In 2011, he was awarded a Knighthood for services to medicine.

“The schizophrenia research field has moved forward impressively. The cause of schizophrenia is no longer a mystery... By the end of this decade, I expect that our understanding will have developed sufficiently so that we will have abandoned the stigmatising term schizophrenia in favour of aetiologically based diagnoses and meaningful formulations; and we will have a range of more specific pharmacological and psychosocial interventions tailored to individual need” said Professor Sir Robin Murray. The Lifetime Achievement Award will be presented to Sir Robin at the 2021 Congress of the Schizophrenia International Research Society (SIRS) in Toronto, Canada.

“Although this is a lifetime achievement award where you might just look back – [Professor Sir Robin Murray] is looking forward to new research to improve the lives of people with a diagnosis of schizophrenia. He is (and remains) a pioneer and has been responsible for many

paradigm shifts in his search for the causes of schizophrenia” – [Professor Dame Til Wykes](#), SIRS President and IoPPN Vice Dean (Psychology & Systems Sciences)

[The Schizophrenia International Research Society](#) (SIRS) was established in 2005 to bring together and facilitate international scientists in the exchange of the latest advances in biological and psychosocial research in schizophrenia. The society promotes research aimed at identification of the causes of schizophrenia, prevention of the illness whenever possible, and treatment of those people who develop the illness. This includes supporting the highest quality research and advocating for increased research funding and increased opportunities (and reduced barriers) for later research.

SIRS is a multidisciplinary society, including researchers who identify themselves as psychologists, psychiatrists, neuroscientists, and neurologists.

[\(https://schizophreniaresearchsociety.org/meetings/awards-and-grants/lifetime-achievement-award/\)](https://schizophreniaresearchsociety.org/meetings/awards-and-grants/lifetime-achievement-award/)

Oliver Howes elected as new Fellow of the Academy of Medical Sciences

Oliver Howes is Professor of Molecular Psychiatry in the Department of Psychosis Studies. His research interests centre on the causes and treatment of affective and psychotic disorders. His recent work has focussed on understanding the role of dopamine and neuroinflammation in



PROFESSOR OLIVER HOWES

the development of psychosis, the effects of antipsychotic drugs, and the causes of cognitive impairments. Professor Howes also continues to conduct clinical work as a Consultant Psychiatrist at the SLAM where he runs a service for people with psychoses. He is also Programme Leader at the MRC London Institute of Medicine, Imperial College London.

“I’m honoured to be selected to join the Academy. The Academy plays an important role in fostering medical research across disciplines. I am pleased to be able to represent psychiatric research in this, particularly when we are all facing challenges from COVID19”, said Oliver.

[Oscar Marín](#), Professor of Neurobiology, and Head of Department of Developmental Neurobiology and

Director of the MRC Centre for Neurodevelopmental Disorders has also been elected.

Of the new Fellows, [Professor Sir Robert Lechler](#), President of the [Academy of Medical Sciences](#) and Senior Vice President/Provost at Kings said: “This year our new Fellows announcement happens amidst a global health crisis. Some will face the challenge of how to continue to lead on some of the most pressing health challenges our society faces beyond coronavirus, such as heart disease, diabetes or cancer. Never has there been a more important time to recognise and celebrate the people behind ground-breaking biomedical and health research, working harder than ever to further knowledge and protect patients and the public.”

Leadership Award in Research



PROFESSOR KATE TCHANTURIA

Kate Tchanturia was awarded the Leadership Award in Research by the Academy of Eating Disorders in recognition of an internationally respected body of research yielding new knowledge about Eating Disorders and measurably advancing the field. Professor Tchanturia's main research interest is in the neuropsychological, cognitive and emotional aspects of Eating Disorders. She supervises the next generation of Eating Disorders scientists, including doctoral and MSc clinical psychology students, which ensures that her research legacy reaches far beyond her own individual work. She has achieved prolific research productivity that includes published books, book chapters, Eating Disorders treatment manuals, and numerous peer-reviewed scientific publications. (<https://www.youtube.com/watch?v=FG-KfLsU5V8c>)

BAP Psychopharmacology Awards



DR GEMMA MODINOS

The BAP Psychopharmacology Awards are awarded annually to reward excellence in both clinical and non-clinical psychopharmacology. Previous winners have gone on to become internationally-recognised experts in their field. Applications are reviewed by a panel of BAP Officers/Council Members.



DR ALESSANDRA BORSINI

We are pleased to announce that the winners of this year's [BAP Psychopharmacology Awards](#) are:

[Dr Gemma Modinos](#) (Psychosis Studies) awarded **Senior Non-Clinical** & [Dr Alessandra Borsini](#) (Psychological Medicine) awarded **Junior Non-Clinical**

Simon Wessely appointed to ESRC Council

The Board of UK Research and Innovation (UKRI) has appointed [Professor Sir Simon Wessely](#) as a member to the Economic and Social Research Council (ESRC).

Professor Wessely, Regius Professor of Psychiatry at King's College London, joins two other new members of the ESRC's Council which comprises representatives from the academic community as well as individuals from business and the public sector.

Of his appointment, Professor Wessely said, "From the start of my career as a medical academic, I have always been fascinated by how health is influenced by our bodies, our minds and the societies we live in. I have also found that some of the best collaborations I have had have been beyond the field of medicine – with social scientists, historians, anthropologists, lawyers, statisticians – you name it, I have worked with them. So joining the Council of ESRC, committed to using all the social sciences for the benefit of health and wellbeing, is something close to a dream."



PROFESSOR SIR SIMON WESSELY

Members of the council work with Executive Chair Professor Jennifer Rubin to shape the ESRC's strategy and to support UKRI's overall mission to maintain the UK's world-leading position in research and innovation. ESRC Council members also provide Professor Rubin, and UKRI more widely, with input, intelligence and feedback from their communities and stakeholder groups.



DR JAMES RUCKER

American Society of Clinical Psychopharmacology Award

Dr James Rucker received a 2020 American Society of Clinical Psychopharmacology Annual Meeting New Investigator award.

The goals of the program are to expose awardees to the breadth of opportunities available to clinical researchers, introduce them to potential senior investigators from other institutions, and facilitate the establishment of a national peer group for the New Investigators.

MRC Research Award



DR ROLAND ZAHN

Roland Zahn was delighted to receive the MRC research grant “Neurocognitive signatures predicting risk of recurrent depression” (>£1M). This would not have been possible without [Dr Andrew Lawrence](#) who developed a user-friendly software tool [dCVnet](#) together with [Prof Daniel Stahl](#).

This tool resulted in machine-learning-based positive predictive values of over 80% for recurrence risk in major depressive disorder (MDD) using fMRI and cognitive measures of self-blaming biases in a previous MDD sample.

The aim of the current project co-led by Profs Stahl, Young, Barker & Williams is to replicate this finding in a larger sample from 2021 until 2025.

T21RS Research COVID-19 Research



PROFESSOR ANDRE STRYDOM

Andre Strydom from FANS is leading on the UK arm of the [Trisomy 21 Research Society's](#) Covid-19 in Down syndrome surveys and actions, to address the concern that individuals with Down syndrome may be especially vulnerable due to the dysfunctional immune system associated with the condition. The work is undertaken in collaboration with the main Down syndrome organisations in the UK (DSA, DSEI, DSi, DSRF and DSMIG). The initial results of the survey has recently been posted [here](#) and the online survey can be completed [here](#).

The Wolfson Foundation grant £1M to ground-breaking new centre

The Pears Maudsley Centre for Children and Young People will bring together, under one roof, the world’s leading experts in clinical care and research from King’s College London’s Institute of Psychiatry, Psychology & Neuroscience (IoPPN) and the South London and Maudsley NHS Foundation Trust (SLaM).

It will be the home of world class research that will have long-term impact through education, policy change and public engagement. The building will be designed to facilitate clinicians and scientists to collaborate, share ideas and identify treatments that make a real difference to the lives of children, young people and their families.

The Wolfson Foundation’s generous grant will enable King’s to conduct research to



identify mental health difficulties early and transform the treatment and care of children and young people in the UK and across the globe.

The Wolfson Foundation is an independent charity that supports and promotes excellence in the fields of science and health, heritage, humanities and the arts. Education and research underpins all that it does. Since it was established in 1955, over £900 million (£1.9 billion in real terms) has been awarded to more than 11,000 projects throughout the UK, all on the basis of expert review. An interactive map showing all of the awards made can be viewed [here](#).

South East London Photography Group (SELPh) Online photography project

SELPh offers participatory photography groups in the community with the aim of giving people a platform to voice issues important to them. Our recent focus has been on mental health and wellbeing, delivering free groups for people in the community recovering from mental illness or currently suffering from depression or anxiety. The group aims to reduce social isolation, low self-esteem and mental health stigma, and to encourage expressions of feelings and experiences through photography. Our groups are based on photovoice; a participatory action research method in which individuals photograph their everyday experiences and have an opportunity to voice issues important to them, usually through a community exhibition of their work. SELPh is run by researchers in the Department of Psychological Medicine and is part of the Health Inequalities Research Network.

Due to the Covid-19 pandemic, we have had to postpone our planned SELPh projects for this summer. However, we have created an online project for people to use photography to explore, express and



reflect on how Covid-19 has impacted them. Participants are invited to send us 1-3 photos with short captions about their experiences in lockdown and beyond. Submissions are added to our public gallery on our [website](#) and also on our [Instagram](#). Experience with photography or fancy equipment is not required- this is simply a creative outlet to reflect on current experiences.

This project is open to everyone over 16 years of age and living in the UK. If you are interested in participating, or know someone who would be, we invite you to first read our project information leaflet which can be found on our [website](#).

If you have queries about our online project, or if any organisations or groups are interested in collaborating with us in future to run a SELPh project, please contact us at heron@kcl.ac.uk.

Hannah Harwood
Research Assistant (TIDES Study)

Welcome to our Division

Professor Nikolaos Koutsouleris has joined the Division of Academic Psychiatry as the Chair of Precision Psychiatry with the Psychosis Studies Department.



PROFESSOR NIKOS KOUTSOULERIS

Nikos is the Coordinator of the EU-FP7 funded project [PRONIA](#) (“Personalised Prognostic Tools for Early Psychosis Management”). He serves as Consultant and Head of the Centre for Adolescent Psychiatry and Transitional Youth Mental Health and the Section for Neurodiagnostic Applications in Psychiatry at the Department of Psychiatry, Ludwig-Maximilian-University, Munich (LMU).

Dr. Koutsouleris studied medicine at LMU between 1996 and 2003 as scholar of the German National Academic Foundation. His first medical & academic appointment in 2004 was at the Department of Psychiatry and Psychotherapy, where he finished his doctorate thesis in 2005.

Since 2008, Prof Koutsouleris has advanced the use of multivariate pattern recognition methods for the identification and validation of diagnostic and prognostic prediction models in at-risk and early stages of affective and non-affective psychoses. His work was awarded with several national and international prizes and led so far to over 80 peer-reviewed, highly cited papers.

In addition, he strived to make robust machine-learning methods available to researchers in the clinical neurosciences in order to improve the methodological rigour of this new research direction based on the proper use of validation and model sharing approaches. These efforts have led to the publication of the open-source NeuroMiner machine learning platform available at www.pronia.eu/neurominer.

IoPPN Summer School 2020

The 12th Summer School held on 9th July 2020 was the very first virtual IoPPN Summer School. Organised by Academic Psychiatry, the Summer School aims to inspire and inform delegates about a career in Psychiatry and despite our current pandemic, this remains critical for a future with better care for patients with mental illness. Usually we hold a highly rated, immersive week-long event for 30 delegates that is jam packed with opportunities to explore what a career in Psychiatry means. Instead we designed an innovative day-long online event. This online platform allowed us to open up this opportunity internationally with 136

registered delegates from 15 countries and all corners of the UK. We were pleased to increase accessibility as only 57.9% would have been able to attend the original week-long event.

Deciding what to put in a much shorter programme was a real challenge but the generosity of our 29 speakers and 18 facilitators meant that we had a diverse range of world-renowned academics, accomplished consultants and dedicated trainees. We kept sessions short, had discussions in small groups, enjoyed some healthy competition between the specialities and were privileged to

hear 2 patient perspectives. 81.3% of delegates rated the day as excellent and all delegates would recommend it. Of all the overwhelmingly positive feedback, comments about the ‘joy of meeting like-minded people’ and that it was a reminder of ‘why I wanted to do medicine... and learn from patients and inspiring clinicians’ really resonated with us and reassured us that even in a virtual world we can create meaningful connection with others.

Dr Sophie Butler
ST5 General Adult Psychiatry

Divisional Bites

- Dr Cathy Davies and Dominic Oliver from the Psychosis Studies Department were both awarded the Schizophrenia International Research Society (SIRS) Travel Award.
- Dr Emily Hird, a postdoctoral researcher with the Psychosis Studies Department was awarded the Early Career Research Award funded by the NIHR Maudsley BRC to collect pilot data for a fellowship application.
- Dr Gemma Modinos’ collaboration with [Izzy Parker](#), the artist in residence in her lab, was shown as an exhibition at the Bethlem Gallery in May ([link](#)). This is the link to the website: The ‘trial workshop’ photo links to the workshop that we held in February with the MSc Psychiatric Research students (<http://bethlemgallery.com/making-emotions/trial-workshop/>), and you can find some photos from the workshop in this [tweet](#) from [KCL’s Culture Team](#).
- In March Dr Gemma Modinos concluded her year as part of the [Academy of Medical Sciences](#) selected [SUSTAIN](#) programme for women in science. This is a year-long programme that addresses the mounting evidence base showing that not enough female researchers in science are securing senior leadership posts in the UK. This forms part of the Academy’s concerted effort to ensure women are appropriately supported along their career trajectory to enable them to secure those senior positions. (Announcement made last year at <https://acmedsci.ac.uk/more/news/sustain-participants-selected>).

*PhD Corner***Mohammed Karimipour***PhD Student*

After finishing my master's in Neuroscience at King's College London with merit, I embarked on a PhD in the Department of Psychological Medicine with Professor Trudie Chalder. The project evolved from my original research idea which was to develop a psychological intervention for fostering wisdom in adolescents. We will examine the preventive effect of this intervention on affective symptoms in youths.

I applied to the Haamee Scholarship; a non-governmental domestic scholarship for supporting postgraduate students in my beloved country, Iran. The process of selection for this funding is merit-based and consists of an earlier application phase followed by an interview panel. After the first round of reviewing the applications, I was selected for the interview. Through the interview, the panel was keen to learn how this PhD project could contribute to solving a real problem in human society especially in Iran. In response I clarified that emotional disorders (depression and anxiety disorders) are leading causes of mental illness with huge health care costs worldwide. I emphasised the importance of fostering wisdom in promoting mental health in youngsters through the family system and schools. Adolescents are developmentally flexible and it should be possible to facilitate the development of positive characteristics and resilience.

I am pleased that I have been awarded this prestigious scholarship (for the amount of 35000 US Dollars) which covers the expenses for the first year of my PhD. I wanted to complete this postgraduate research programme at King's College London as it is one of the leading schools of psychology and psychiatry in the world. My goal is to develop a wisdom-based preventive intervention for mood difficulties in adolescents. I would like to continue contributing to this area of research in my future career in order to benefit the mental health of youths all over the world and of course in my motherland country, Iran.

Diversity & Inclusion Updates

The death of George Floyd in Minneapolis shocked and saddened our community. Our sympathies are with his family and friends and all those who have been impacted.

We state our commitment in our Vision 2029 to creating 'an inclusive environment where all individuals are valued and able to succeed'. At King's we have an obligation to condemn racism and have zero tolerance to any form of racist or discriminatory behaviour. We must continue to fight ignorance and intolerance to strengthen our approach to equality, diversity and inclusion to further embrace the true power that diversity represents.

There is a lot of work to do to support BAME staff and students and educate white colleagues on the impact of structural racism. Here are some of the initial actions we are taking:

- [#BlackLivesMatter page](#) on the [Community Engagement Corner](#) that includes resources, support and education materials on racism and its impacts.
- The King's Chaplaincy (practiced listeners with a wealth of experience in supporting people through a myriad of issues regardless of an individual's faith, belief, religion or non-belief) are offering drop-in sessions specifically focused on current events.

- Zoe Kennedy is hosting weekly [D&I drop-in sessions](#) every Friday 10:30-11:30 for anyone to raise a concern, discuss implementing an idea or simply just to have a chat
- The IoPPN Race Equality Champions and Working Group developed and launched the [Race Discussions Toolkit](#) in late 2019 which provides useful support and information.

What can you do to promote race equality at the IoPPN?

Here are a few examples: informing colleagues about how systems of oppression affect marginalised groups, holding them accountable for their words and actions as well as the roles they play in those systems; calling out or stepping down from all white events and recruitment panels; actively engaging with BME Communities and Organisations around your research, not just collecting race information; reaching out and collaborating with BME researchers and academics; using privilege to speak up and raise concerns when your BME peers may not feel confident or able to do so; decolonise your curriculum and actively discuss race in your course and module content.

Follow and engage with us on Twitter [@IoPPN_Inclusion](#) & [@KCL_REN](#) and Instagram [race_equality_network](#) and consider joining the REN. (RaceEqualityNetwork@kcl.ac.uk).

