A recent study from the Psychosis Studies Department led by Dr Alexis Cullen provides the strongest evidence yet of a link between autoimmune disorders and psychotic disorders.

The meta-analysis, published in Biological Psychiatry, combined 31 scientific publications containing data from over 25 million individuals worldwide found that people with autoimmune disorders are around 40% more likely to develop psychotic disorders such as schizophrenia.

The idea for the meta-analysis emerged back in 2016 when Alexis, Dr Tom Pollak and Dr Graham Blackman discussed some potential dissertation project ideas for Alexis’ MSc student Scarlett Holmes. Alexis was very interested to hear about Tom and Graham’s work on autoimmune disorders and psychosis (particularly as she was devouring the second season of Hannibal where the lead character, Will Graham, was affected by NMDA receptor encephalitis, characterised by hallucinations and delusions).

A closer look at the literature indicated that the relationship between autoimmune disorders and psychosis had in fact first been noted in the 1950s, yet no meta-analysis had been conducted. Subsequently, a plan was established to bring in the big guns (Dr Valeria Mondelli, Professor Philip McGuire and Professor Sir Robin Murray) and conduct a meta-analysis to establish the magnitude and consistency of this relationship.

The meta-analysis, published in Biological Psychiatry, combined 31 scientific publications containing data from over 25 million individuals worldwide found that people with autoimmune disorders are around 40% more likely to develop psychotic disorders such as schizophrenia.

Following an exhaustive review of the literature (well done Scarlett), some tricky data extraction (cheers Dr Matthew Kempton), and a trip to San Diego to promote the findings (thanks ICOSR organisers), Alexis’ final analyses provided evidence of a positive, overall association between autoimmune disorders and psychosis (OR = 1.26; 95% CI: 1.12 – 1.41).
This association was consistent across study designs and psychiatric diagnosis (schizophrenia vs. broadly defined psychosis vs. non-schizophrenia psychosis); however, there was considerable heterogeneity across studies.

Interestingly, stratified analysis indicated that the pattern was not consistent across all autoimmune disorders, whilst significant positive associations were found for pernicious anaemia, pemphigoid, coeliac disease, and Graves’ disease; ankylosing spondylitis and rheumatoid arthritis were found to be protective for psychosis. These specific associations suggest that the relationship between autoimmune disorders and psychosis is not straightforward, in fact, distinct inflammatory pathways, genetic influences, autoantibodies targeting brain tissue, and exposure to corticosteroid treatment might all play a role.

By demonstrating a consistent link between autoimmune disorders and psychosis, the meta-analysis paves the way for future research to determine the underlying mechanisms. The risk of psychosis is only slightly increased for people with autoimmune disorders, the major implication of this study is that careful monitoring of people with certain autoimmune disorders for early signs of psychosis is warranted.

Dr Alexis Cullen
Sir Henry Wellcome Postdoctoral Fellow & Honorary Lecturer

Brilliant, creative people really are more vulnerable to mental illness, study finds

Highly creative people really are vulnerable to mental illness, with brilliant artists much more likely to develop schizophrenia than the average person, a new study finds.

The image of the tortured artist is firmly ingrained in our culture after a string of creative maestros suffered considerable mental anguish – most famously Vincent Van Gogh, who cut off his left ear. But the evidence for the link was mostly anecdotal. Now, a new study makes a convincing scientific case for the first time.

Artists more “at risk”
It finds that people who are relatively creative compared to the general population are more likely to develop mental health problems such as bipolar disorder and severe depression – and that people who are very creative face an even higher risk.

This, in turn, strongly suggests that people with extraordinary artistic creativity could be “many times” more likely to develop disorders such as schizophrenia than average, according to lead researcher Dr MacCabe. “We showed that the more you zoom in on people with creativity the greater the association with mental disorders and so I would expect that those people with the greatest levels of artistic creativity would have the highest risk”.

However, he cautions that this is only a theory since his study did not examine the link between super-artistic people and mental illness. Dr MacCabe suggests the link is either genetic or connecting to a person’s “thinking style”.

With creativity you often make creative or intuitive leaps between ideas. And this often happens in mental disorders as well – when you’re forming a delusion, for example by adding 2 and 2 and making 5 and coming up with some creative theory,” he said.

Professor Stephen Lawrie, of the University of Edinburgh, says this is the most comprehensive and plausible analysis he has seen of the thorny issue of creativity and mental health problems. “This is a very interesting study that takes a particularly rigorous approach to the issue. And it accords with my clinical experience. As someone who specialises in psychosis, I have long had the impression I see more ‘artists’ than other students or graduates.”

The study, published in The British Journal of Psychiatry, found that people studying a broadly-defined arts subject, including everything from visual art to media studies, were 20% more likely to develop mental health problems such as bipolar disorder and severe depression – and that people who are very creative face an even higher risk.

Some 0.46 per cent of the general population develops schizophrenia – rising to just over 1.0 per cent among visual arts students.

Marjorie Wallace, chief executive of the mental health charity SANE, said: “This is the first major study on such a large scale to reinforce the long-held belief that there is an important connection between artistic creativity and susceptibility to mental illnesses, in particular bipolar disorder.”

Read more at: https://inews.co.uk/news/health/scientists-breakthrough-mental-health-creativity/

Dr James MacCabe
Reader in the Epidemiology of Psychosis
Research Updates

Neuroimaging study identifies novel psychosis-related brain activity in adolescents

Researchers from the Psychosis Studies Department have carried out the largest neuroimaging study examining psychotic-like experiences in adolescents and identified previously undiscovered changes in brain activity occurring between the ages of 14 and 19 years.

Occasional psychotic-like experiences are relatively common in healthy adults and adolescents, but when these experiences become highly frequent this can indicate the beginning of a psychotic illness. Late adolescence is a critical time for the onset of psychotic illness, as this is when psychotic symptoms typically begin to manifest.

The authors, who published their findings in JAMA Psychiatry, suggest that the brain changes observed in 14 year olds, which can be related to the development of psychosis, occurs much earlier than previously thought in adolescents.

The study, which recruited 298 healthy adolescents, used a functional neuroimaging technique during a task involving reward processing. The researchers scanned the adolescents at the age of 14 and then later at the age of 19, to investigate long-term changes in brain activation.

Interestingly, adolescents with a higher frequency of psychotic-like experiences at age 14 showed reduced brain activation in three pre-frontal areas of the brain during the task. However, by the age of 19 these adolescents showed both increase in the activation of the pre-frontal regions and a decrease in the activation of a region in the dorsal striatum, during the same task, compared to adolescents without psychotic-like experiences. This is considered a compensatory cognitive control mechanism, where ‘higher’ pre-frontal cortical areas are recruited in order to contextualize abnormal experiences, generated by ‘lower’ sub-cortical areas.

Biomarkers accompanied by psychotic-like experiences, such as the ones discovered in this study, may prove useful for improving early diagnosis of psychotic illness. Currently there are no biomarkers for psychosis, but in the future there is hope to combine data from patient interviews, neuroimaging studies, and possibly genetic testing to increase the accuracy of predictive diagnoses.

Dr Evangelos Papanastasiou
Visiting Researcher

Dr Sukhi Shergill
Professor of Psychiatry and Systems Neuroscience

Brain volume drops in patients with PTSD

A new study found that the volume of various brain regions is reduced in people with Post-Traumatic Stress Disorder (PTSD). They suggest that having a small skull volume might be a risk factor for developing PTSD following a traumatic experience.

The study, published in the American Journal of Psychiatry, is the largest analysis of structural MRI scans in patients with PTSD, combining data from 89 previous neuroimaging studies. The researchers identified reductions in brain volume in a number of brain regions including the insula, anterior cingulate, hippocampus, total brain volume and intracranial volume.

Dr Kostantinos Bromis from the University of Sussex who carried out the research said: ‘Intracranial volume – the volume inside the skull – is fixed by early adolescence, and we observed reductions in intracranial volume in adults with PTSD. Therefore it could be that having a smaller skull is a risk factor for developing PTSD, and longitudinal studies will be able to clarify this.’

Around half of patients with PTSD have also experienced major depressive disorder. To determine if the brain changes were due to depression or PTSD the researchers compared the results to patients who only had depression. The researchers found that while hippocampal volume was reduced in both PTSD and depression, only total brain volume was reduced in PTSD.

Dr Matthew Kempton, the senior author of the study from the Institute of Psychiatry, Psychology & Neuroscience added: ‘It appears that hippocampal volume may be a general marker of mental health disorders as reductions have also been shown in patients with schizophrenia and bipolar disorder.’

The researchers included data from ‘region of interest’ studies which measure a predefined area of the brain and also ‘voxel based morphometry’ studies which survey the entire brain. They have made all the data available online as a tool for other researchers in this field.

Dr Matthew Kempton
Senior Lecturer and
BRC Precision Psychiatry Fellow
Schizophrenia is considered a disorder of the mind, influencing the way a person thinks, feels and behaves. But our latest research shows that organs, other than the brain, also change at the onset of the disease.

We have known for a long time that people with schizophrenia have much higher rates of physical illness compared with the general population, and this contributes to startlingly high rates of premature death. People with the disorder die 15 to 20 years earlier than the average person. This poor physical health has often been seen as a secondary effect of illness. Antipsychotic drugs, for example, are associated with an increased risk of weight gain and type 2 diabetes. Lifestyle factors have been thought to play a part, too. A person with debilitating mental symptoms is more likely to forgo exercise and have a poor diet.

However, in recent years, scientists have observed that people who have recently been diagnosed with schizophrenia and who aren’t on any medication yet show evidence of physiological changes, such as an overactive immune system. Could it be that schizophrenia is in fact a body-wide disorder?

We have examined evidence of physiological changes around the body at the onset of schizophrenia and compared it with evidence of changes within the brain in the same group of people. We pooled data from multiple studies, examining markers of inflammation, hormone levels and heart disease risk factors, including glucose and cholesterol levels. We also pooled data from studies examining brain structure, levels of different chemicals within the brain, and markers of brain activity.

We showed that compared with the general population, early schizophrenia is associated with changes in brain structure and function. We also showed that early schizophrenia is associated with various changes around the body. We calculated the magnitude of these changes using a statistical measure known as the effect size. At the onset of schizophrenia, we observed that there was no difference in the effect size for changes within the brain compared with the effect size for changes around the body, suggesting that schizophrenia might indeed be a whole-body disorder, and one that should be treated as such.

Three possible explanations
There are three theories that might explain how alterations within the brain might be associated with alterations around the body in schizophrenia.

First, dysfunction around the body may cause changes in the brain, ultimately leading to schizophrenia. This process has been seen in certain rare cancers that produce antibodies that target the brain and trigger psychosis. If the tumour is removed, the psychotic experiences improve.

Second, symptoms of schizophrenia may result in physical health disorders. An example of this is the stress of psychosis resulting in raised levels of the steroid hormone cortisol. High levels of cortisol are associated with weight gain, diabetes and raised blood pressure.

Third, symptoms of schizophrenia and physical health disorders may arise via different mechanisms but from a common risk factor. An example of this is how famine experienced by a pregnant mother increases the chances of her child developing both diabetes and schizophrenia in adult life. The increased risk of schizophrenia may be due to impaired development of the child’s brain as a result of the mother’s malnutrition. The increased risk of diabetes may be due to changes in the child’s ability to metabolise glucose, again a result of the mother’s malnutrition.

Work still to be done
We need to do more work to figure out whether changes around the body are a cause or a consequence of schizophrenia. One approach is to look at those people who are at risk of developing schizophrenia to see how changes around the body evolve in the ones who develop schizophrenia compared with those who don’t. More work is also needed to see how changes around the body respond to changes in the severity of symptoms of schizophrenia.

Finally, most premature deaths seen in schizophrenia are due to cardiovascular disease. Life expectancy in schizophrenia has failed to improve over recent decades. Studies are needed to determine if addressing physical health early on will reduce mortality in schizophrenia.

Original paper published in Molecular Psychiatry: https://doi.org/10.1038/s41380-018-0058-9

Dr Toby Pillinger
Clinical Research Worker
Dr Sagnik Bhattacharyya awarded £1.85M NIHR Grant [CANTOP-RCT]

The NIHR Efficacy and Mechanism Evaluation programme has awarded funding to conduct a large, UK-wide, multi-centre, randomised clinical trial to investigate whether treatment with Cannabidiol, can be useful in treating young people who are clinically at high-risk of developing psychosis to a team led by researchers from the IoPPN.

The £1.85 million grant, titled “CANnabidiol as a Treatment fOr Psychosis clinical high-risk state- a Randomised Clinical Trial (CANTOP-RCT)”, will also study brain chemistry and function using brain scanning to understand how Cannabidiol may work. Some estimates suggest that in England alone, over 15,000 people present with early symptoms of psychosis every year.

Dr Sagnik Bhattacharyya, who will lead the study says: “Young people presenting with early symptoms of psychosis have a very high risk of developing frank psychotic disorder. However, currently there are no safe, well-tolerated treatments that work for them. Therefore, there is an urgent need for such a treatment. This grant will allow us to determine whether Cannabidiol could fill that gap and provide a desperately needed treatment. It will also shed important light on potential mechanisms for a treatment that works in a way different from conventional antipsychotic drugs, which block dopamine receptors. There is a real need for new types of antipsychotic drugs.”

Dr Sagnik Bhattacharyya
Reader in Translational Neuroscience and Psychiatry
Consultant Psychiatrist, Early Intervention Pathway
Director, Maudsley Early Intervention in Dual Diagnosis Clinic

Dr Conrad Iyegbe secures a second Worldwide Partnership Fund award

The King’s Worldwide Partnership fund is designed to seed innovative and high quality collaborative research activities and partnerships with overseas institutions.

A first successful application in 2017 allowed me to organise a 2-day workshop on psychiatric genomics at the Federal Neuropsychiatric Hospital (FNPH) in Nigeria. I used the opportunity to advance plans for a pilot initiative centred around the recruitment of psychosis cases and controls for genetic studies in West Africa. Recently, I have received news that a second application to this fund also has been successful.

This time the funds will allow me to organise a policy meeting on the theme of: Opportunities and challenges for personalised medicine in West African Psychiatry. As far as I am aware this will be the first policy meeting of its kind in West Africa. Its goal will be to promote mutual understanding, new alliances and a communal vision of how precision medicine can strengthen mental health strategy in West Africa.

The event will take place in Ghana. It is being organised in conjunction with the Ghana Mental Health Authority, a government agency whose role is to develop mental health policies and initiatives in Ghana and also oversee their implementation.

We will also be targeting the participation of practitioners and policymakers from across the wider economic region, known as ECOWAS (The Economic Union of West African State).

I hope to develop a better understanding of existing challenges and priorities for governments, policymakers and practitioners in mental health and where possible, design bespoke research that can start to address them. I also hope to secure the involvement of these various parties into my own research initiative, (called ARCHETYPE: The Architecture of Psychosis in African Peoples)

If you would like to know more about the fund and how to apply, check out the following link: (https://internal.kcl.ac.uk/about/International/Funding-Opportunities/PartnershipDevelopmentFund/partnershipdevelopmentfund.aspx).

Dr Conrad Iyegbe
Postdoctoral Researcher
The Higher Education Academy (HEA) Recognition at King’s panel have approved Jenny’s submission for recognition as Senior Fellow.

In particular, the panel acknowledged her recognition for:

• excellence across all facets of teaching and supporting student learning
• a broad and scholarly evidence base for all activities and approaches
• commitment to mentoring and providing opportunities to early career staff
• authentic engagement with student voice and in student-staff partnership work
• reflection upon, and evaluation of, methods and approaches.

The panel invited Jenny to continue to innovate, learn from student and peer feedback, evaluate and enhance practice, and cascade best practice to faculty and institutional colleagues.

Jenny’s application drew on two case studies which are representative of her leadership - “The Faculty-wide Volunteer Electronic Helpdesk for Research Methods and Statistics”, and “The Mentoring Teaching and Learning Support Scheme for Early Career Staff”.

Jenny is delighted with her recognition as Senior Fellow of the Higher Education Academy and would like to thank the panel, as well as all colleagues and students who have been supporting her in her various roles over the years. As Jenny commented, “all innovations have critically relied on team work and on valuable collaborations with student and staff partners”.

“Dr Gemma Modinos was invited to speak at The Royal Society Platform “The Next Big Things” event at Hay Festival in May (Hay-on-Wye, Wales).

This sold-out event was a wonderful public engagement opportunity in which Gemma and Dr Rachel Lowe from UCL, who investigates planetary health, were invited as Royal Society Research Fellows to discuss our work with a very interactive lay audience.”

Photo credit: Sam Hardwick for Hay Festival
Staff Promotions
This year we celebrate the promotion of Dr Mechelli from Reader to Professor

Andrea’s promotion to Professor of Early Intervention in Mental Health reflects his contributions to both research and education. His research involves the integration of machine learning and neuroimaging, with the aim of developing and validating novel tools for early detection and treatment.

His work in this area is funded by an Innovator Award from the Wellcome Trust, which will lead to the development of a clinical tool for detecting brain changes using deep learning technology.

More recently he has also been pursuing a new line of research, involving the use of smartphone technologies to monitor people’s environments, behaviours and mental wellbeing in real time. As part of this line of research he has developed Urban Mind, a smartphone app that measures the impact of the surrounding environment on people’s feelings and behaviours.

His contribution to education includes developing and leading the MSc Early Intervention in Psychosis, as well as providing strategic support to all departmental teaching-related activities as part of his role as Deputy Head of Department.

Awards & Achievements

Student Forum Awards “Tina Fey for the Funniest Lecturer”

Derek Tracy, Consultant Psychiatrist & Clinical Director Oxleas NHS Foundation Trust and PhD student at the Psychosis Studies Department has been awarded the IoPPN “Tina Fey Award for Funniest Lecturer” by the Students’ Forum.

Derek said he was initially disappointed, thinking ‘funniest’ meant ‘weirdest’; he was pleased to learn it meant ‘most jokey’, though was also a little surprised as he hadn’t intended to make any jokes, and he suspects his students have completely misinterpreted and misunderstood his lectures. Derek added that winning the award was made that much more easy by “the very, very many sour faced, dour, comedically inept lecturers in our Institute, who seem to value ‘imbuing knowledge’ over the far more critical key skill of ‘cracking gags’”. He promised not to rest on his laurels, guaranteeing that next year’s class would have “18.4% more jokes, each of which would be 28.9% funnier” than the previous year’s.”

“Tina Fey for the Funniest Lecturer”

Teaching Excellence Awards 2018 “Quality Feedback”

Andrea Mechelli has been awarded the “Quality Feedback” at the Teaching Excellence Awards. The “Quality Feedback” award recognises an individual who consistently provides timely, helpful and constructive feedback that is integral to supporting student development and learning.

Psychosis Studies Prizes 2018

Paper of the Year
Cathy Davies
“Lack of evidence to favor specific preventive interventions in psychosis: a Network Meta-Analysis”

PhD of the Year
Dr Vishal Bhavsar
“Psychotic experiences and public mental health: an epidemiological study”

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Dr Graham Blackman has been awarded the “Adrian Prize” from The British Society for Clinical Neurophysiology (formerly the EEG Society). This is an annual prize of £1000 for the best presentation given by medical doctors in training (senior house officers, specialist registrars, academic posts and equivalent grades or positions outside the UK), clinical scientists in training, basic scientists undertaking undergraduate or postgraduate degrees, Clinical Physiologists (Neurophysiology) up to 5 years after qualification (equivalent to previous ECNE pt I).

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Arts in Mind Festival from 4-10 June 2018 connected King's local communities with the work of researchers at the Institute of Psychiatry, Psychology & Neuroscience (IoPPN). The festival featured over 30 exhibitions, performances, screenings and workshops.

Topics explored were as diverse as psychological wellbeing in pregnancy, to music and images as mood enhancers, showcasing work that explores new ways to improve wellbeing and facilitate a better understanding of mental health, the brain and the mind.

Highlights included Cerebral City, exploring the affinities between the structure of the brain and the landscape of the city and My Memory Forest, a story-reading and art session for children aged 6-8 years.

In Sound Mind, a unique concert and virtual reality experience, the audience were invited to lie down and immerse themselves in the music of Pärt, Cage & Riley while viewing psychedelia-inspired visuals through VR headsets, stimulating creativity and wellbeing through a very special audio-visual experience at St John the Divine Church in Camberwell. In a separate workshop led by pianist Christina McMaster, participants were invited to join a scratch orchestra workshop to explore and perform Terry Riley’s In C.

Other festival events included Urban Mind (Dr Andrea Mechelli), demonstrating how a smartphone app can be used to record and reflect on how our mental health is affected by the experience of city living and Kitchen Revolution, an intimate evening of dinner, debate and dissent curated by Belarus Free Theatre.
The student discussion around race is part of on-going work to address race inequality at IoPPN through creating an inclusive environment for staff and students of all races and ethnic identities.

The discussion was hosted by IoPPN’s Race Equality Co-Champions, Race Equality Network and Core D&I Team to explore student experiences of race at the IoPPN including identifying how things are now and what is needed to improve them.

The discussion aimed to:
• Facilitate an open discussion about students’ experience of race at the IoPPN
• Identify key barriers and issues to race equality at the IoPPN
• Identify potential solutions to positively impact students’ experience of race at the IoPPN
• Raise awareness about findings from the King’s repeated Equality Challenge Unit’s Race Equality Chartermark (RECM) Surveys (undertaken in 2014/15 and 2017)

During the discussion, four key themes emerged:

Impact of discrimination on mental health
• Students noted that there was not a single impact, but how the combination of multiple and continuous barriers and burdens negatively impacted their overall health, particularly their mental health.
• Main barriers expressed included having to work harder to justify their place at King’s more broadly, continuously being the person, reporting or addressing lecturers for prejudiced behaviours, discrimination, or antagonism related to race.

Representation and Visibility
• The lack of representation and visibility of all races and ethnicities at different levels was repeatedly raised by students throughout the discussion.
• The Inspiring Women – Professors at the Institute of Psychiatry was raised by several students and noted that although positive to highlight women, it highlighted the lack of racial diversity in IoPPN female Professors (there are only 2 Asian and no black women).
• Students noted that lecturers and other students lacked awareness of race and race inequality which meant BME students experienced a constant and exhausting burden to identify and then educate on race setting them apart from their peers. This meant BME students did not feel like they belonged or were part of the story that is presented at the IoPPN both inside and outside of the classroom.

Race Discussions
• Leading on from limited race and ethnic representations and visibility students expressed concerns around talking about race as a barrier to achieving race equality at the IoPPN.
• Students felt that there is a lack of wider and formal acknowledgement of race related barriers at the IoPPN and King’s.
• Students expressed that they do not feel confident discussing race-related issues for a range of reasons. Students felt it should not be their responsibility, as a BME individual, to initiate conversations around race. Rather everyone should be able to have and lead culturally sensitive discussions around race.
• Students felt they needed support from course leaders, lecturers, supervisors and personal tutors whilst highlighting that staff themselves need to be supported and trained to talk about race issues.
• Students expressed a desire for personal tutors to be more active in leading discussions about race and any race related issues or experiences students might have. Students did not feel comfortable in initiating these conversations.

Commitment to Change
• Students felt King’s lacked drive to achieve change with Senior Management not prepared to go beyond box ticking and performing very poorly in highlighting issues around race. This made students feel IOPPN/King’s only pays lip-service to addressing race inequality.
• Students were particularly concerned about bullying and harassment. Some students said they did not report on micro-aggressions and other race-related incidences because they did not know whether it would be taken seriously

All final copy of the report is currently being drawn up. The report will contain a number of recommendations to improve the discussion of race at the IoPPN including guidance for discussions within departments, toolkits to support staff in discussing race in lectures and raising with students and developing better connections between students and the Race Equality Network.

Dr Conrad Iyegbe
Postdoctoral Researcher

Dr Conrad Iyegbe
Postdoctoral Researcher

Athena SWAN
Silver Award

Race Equality Charter
Bronze Award

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**Research Grants**

**CANTOP-RCT:** CANnabidiol as a Treatment fOr Psychosis clinical high-risk state- a Randomised Clinical Trial (CANTOP-RCT).

Bhattacharyya, S., McGuire, P., Fusar-Poli, P., Carter, B., Brammer, M.
Funder: NIHR - National Institute for Health Research: £1,854,492.56

An investigation of the epidemiology of falls, fractures and outcomes among people with psychotic and affective disorders

Stubbs, B., Ashworth, M., Gaughran, F., Schofield, P., Stewart, R.
Funder: NIHR - National Institute for Health Research: £180,272.00

**Education and Employment focused Individual Placement and Support (IPS) within Early Detection for Psychosis services**

Tognin, S., Valmaggia, L., Spencer, T., Fusar-Poli, P. & McGuire, P.
Funder: Maudsley Charity: £49,653.00

**Strengthening the primary care system for adolescent indigenous health in Brazil: Integrating community health workers into the school setting.**

Harding, S., Dazzan, P., Wolfe, I., O’Keeffe, M.
Funder: MRC - Medical Research Council: £136,604.00

**Brain development and neurodevelopmental performance in children with congenital heart disease.**

Counsell, S., Batalle, D., Nosarti, C., Tournier, J., Victor, S., Rutherford, M.
Funder: Action Medical Research: £174,035.00

**Quantitative EEG correlates of visuo-spatial working memory in schizophrenia.**

Shergill, S.
Funder: British Council: £10,200.00

A phase II randomized, double-blind, placebo-controlled study to evaluate the efficacy, safety, and tolerability of orally administered BI 409306 during a 52-week treatment period for the prevention of first-episode of psychosis in subjects with attenuated psychosis syndrome

McGuire, P.
Funder: Boehringer Ingelheim Ltd: £110,560.00

**King’s Mental Health Data Pathfinder award.**

Funder: MRC - Medical Research Council: £1,497,000.00

Using deep learning technology to make individualised inferences in brain-based disorders.

Mechelli, A.
Funder: Wellcome Trust: £421,871.00

**A randomised, double-blind, placebo-controlled study of the safety, pharmacokinetics and exploratory pharmacodynamics of AUT00206 for 28 days as adjunctive therapy in patients with recently diagnosed schizophrenia**

Howes, O.
Funder: Autifony Therapeutics Ltd: £124,553.32

**Interventional, randomised, double-blind, active-controlled study on the efficacy of Lu AF35700 in patients with early-in-disease or late-in-disease treatment resistant schizophrenia**

MacCabe, J.
Funder: H Lundbeck A/S: £85,436.00

**A Multicentre, 8-week, Single-arm, Open-label, Pragmatic Trial to Explore Acceptance and Performance of Using a Digital Medicine System with Healthcare Professionals and Adult Subjects with Schizophrenia, Schizoaffective Disorder, or First Episode Psychosis on an Oral Atypical Antipsychotic (Aripiprazole, Olanzapine, Quetiapine, or Risperidone)**

Shergill, S.
Funder: Otsuka Pharmaceutical Factory Inc: £54,151.00

**Strengthening the primary care system for adolescent indigenous health in Brazil: Integrating community health workers into the school setting**

Harding, S., Dazzan, P., Wolfe, I. & O’Keeffe, M.
Funder: MRC - Medical Research Council: £136,604.00

**EYE-2: The Early Y outh Engagement in first episode psychosis (EYE-2) study: pragmatic cluster randomised controlled trial of implementation, effectiveness & cost effectiveness of a team-based motivational engagement intervention to improve engagement**

Peters, E., Garety, P., Taylor, M. & Healey, A.
Funder: NIHR - National Institute for Health Research: £1,721,362.00


Reis Marques, T., Ashok, A. H., Pillinger, T., Veronese, M., Turkheimer, F. E., Dazzan, P., ... Howes, O. D. (Accepted/In press). Neuroinflammation in schizophrenia: meta-analysis of in-vivo microglial imaging studies.


McCrone, P., Morris, T., & Gaughran, F. (Accepted/In press). Stepwise: structured lifestyle education for people with schizophrenia, schizoaffective disorder and first episode psychosis: randomised controlled trial.


MacCabe, J. H. (2018). It is time to start taking tobacco seriously as a risk factor for psychosis: self-medication cannot explain the association. DOI: 10.1111/acps.12923


Yiend, J., Barnicot, K., Williams, M., & Fox, E. (2018). The influence of positive and negative affect on emotional attention. DOI: 10.1016/j.jbtep.2018.06.008


PUBLICATIONS

Taylor, M. J. (Accepted/In press). Language bias and comprehensive meta-analysis of folate for unipolar depression.


Fusar-Poli, P. (Accepted/In press). Forecasting risk to prevent mental disorders.

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