People who suffer from psychiatric illnesses often struggle with substance use disorders as well. For example, those with bipolar disorder experience addiction at six times the rate of people in the general population, while those with depression and anxiety disorders suffer at twice the rate.

Now, thanks to a philanthropic foundation and two generous couples, McLean can offer patients with dual diagnoses an effective, evidence-based treatment that recognizes the inextricable link between psychiatric illness and substance use. McLean’s Co-occurring Disorders Institute, launched in January 2014, trains clinicians to better identify, assess and treat addiction in tandem with other illnesses—an approach that has yielded excellent outcomes.

“I have close family members who have had dual diagnoses,” said Cathy Stone, a trustee of the Arcadia Charitable Trust, which provided the initial challenge grant that launched the institute. “Psychiatric illness and addiction are interconnected, and I was impressed with McLean’s unique model of having one clinician treat both.”

Donors Craig and Liz Phillips feel that many people—laypersons and clinicians alike—don’t understand the complex interplay between co-occurring conditions, and they are pleased that their gift has begun to change that.

“This is an important problem that is under-recognized

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Dear Friends,

Addiction is one of our country’s greatest public health issues, affecting an estimated 28 million adults and young people each year. McLean’s Center of Excellence in Substance Use Disorders offers evidence-based treatments for those struggling with the abuse of alcohol, prescription medications or illegal drugs through a comprehensive array of programs. And as our understanding of addiction improves—thanks to integrated research, training and clinical efforts—that treatment gets better and better.

In this issue, you’ll hear from the center’s chief, Roger Weiss, MD, and also learn about our new Co-occurring Disorders Institute, which is training clinicians throughout McLean to treat their patients’ addictions and psychiatric illnesses in a truly integrated way.

Finally, we share highlights of the second annual meeting of the McLean Board of Visitors—a group of friends, supporters and advocates who convened this spring to learn about McLean’s work and meet others with an interest in mental health.

Enjoy this issue!

Catharine Cook
Senior Vice President and Chief Development Officer

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**Board of Visitors Convenes 2nd Annual Meeting**

More than 70 members of the Board of Visitors gathered at McLean on May 7, 2015, for the group’s second annual event. The Board of Visitors, which has grown to include approximately 170 members from 14 states, Canada and the Dominican Republic, was established to help McLean forge deeper connections with individuals who have an interest in mental health and McLean. Members are asked to learn about McLean’s programs and services and current issues in psychiatry so they can better understand, communicate and advocate for mental health in their communities.

“The connections we have made with McLean continue to shape our lives every day,” said Tom Shehan. “Serving as ambassadors to McLean is a source of pride for both [my wife] Laura and me, and attending this event is something we look forward to each year.”

Convening the event this year was Dr. Swanee Hunt, former

Continued on page 3
U.S. Ambassador to Austria. Dr. Hunt is president of Hunt Alternatives, whose focus is on bolstering women’s leadership in conflict regions, combating the demand for modern-day slavery in the United States, advocating political parity for U.S. women in highest-level elected positions, supporting leaders of domestic social movements, and disseminating strategies to strengthen youth arts organizations as a vehicle out of poverty.

While she touched on past civic and political roles, Dr. Hunt focused her remarks on mental health. She acknowledged that experience with mental health is what brought many of those in the room together, and she was no exception.

“Mental health has been core in my work and in my life,” she said, going on to share some of the ways mental illness has been woven into the layers of her life: from her step-brother’s paranoid schizophrenia diagnosis to her developing a halfway house to help those with mental illness avoid hospitalization to her role in the reform of mental health care in Colorado and finally—and perhaps the most personal—to a close family member’s diagnosis of bipolar disorder.

Also highlighted in the program was a presentation by Kevin Hill, MD, MHS, director of the Substance Abuse Consultation Service in the Division of Alcohol and Drug Abuse. Dr. Hill spoke about the gap between science and public perception of marijuana, which is the focus of his work and his recent book, *Marijuana: The Unbiased Truth About The World’s Most Popular Weed*.

Scientific evidence strongly indicates that smoking marijuana daily or nearly every day can create lifelong health problems, yet there is an increasingly relaxed public view that marijuana is more or less harmless. As a result, public policy is ahead of the science in some areas. According to Dr. Hill, the issue is complex and needs to be addressed in a careful, thoughtful way.

Following Dr. Hill’s talk, McLean President and Psychiatrist in Chief Scott L. Rauch, MD, and Chief Medical Officer Joseph Gold, MD, shared updates on McLean’s recent achievements as well as new programs and services.

The event concluded with roundtable discussions facilitated by McLean clinicians and researchers on a number of topics.

“We are impressed by the strength of interest among the Board of Visitors and welcome the opportunity to host them at McLean in a learning environment,” said Rauch. “Their involvement not only makes McLean stronger, but does so much to advance our shared interest in improving mental health for all.”
The abuse of alcohol, prescription medications and illegal drugs is one of the most serious health problems in the United States. Substance use disorders have devastating effects on families and communities and their cost to society is immeasurable.

McLean’s Center of Excellence in Substance Use Disorders fosters integrated, evidence-based approaches to prevention, early detection and treatment. It offers a continuum of care, including brief hospitalization for detoxification and stabilization, four residential programs, a partial hospital program, outpatient treatment, a consultation service, and the Co-occurring Disorders Institute (see “Philanthropy Drives Better Outcomes” on page 1). The center also has a strong research and training focus.

Horizons recently checked in with the center’s Chief, Dr. Roger Weiss, for updates.

Horizons: What have been the center’s greatest accomplishments in the last few years?

Dr. Weiss: On the clinical side, we have been responsive to patient needs by developing new programs to fill gaps in care. The LEADER (Law Enforcement, Active Duty, Emergency Responder) program and Borden Cottage are two recent examples.

We developed the LEADER program following a request by the Boston police department for treatment focused on the specific needs of their personnel following the Boston Marathon bombing. During the first 20 months of the program, McLean provided nearly 200 inpatient admissions and many dozens of residential stays, day-treatment and outpatient services to men and women in uniform.

Similarly, Borden Cottage, our new residential program in a gorgeous facility on the Maine coast and our first program outside of Massachusetts, responds to an unmet demand for residential care in a private setting for people struggling with substance use disorder and another psychiatric illness.

We have also expanded our opioid dependence services in response to the growing number of patients—many of them young people—struggling with addiction to prescription opioids and heroin.

Horizons: What sets McLean apart from other organizations that treat addictions?

Dr. Weiss: This integrated approach—treating substance abuse and mental illness in tandem and by the same team of clinicians—is extremely effective and standard practice in all of our center’s treatment programs. Our recently launched Co-occurring Disorders Institute is now training McLean staff from other clinical specialties in this approach.

We also have a very strong research component to our work with dozens of investigators conducting basic, translational and preclinical research as well as clinical trials on a broad array of issues in the field.

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Finally, we offer dedicated training for psychiatrists and other clinicians who wish to specialize in addictions.

“...This integrated approach—treating substance abuse and mental illness in tandem and by the same team of clinicians—is extremely effective and standard practice in all of our center’s treatment programs.”

Roger Weiss, MD

**Horizons:** Are there other notable trends in addiction that are evident in the work the center is doing?

**Dr. Weiss:** The most common addiction we see at McLean has always been alcohol and that hasn’t changed. The number of patients we treat who are dependent on marijuana has risen, which is not surprising given that medical marijuana is now legal in many states, and efforts to legalize recreational marijuana are gaining traction across the country. Two people in our center, Kevin Hill, MD, MHS, and Staci Gruber, PhD, are doing fascinating marijuana research. Dr. Hill’s work focuses on medications and behavioral interventions to improve available treatments for people wanting to stop using marijuana. Dr. Gruber studies the effects of marijuana on cognitive function.

**Horizons:** What role has philanthropy played in the center?

**Dr. Weiss:** Philanthropy has played a huge role in all three arms of our center—clinical, research and training. Generous donors have launched new clinical initiatives, such as McLean Fernside, our residential program in Princeton, MA. Donor gifts also have supported the research endeavors of our scientists in the early stages of their careers—providing that critical bridge to eventual federal funding. For example, this year we launched the Sarles Young Investigator Award, which will provide two years of support for research on women and addiction. It is also thanks to our donors that we are able to train our staff in the latest, evidence-based treatments and support families through group programs. Finally, our new Co-occurring Disorders Institute, a dream of ours for years, became a reality because of the generosity of several donors.

**Horizons:** What important goals are on the horizon as you lead the center forward?

**Dr. Weiss:** One major goal is to help promising young investigators in their search for answers to the many questions we have about the causes and best treatments for substance use disorders. I would love to expand the Co-occurring Disorders Institute to help develop research into the complexities of the intersection between substance use disorders and other psychiatric illnesses. Whether we are talking about clinical work, research or training, our primary objective is to find increasingly effective prevention and treatment strategies so that we can improve the lives of our patients and their families.
and can lead to significant pain and frustration for patients and family members,” said Craig. “Our hope is that these clinician trainings will lead to improved treatment at McLean and beyond.”

In most programs across the country, patients seeking treatment for post-traumatic stress disorder and alcoholism, for example, would have separate clinicians treating each illness. But because the two illnesses play off each other in such complex ways, it is critical that they be treated simultaneously, according to the institute’s John Rodolico, PhD, a master trainer in dual diagnosis treatment.

“If someone’s marijuana addiction isn’t being treated, they may fail to take their medication,” explained Rodolico. “And even if they are taking their anxiety medication, but they’re smoking marijuana five times a day, the medication is not going to work as well and they are not learning to cope with the anxiety.”

By having one clinician treat both illnesses at the same time, care is ultimately more effective. “The reality is that when you have two busy clinicians treating a patient, the communication isn’t always ideal. Or, if you have sequential efforts to treat the two issues, symptoms from one disorder can impede progress in the other,” said Rodolico.

Addiction experts at McLean have long recognized the importance of integrating behavioral health and addiction treatment, but until recently, didn’t have the resources to train staff in this approach. Roger Weiss, MD, chief of the Center of Excellence in Substance Use Disorders, has conducted several studies that show improved outcomes for people whose co-occurring disorders are treated concurrently, including one focusing on patients with bipolar disorder who were treated using a technique Dr. Weiss developed called integrated group therapy.

Dr. Rodolico is taking this technique and other interventions, such as motivational interviewing, to the front lines at McLean (see sidebar: Tools of the Trade).

His efforts have so far focused on a few programs, including the Klarman Eating Disorders Center, 3East (an intensive residence for adolescents with self-endangering behaviors), Appleton (a diagnostic, treatment and rehabilitative residence for adults with psychotic disorders) and the Obsessive Compulsive Disorders Institute (a residence for adults with severe OCD). He hopes eventually to reach every unit of the hospital.

“An eating disorder can be a highly relapsing, potentially chronic or fatal illness and, in combination with substance abuse, recovery can seem unattainable,” said Patricia Tarbox, LICSW, program director of the Klarman Center. “Every one of our clinicians has now trained with Dr. Rodolico and many have already incorporated these powerful techniques into their work with patients.”

Donors Bob and Mary Lentz believe this initiative makes sense and is indicative of McLean’s strength as a treatment, research and teaching hospital. “Our gift to the
Philanthropy Drives Better Outcomes
Continued from page 6

Co-occurring Disorders Institute was motivated by our overall confidence in McLean,” said Mary. “We’re strong supporters of McLean because it has been a lifesaver for so many patients and families.”

Family of Robert G. Stone, Jr., Arcadia Charitable Trust (l. to r.): Muffie Fitzgerald, Cathy Stone, Gregg Stone, Tissa Stone, Lucy Moore, Jennifer Stone and Tim Stone

Tools of the Trade
Key Techniques for Treating Co-occurring Disorders

Integrated group therapy addresses the patient’s psychiatric illness and addiction together, including exploring how one issue affects the other. For example, participants in a typical addictions group would discuss recent substance use, cravings and their attendance at AA or a self-help group. In the integrated format, they may also discuss mood, medication and essential relapse-prevention skills that apply to both illnesses.

Motivational interviewing (MI) is a way of tapping into a person’s motivation to change. The basic skills of this technique are known by the acronym OARS: open questions, affirmation, reflective listening and summarizing. While the therapist plays an important role in MI, it is rooted in the belief that patients know themselves better than anyone else, and are therefore best positioned to effect change in their lives.

If you would like to hear about opportunities to support the Co-occurring Disorders Institute, please contact Jennifer London at 617-855-4597 or jrlondon@partners.org.

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115 Mill Street
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617.855.3415
mcleandevelopment@partners.org

Senior Vice President and Chief Development Officer:
Catharine Cook
Director of Development:
Lori Etringer
Editor: Lori Etringer
Copy: Vicki Ritterband
Design: Lynne Foy
Photography: Patrick O’Connor

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Unrestricted support is vital to McLean’s ability to offer every patient and family compassionate care backed by research and delivered by experts.

“If you think about the wide range of areas where McLean is a leader from researching Alzheimer’s and dementia to treating teens with depression and eating disorders, you realize what an asset McLean is. Our giving is unrestricted so that Dr. Rauch can direct resources where the science takes them and where they can have the biggest impact,” said David Blakelock.

We are pleased to recognize the Blakelocks and others whose annual gifts of $1,000 or more support the full breadth of McLean’s mission. Won’t you join the Mary Belknap Society today? Learn more at www.mcleanhospital.org/give/leadership-annual-giving.

Share Your Story

Would you consider sharing your personal story with the McLean community? Doing so will promote hope for others who are affected by mental illness and help reduce stigma. There are many ways to participate, and we’d love to hear from you. Contact Kristin Kilbourne, associate director of development, at 617-855-3644 or kkilbourne@partners.org.