New Fellowship Helps Launch Research Careers of Young Investigators

Julianne Wilner Tirpak, PhD, an early career psychologist, understands that dialectical behavioral therapy (DBT) is the gold-standard treatment for young people who struggle to manage their emotions, particularly those who exhibit self-harm or suicidal behaviors. As the inaugural recipient of a unique postdoctoral fellowship at McLean’s 3East program, Dr. Tirpak is developing a research study that she hopes will explore why these treatments work and through what mechanisms.

Tirpak plans to study how DBT affects interpersonal conflict and will focus on novel ways of assessing social functioning. She wonders if it is possible to capture what is often missed through self-reporting by making use of wearables to look at heart rate and stress levels during social interactions. Additionally, she wants to examine digital trace data — effectively looking at what, where and when teens are posting on social media and which words or posts have either negative or positive emotional attributes.

“Young people are spending an average of three to five hours every day scrolling through content on their phones,” said Tirpak. “I’m interested in whether it’s possible to leverage social media as a tool to increase awareness about evidence-based treatments like DBT; connect these young people to mental health services; and perhaps deliver mini-interventions.”

During a year-long 3East post-doctoral research fellowship funded by Guy and Sally Davidson, Tirpak will spend 80 percent of her time on research and 20 percent delivering care and being mentored by the program’s seasoned investigators and clinicians. She hopes her study eventually will receive government funding, the dream of every young researcher.

Patients come from all over the world seeking 3East’s expertise in DBT, which teaches skills that help patients cope with stress, regulate emotions, and improve interpersonal relationships.

The Donors Behind the Fellowship

The fellowship owes its existence to the Davidsons, who have provided philanthropic support to 3East in various forms over the past several years, including patient scholarships.

“3East saved our loved one’s life,” said Sally, who also serves on the hospital’s Patient and Family Advisory Council and the Women’s Mental Health Leadership Council. “McLean’s work centers around evidence-based care, so we were very interested in supporting research that furthers these treatments. And when McLean leads the way with evidence-based treatments, other programs around the country and world follow. Patients everywhere benefit.”

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Donors Sally and Guy Davidson
Dear Friends

I hope you are finding time for self-care and joy during this holiday season.

Our fall/winter edition of Horizons features stories of hope and progress, apt themes for these times. Our cover story spotlights the importance of developing clinician-researchers through a unique new fellowship that blends both worlds. We also share how McLean’s efforts to deploy technology as a vehicle for progress is playing out to better serve patients. And how, with generous philanthropic support, technology has become a welcome and effective tool for treating older patients who struggle with memory issues or dementia.

Our third feature highlights how McLean changed the life of one patient and gave her hope … and how she expresses her gratitude through philanthropy. We also share news that McLean is launching a new fundraising platform to help our supporters create their own philanthropic initiatives. And, we hear from a donor who is planning to use the platform to raise funds in gratitude for the care her loved one received at McLean.

Lastly, sometimes we get a wonderful surprise in the form of philanthropy — this time a major bequest to brain research that will engender both hope and progress for generations to come.

Enjoy and have a safe and healthy holiday season,

Lori Etringer, Senior Vice President and Chief Development Officer

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New Platform Simplifies Peer-to-Peer Fundraising

Michelle’s teenage son had struggled with depression for years before he came to McLean’s 3East residential program. At the core of 3East’s continuum is dialectical behavioral therapy, a gold-standard, evidence-based treatment that teaches people to regulate emotions, tolerate distress, build interpersonal skills, manage attention, and develop self-awareness.

“He came back from McLean and re-started his life with a new set of skills,” she recalled. “He would drive himself and his sister to school every morning with a smile on his face and, for the first time, he thought college might be a possibility. Now, he’s a college sophomore and is in a place he never thought he’d get to — busy with friends and looking ahead.”

Michelle was impressed with 3East’s focus on building skills for her son and also for members of the family. "The family sessions and parent education were invaluable — and all built on a foundation of great science, great clinical care, and great doctors,” she said. “The entire staff are passionate and skilled.”

So, when she decided to run a half-marathon in November 2020, she knew she wanted to fundraise for McLean. “My son’s experience getting healthy helped our whole family, and we saw the power of good mental health care,” she explained. “We also wanted to say ‘thank you’ to McLean and pay it forward.”

Michelle said that while McLean was helpful with the logistics of directing her donors’ gifts to the hospital and reporting back who had donated, the process was a bit unwieldy. Still, she was pleased with the results: she raised $5,000 for McLean and she and her husband matched the gifts, bringing the total to $10,000.

But peer-to-peer fundraising for McLean is about to become a whole lot easier and more streamlined. The hospital is implementing a platform called DonorDrive, which makes it much simpler for people to create an online presence for their “DIY” fundraisers and engage their own circles in supporting McLean directly.

“I think it will be comforting to my donors to know that their money is getting to the right place and that the hospital knows it’s for my fundraiser,” said Michelle. “It also makes it easier for me to track how much has come in and from whom so I can thank people personally for their donations.”

Michelle hopes to run another half-marathon to benefit McLean and looks forward to using the new platform.

For information on creating your own fundraising event or activity for McLean, contact Ben Ogilvy at bogilvy@partners.org or 617-855-3623.

“‘We also wanted to say ‘thank you’ to McLean and pay it forward.’”

Michelle
New Fellowship Helps Launch Research Careers

Blaise Aguirre, MD, director of 3East, has known the Davidsons for a few years. “Sally and Guy have been so generous with McLean,” he said. “This research fellowship is a natural progression for their philanthropy. They understand how important it is to support innovative research, expand what is known about DBT, and improve patient outcomes. We are so grateful to them.”

3East Post-Doctoral Research Fellowship

The fellowship is unusual because it allows early career psychologists time and flexibility to pursue research while gaining clinical skills and launching academic careers, ensuring their research will be clinically meaningful, according to Daniel Dickstein, MD, FAAP, director of research and associate chief of the Simches Division of Child and Adolescent Psychiatry and Tirpak’s research advisor.

Tirpak leads weekly therapy groups and sits in on parent skills groups. She is also tasked with synthesizing and expanding on 3East’s outcomes research, with the goal of better promoting the program’s efficacy.

Dr. Dickstein said that in addition to launching their own research careers, Tirpak and subsequent fellows will be a huge boon to 3East and the hospital as a whole. “The fellows will help us understand the underlying mechanisms at work so we can tailor our treatments to make them more effective,” he said. “And as a cohort, these fellows will contribute to our larger goal of growing research in our child and adolescent division.”

Tirpak said the fellowship is a dream come true: “I've wanted to work at 3East forever — working with adolescents, learning DBT, and being mentored by a dream team across the 3East continuum. I am so thankful to the Davidsons for making this fellowship possible.”

“The idea of supporting research and the implementation of its findings is a natural fit with both of our backgrounds — Sally’s in academia and mine in finance.”

Guy Davidson
“We had been baby-stepping our way toward telemedicine. Then suddenly everyone had to do it, from the most to the least savvy patients and providers,” said Chief Medical Information Officer Alisa Busch, MD, MS. “It’s been an amazing journey.”

One of the silver linings of the forced pivot to tech-enabled care has been the ability to extend access in new and more flexible ways. “For populations like older adults, where no-shows tend to be higher because of obstacles, virtual care has eliminated these barriers,” said Ipsit Vahia, MD, associate chief of McLean’s Division of Geriatric Psychiatry and director of Digital Psychiatry Translation. “In our program, we’ve been seeing 30 percent more patients than before the pandemic. Our no-show and last-minute cancellation rates have dropped to almost zero.”

Hospital-wide, telemedicine has helped on the staff side of the equation, too. Clinicians can conduct after-hours admissions or consultations via video when their specific expertise is needed.

In addition to making McLean’s services more accessible, there have been other technology windfalls, according to Busch. Seeing patients in their home environments provides important insights during therapy. Patients with obsessive compulsive disorder can do their “homework” — for example, engaging in an activity that triggers their symptoms to gradually lessen the impact — with their therapist watching and providing guidance. Therapy with family members in different locations becomes a cinch with Zoom. And early concerns about telemedicine never came to pass: staff worried unnecessarily that certain patients would have trouble navigating the technology.

Technology Support Eases the Transition to Virtual

Some patients in the Geriatrics Division, however, did need extra support, which was revealed in a survey done early in the pandemic. Two research assistants (RAs) from Dr. Vahia’s program were reassigned as “virtual care support specialists.” “Research was on pause at that time, so our RAs were available to make this shift,” explained Vahia. “We created protocols for them to reach out to patients, set up meetings to teach them about Zoom, and offer practice sessions so patients were proficient by the time of their appointments.”

Across the hospital, programs tailored technical assistance to their patient and staff needs, and most designated a point person as the technology lead. The hospital distributed best practices for handling things like admitting latecomers in an online group environment or privately messaging patients who appeared to be in distress. Clinicians were encouraged to reflect with patients on the impact of telehealth on their treatment. “We want to make sure we’re meeting patients’ needs — asking them what’s working and not working,” said Busch.

And what’s the future of telemedicine at McLean once the pandemic is in the rearview mirror? “I think virtual care is with us long-term,” said Chief Information Officer Kara Backman. “It adds a lot of value to the clinical care tool kit, but it’s not for everyone. Individual programs are thinking deeply about when and with whom to use it.”
Using Virtual Reality with Older Patients

Ipsit Vahia, MD, is bullish on the potential of virtual reality (VR) as a therapeutic tool in treatment.

Vahia, who is associate chief of McLean’s Division of Geriatric Psychiatry and director of Digital Psychiatry Translation, is using VR in mindfulness groups for anxiety and depression. For example, instead of a therapist narrating a walk in a forest, patients might wear VR headsets to immerse themselves in the experience.

Similarly, virtual reality tools can be helpful in reminiscence therapy for patients with dementia — taking them to a favorite location, such as a park where they had picnicked with family — to lessen anxiety and depression, stimulate memory, and increase resilience and feelings of joy.

“We’ve found that targeted use of VR can enhance the impact of well-established therapies like psycho-dynamic therapy by making these interventions more experiential and immersive,” said Vahia.

Vahia recently worked with an older patient who was having difficulty tapping into childhood memories. Using VR, she visited her childhood home, her elementary school, and her dad’s business. “Recreating the sense of being there unlocked emotions and memories that she wasn’t able to access before,” said Vahia.

Vahia’s work has been of particular interest to Eric Warren Goldman, Chairman and CEO of the Extended Family Office Group, and a supporter of technology research at McLean. Goldman recognizes that telemedicine has been an enormous boon for elderly patients who cannot travel easily or safely to appointments.

“I see the value of the gold-standard and world-class preventative and treatment options at McLean — for my family as well as for the Extended Family Office Group,” he said. “I have been impressed by Dr. Vahia’s use of cutting-edge technology for geriatric patients. He has been prescient in implementing technology to support in-person care and to help families manage the best in-home care, for as long as possible. I have seen firsthand the superlative care that McLean provides. My mother has had the tremendous benefit of years of great care by Dr. Vahia and his team.”

“Eric’s support has been transformative,” said Vahia. “He has been involved and invested in ensuring the highest quality in-home care for his mother and has a keen understanding of the value of using technology to enhance care for others like her.”

Even early adopters like Vahia understand the limitations of high-tech tools. “We are realizing that technology is at its most effective when combined with high quality in-person care,” he said.

Check out McLean’s annual Technology in Psychiatry Summit at https://home.mcleanhospital.org/tips.
The writings remind her of what she learned during her stay at McLean, where Callori, 63, received treatment for borderline personality disorder (BPD) through the Gunderson BPD programs. BPD is a condition characterized by an unstable self-image and a pervasive pattern of impulsive behavior, volatile emotions, and tumultuous relationships. The disorder is frequently misdiagnosed.

Callori is well-aware how difficult it is to receive a correct BPD diagnosis. For 17 years, she struggled with depression and anxiety. At one point, she was told she had bipolar disorder. A severe case of Lyme disease added to her distress. She cycled in and out of programs and hospitals, took many medications over the years, and even had several courses of electroconvulsive therapy. While she had periods of relief, they didn’t last long. “I finally hit the wall and decided I would do one more thing before I decided life wasn’t worth living,” she said.

**A Correct Diagnosis and Top-Notch Treatment at Last**

In the course of her research, Callori learned about The Pavilion at McLean, a residential program offering comprehensive psychiatric evaluation and treatment. It was there she received the BPD diagnosis and it fit, she said. “I had the symptoms: depression, anxiety, feelings of abandonment, difficulty socializing, and lots of personality conflicts with people.” After her two-week stay at The Pavilion, it was recommended that she seek treatment at the Gunderson Residence, an all-female program specializing in BPD and other personality disorders. She agreed.

The program changed her life. And to show her gratitude, for the past six years, she has donated a sizable portion of every paycheck to McLean. But more on that later.

Callori admitted that her five-month stay at Gunderson Residence was challenging. She was older than most patients by decades and she was concerned about being able to learn the many skills required to successfully complete the program.

The schedule was demanding: therapy groups; classes teaching coping skills informed by treatments like dialectical behavioral therapy; deep and difficult work with her therapist into her childhood trauma; homework; and daily relationship-building with patients who struggled like she did. “You have eight or nine women living together who all have borderline personality disorder. That was challenging and intense,” she said.
A few months into her stay, Callori was required to get part-time work — she got a job at a supermarket deli counter — to further build her relational skills.

For the first time, said Callori, her treatment was not focused on medication, but instead on therapy, building resilience, and acquiring the tools to create healthy relationships with herself and others — and for that, she is eternally grateful. She remained at McLean for another year as an outpatient, sharing an apartment near the hospital with two other women from the Gunderson program and continuing to work at the deli counter.

**Gratitude for a Second Lease on Life**

When it was time to leave McLean, Callori knew holding down a job would be key to staying well, so she got a job at a Walmart near her home in Rhode Island. Employment is a key part of a BPD treatment called General Psychiatric Management developed by the late McLean psychiatrist John Gunderson, MD, a pioneer in the field of borderline personality disorder. The deceptively simple idea is that holding down a job helps people leave behind their identity as psychiatric patients and focus on living productive and satisfying lives.

Callori knows that staying healthy is a life-long endeavor: she attends weekly online group therapy as well as twice-weekly individual sessions with Gunderson program director and therapist Karen Jacob, PhD, who has been key to her recovery; journals daily; and practices her hard-won skills at her job. Her paycheck gets divided among her three young grandchildren and McLean, which gives her tremendous satisfaction.

“God has blessed me and my family with many things, so the least I can do is give away my earnings. It may not be a heck of a lot of money, but it’s something. McLean and all the people who worked with me saved my life.”

Susan Callori
A Surprise Gift Supports McLean’s Brain Bank

Sabina Berretta, MD, director of the Harvard Brain Tissue Resource Center — a centralized resource for the collection of human brain specimens for research — was surprised and overwhelmed to hear that an unknown donor had left a significant bequest in her will to the Center, commonly known as the McLean Brain Bank. The bequest, totaling more than $850,000, was an unexpected gift from the Denis Tat Barnes Trust.

Denis (Denny) Tat Barnes passed away in June 2020, leaving her estate in the hands of her trustee with specific instructions to distribute a portion to benefit the Brain Bank. After learning about the hospital’s vision for this generous gift, Ms. Tat Barnes’ trustee was pleased to direct the donation so that just over half of the gift will be used to establish an endowment for the Center and the remainder will support its near-term needs.

“This kind of bequest is transformational for McLean, and the estate’s flexibility shows trust in the hospital’s leadership,” said Berretta. “This endowment for the Brain Bank will ensure sustained support for researchers both at McLean and around the world who are working to uncover biological causes of brain disorders.” Added Berretta: “I wish we knew Ms. Tat Barnes during her life, but her legacy will last forever.”

To learn more about how you might create a legacy at McLean through a planned gift, contact Keith Raho at 617-855-3421 or kraho@partners.org. Learn more about the Harvard Brain Tissue Resource Center at https://mcleanhospital.org/research/brain-bank.