Since we launched Connections in December, we have used this monthly newsletter to shine a light on many of the vital mental health and addictions services programs that are actively supported by the Department of Psychiatry, Alberta Health Services (AHS) and their community partners throughout the Edmonton region.

In previous issues we’ve featured such programs, initiatives and advocacy organizations as ACCESS Open Minds; Parents Empowering Parents; the Alberta Alliance on Mental Illness & Mental Health; CASA, Child, Adolescent and Family Mental Health; and Dr. Lara Ostolosky’s Eating Disorders Program, the largest of its kind in Western Canada.

Connections also reported on the Department of Psychiatry’s ground-breaking Gender Health Program. Launched in February in partnership with Alberta Health and AHS, under the direction of Program Lead Dr. Michael Marshall, The Gender Program is the first of its kind in Canada’s prairie provinces.

We also highlighted the recent Innovations in Practice Conference, which focused on the unique mental health challenges faced by those with Developmental Disabilities including Intellectual Disabilities and Autism Spectrum Disorder. It was the first conference of its kind ever held in Alberta and attracted more than 300 attendees.

In addition, Connections has carried stories on some of the promising, wide-ranging research currently being conducted by our graduate students, and the prominent roles that several of our Faculty members are playing in elevating the Department’s public profile as a leading digital mental health, neuroscience and genetics research hub.

Clearly the Department of Psychiatry and AHS play increasingly influential and far-reaching clinical, research, academic and mental health advocacy roles throughout the Edmonton Zone and beyond.

But there is another important element of our activities that Connections has not yet explored in detail, and that’s why it’s a key focus of this month’s newsletter. The Department and AHS are also key players in human clinical trials to determine the safety and efficacy of promising new drug compounds.

Indeed, as featured on page six of this month’s newsletter, University of Alberta Hospital (UAH) is one of 50 international research centres and one of only five in Canada that have been selected to participate in an important Phase II clinical trial of a promising new drug compound.
Her story begins in Moldova, a tiny nation of 3.5 million people sandwiched between Romania and Ukraine on the north shore of the Black Sea.

The former Soviet republic declared independence in August 1991, when Natalia Stavila – now a Masters student in the Department of Psychiatry’s Graduate Program – was just two years old.

She has little personal memory of those events, of course, or the breakup of the Union of Soviet Socialist Republics (USSR) a few months later. But she does remember making a firm career choice early in life.

“I was very young when I first said I wanted to be a doctor, maybe 12 years old,” she recalls.

“My family kept saying ‘Oh you’ll change your mind.’ But I didn’t. When I had to choose between science or arts classes after grade nine, I chose science. In Moldova you go straight from high school to medical school. There is no prerequisite Bachelor’s program.”

Stavila subsequently spent six years studying for her degree at Moldova’s only medical school, the State University of Medicine and Pharmacy, in the capital city of Chisinau. She graduated in June 2014.

So why did she decide to make the 8,000-kilometre trek west to the University of Alberta, a few months later? The answer stems from a chance meeting she had at a medical conference in Italy when she was still in medical school.

That’s where Stavila met Dr. Michael Dorey, an Assistant Clinical Professor in the Department of Ophthalmology in the Faculty of Medicine and Dentistry at the University of Alberta. The two hit it off. After seeing each other a few times and introducing their families on both continents they made the leap and decided to marry.

In October 2014 Stavila joined her new husband in Edmonton, where she started a whole new chapter in her life. Was it a tough adjustment? In some ways yes, she says. In other ways, no.

“Moldova isn’t that different from Edmonton. It doesn’t get as cold but we do get snow in winter and it can get to -25 Celsius. Adjusting to the weather wasn’t a big problem,” she says.

“My first year here was difficult because I missed my family in Europe, and I had to study for exams in a completely different language. Although I was fluent in conversational English at the time, I graduated from medical school in Romanian. There is a lot of specialized terminology in medicine, so my first year here was challenging.”

Nonetheless, Stavila was determined to complete all the medical qualifying exams required in Canada – including the eight-hour LMCC (Licentiate of the Medical Council of Canada) exam, which she wrote just three days before delivering her daughter, Sofia, in 2015.

“I’m really glad I did it then, because after having a newborn baby, to prepare for that exam immediately afterwards would have been more difficult,” she says.
In the Spotlight: Graduate Student Natalia Stavila

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A few months later, Stavila accepted a job as a research assistant, working under the supervision of Dr. Andrew Cave in the Department of Family Medicine. She continues to work on projects for him today, while pursuing her Masters degree in the Graduate Program, and ultimately, she hopes, a place in the Department of Psychiatry’s Residency Program.

“I completed all of my (Canadian medical) examinations last fall and I’ve completed several Medical Observerships as well, with both family doctors and psychiatrists like Dr. Lenka Zedkova and Dr. Richard Gurke, a Clinical Professor here in the Department of Psychiatry. I’m so grateful to all those people. They helped reassure me that psychiatry is what I want to do,” she says.

In 2017, at the annual Research Day event, Stavila chatted with Dr. Andrew Greenshaw, the Department of Psychiatry’s Associate Chair – Research. She had previously reached out to him in hopes of identifying a research project she could work on, but unfortunately there were none. This time, however, she struck gold.

“He asked if I’d be interested in doing some research for the Eating Disorders Program, and I said yes, I’d love to. He connected me with Dr. Lara Ostolosky, who oversees the program. She is now one of my supervisors, along with Dr. Esther Fujiwara,” the Graduate Program’s Director.

The Eating Disorders Program, housed in University of Alberta Hospital, operates 12 to 14 hours a day, seven days a week. Roughly 60 patients attend each day, as day patients or inpatients. The vast majority are young females in their teens and 20s.

Demand for the program is huge. Referrals flow in on a nonstop basis. Since eating disorders like Anorexia Nervosa and Bulimia Nervosa are often lifelong conditions, individuals might attend the program multiple times. Relapses are common, and some patients return for “tune ups” several times.

“Dr. Ostolosky is incredible. She contributes so much to the Department. I don’t know how she finds balance in her life,” says Stavila.

“The first time she wanted to see me it was on a Saturday morning at 7 a.m. She wants to help so many people, and that was the only free time she had to meet with me.”

Stavila, who just delivered her second child, is currently on maternity leave until September. Once she returns, she expects to dive right into her new research project for the Eating Disorders Program.

“The focus of my research will be on maternal health in the eating disorders patient group. It’s going to be a qualitative study, and we are just in the process of doing our ethics application now. Hopefully by September we’ll have ethics board approval for it and we can get started.”

Since her research isn’t yet approved, Stavila is hesitant to get into too much detail yet. But she says it will focus on the breastfeeding patterns of mothers with eating disorders.

“Based on doctors’ practical experience, it appears that some patients may prolong breastfeeding, but the reasons for this behaviour are unclear. We reviewed the literature and found nothing directly related to this question. We are now looking forward to getting approval for our study, getting started, and meeting the patients to get a better sense of what is going on.”

If approved, the methodology for Stavila’s research will revolve around a series of 90-minute to 120-minute patient interviews and subsequent analysis.

“The World Health Organization has established guidelines for breastfeeding. They recommend six months of exclusive breastfeeding, and then after six months they recommend diversifying the food sources, while continuing to breastfeed until at least age two,” she explains.

The WHO’s guidelines also call for the frequency of intraday breastfeeding to decline gradually over time, she notes, although the precise timing and speed will depend on how and when other food is introduced. The WHO benchmarks will be used as a guide to assess the breastfeeding patterns of the eating disorders study group.

“If you go online and look on these eating disorders forums, you’ll find that some mothers will pump and dump the milk to lose weight. They can easily calculate how many calories they will burn to produce so many millilitres of pumped breast milk. The information is very accessible.”

Aside from the research study, Stavila hopes to enter the Department of Psychiatry’s Residency Program next year, while simultaneously continuing to work on her Master’s degree on a part-time basis until completion.

“I feel very fortunate and grateful. I don’t know if somebody up there loves me or what,” she says, with a big smile. “Edmonton has treated me very well. I’ve had such great luck to meet so many amazing and wonderful people, like Dr. Ostolosky, Dr. Cave and Dr. Greenshaw, and I have a very supportive husband who is proud of everything I do.”

As for her ultimate goal, she says, it is to complete the Residency Program and become a practicing psychiatrist over the next six years. “I don’t know yet if I will have a sub-specialty. Psychiatry is a very large, diverse program with many sub-specializations,” she says. “You never know where it might lead.” C
The rugged nickel mining town of Sudbury, Ont., where Dr. Allen Chan grew up, seems a world away from the hushed hallways of the Neurochemical Research Unit (NRU) in the University of Alberta’s Department of Psychiatry.

The long, twisted academic journey that Chan, the Department’s newest Assistant Professor, undertook to get to Edmonton was equally unlikely, featuring multi-year stopovers at Hamilton’s McMaster University, the University of Toronto and the University of British Columbia.

Nonetheless, the seeds of his lifelong quest to better understand how the human brain works – including his current research using in vivo, optical functional neuroimaging in laboratory mice to study how synaptic dysregulation features in brain pathology – were planted when he was just a young boy.

As Chan describes it, that’s when his normally friendly and caring grandfather developed Alzheimer’s, transforming him into a scary, volatile stranger almost overnight. “He had an early diagnosis of Alzheimer’s and the manifestation of his dementia was really terrifying to me. I didn’t understand it then and I still don’t in some ways,” Chan admits.

“That greatly impacted me, not just because it was terrifying, but also because I needed to understand why he was not the same person he was before. So that led me to a basic question: How does our biology inform how we are as normal people, and how is it altered in pathology? In essence, that’s what led me to study biology and psychology as an undergraduate at McMaster.”

Chan found his courses interesting and illuminating, especially in terms of providing descriptions of complex human behaviors and social dynamics. Still, it wasn’t enough to satisfy his need for more basic physiological explanations of his grandfather’s decline.

“There was no mechanistic information (about brain function) that I found satisfying, so I kind of had a reactionary response and went to the other extreme,” he explains. “I became very reductionist in my approach and felt that if we were to understand the brain we’d have to go back to first principles of biology and understand that before we could understand complex social and psychological phenomenon.”

Chan pursued a PhD at the University of Toronto, working under the supervision of acclaimed neuroscientist Dr. Elise Stanley, a Professor in the U of T’s Department of Physiology, a Canada Research Chair in Molecular Brain Science at the Krembil Research Institute (formerly the Toronto Western Research Institute), and the Tanenbaum Joint Chair in Neuroscience at Toronto General Hospital.

“Synaptic transmission is the fundamental unit of information transfer in the brain so that’s what I wanted to study, and my PhD research focused on very basic, fundamental questions. I was looking at ion channel biophysics at the synapse,” he explains.

“In retrospect it was a naïve way to think, as if this was going to help me to understand these more complex questions. But that was guiding my thinking then, so I spent my PhD in Dr. Stanley’s lab looking at these questions using a technique called patch clamp electrophysiology, in which you use glass electrodes to measure the electrical currents at the cell or the synapse level.”

Chan describes Stanley as one of the most talented scientists he has ever met, and praises her rigorous, “old school” approach to lab research. Still, by the time he completed his PhD in 2008, he says he realized once again that he’d have to adopt a different approach if he was going to find the answers he was seeking.

At the time, Chan’s thinking was coloured by an influential paper published two or three years earlier in the scientific journal Nature Neuroscience by Dr. Karl Deisseroth, now the D.H. Chen Professor of Bioengineering, Psychiatry and Behavioural Sciences at Stanford University.

“It was the first use of optogenetics in a neuroscience context, whereby scientists used light to change the electrical activity of a neuron. I was doing purely conventional electrophysiology, so when I saw this study it blew my mind,” he says. “It had a big influence on me and on the whole field. I don’t think it’s an over-statement to say that it revolutionized basic neuroscientific research.”

Continued...
Dr. Allen Chan’s Lifelong Scientific Quest

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Chan also realized his “reductionist” approach was too simplis-
tic. To better understand complex manifestations of behavior, he de-
cided he needed to study intact systems in vivo. That’s what led him
to Dr. Yu Tian Wang, whose work had won acclaim at the University
of Toronto before he moved to the University of British Columbia,
where he remains a Professor in the Department of Medicine.

Wang, a specialist in synaptic physiology and synaptic plasticity,
oversees a large lab with dozens of scientists. His work is focused
on understanding the molecular mechanisms that underlie learning
and memory, and how the dysfunction of these mechanisms relates
to brain disorders such as epilepsy and stroke.

“I was very intrigued by Dr. Wang’s work, and when I was looking for a Post Doctoral Fel-
ellowship to continue my training I approached him. He knew I was interested in neuropho-
tonic approaches, and because he was co-di-
rector of a new in vivo imaging and electro-
physiology group along with Dr. Tim Murphy,
an internationally recognized expert, he pro-
posed that they become my co-supervisors,”
Chan explains.

“I thought that was the best of both worlds. So my wife – who was pursuing a career in
speech language pathology and had already
been accepted into the program at UBC – and
I moved to Vancouver in 2009.”

At UBC, Chan was involved in a Brain
Canada multi-investigator research initiative
led by Dr. Ann Marie Craig, a Professor of
Psychiatry and the Canada Research Chair
position focused on neurodevelopmental pre-clinical
research.” he says.

“So this position is perfectly aligned with my own research in-
erests. I had never met Ian until I came here but I was aware of his
work. Ian does multiphoton microscopy, and it’s very beautiful stuff.
He employs imaging approaches to assess activity on a more micro-
scopic level, while I’m more interested in a systems level. They
are beautifully complementary.”

Ultimately, Chan hopes his research will help to identify novel
neuroimaging biomarkers in the brain of disease progression and
altered neuronal circuit function linked to ab-
normal behavior. If successful, such discover-
ies could both inform and aid in the testing of
potential therapeutic interventions in human
clinical trials.

“One thing I’d like to impart is that the level
of assessment or the spatial scale I’m looking
at is referred to as mesoscale. It basically
means an intermediary spatial scale. In the
past basic neuroscientific research was fo-
cused on the microscale, looking at the synap-
tic structure or even the subcellular structure
of how the brain works,” he explains.

“Thanks to tech innovations from the
1990s like PET (Positron Emission Tomogra-
phy) imaging or FMRI (Functional Magnetic
Resonance Imaging) people can now do
whole brain imaging, or macroscale. Meso-
scale lies in between, so it’s the ability to
look at large swaths of cortex to be able to assess
region specific activity – both local and remote
types of activation. Researchers are finding this very helpful in
assessing certain types of behavior or decision making.”

By harnessing the power of these research tools, Chan hopes
to identify neuroimaging biomarkers in the brain that may signal al-
tered neuronal circuit functions that may trigger abnormal behavior.

“One issue with neuropsychiatric disease is, because there is
usually no clearly defined physiological basis or mechanism for dys-
function, diagnosis is typically done by observation of perturbed beh-
aviours, or cognitive performance. So the idea that you can get an
objective neuroimaging biomarker, a signature of this disorder, its
progression or its manifestation, is very appealing,” he says.

After a brief pause, he sits back and smiles broadly. “You know,
I’ve been doing these types of experiments for many years now. To
this day when I’m acquiring data or analyzing data I have moments
where I just stop and think to myself, ‘Wow, this stuff is real science
fictiony,” he says.

And then he laughs. C
First Clinical Trial for Attenuated Positive Psychotic Symptoms (APSS) Poised for May Launch at University of Alberta Hospital

University of Alberta Hospital is one of 50 international research centres worldwide and one of only five in Canada that have been selected to participate in a Phase II clinical trial of a promising new compound being developed as a potential treatment for Attenuated Positive Psychotic Symptoms (APSS).

The condition, which manifests as very mild symptoms of psychosis among affected adolescents and young adults, is regarded as a prodrome – or a potential advance indicator – of schizophrenia. Currently, there are no approved treatments for those who exhibit early symptoms of psychosis.

Global pharmaceutical giant Boehringer Ingelheim is developing the drug, known simply as BI 409306. Local participant screening and recruitment for the trial is slated to begin in mid-May.

“As clinicians we have no medications now for treating APSS and we are quite hesitant to use anti-psychotics on teenagers and young adults because these are very potent drugs,” says Dr. Pierre Chue, Clinical Department Head for Addiction and Mental Health, Edmonton Zone, with Alberta Health Services.

“If this drug (BI 409306) is successful, it could be a game-changer in the same way that Prozac was a game-changer for depression. You would have the potential of a safe and effective medication that could potentially transform peoples’ lives by preventing transition into psychosis.”

Chue, a Clinical Professor in the University of Alberta’s Department of Psychiatry, is the trial’s Principal Investigator at UAH. Dr. Adam Abba-Aji, local Medical Director for the national young adult mental health program, ACCESS Open Minds, and a fellow Faculty member of Chue’s in the Department of Psychiatry, is the Sub Investigator.

The University of Calgary’s Department of Psychiatry is also participating at a second trial site in Calgary.

Scott Jamieson, Director of Clinical Operations, Clinical Research Unit Edmonton (CRUE), and Karen Martins, CRUE’s Clinical Operations Project Lead and Clinical Coordinator for the trial, are providing related trial support services.

CRUE – a joint effort between the University of Alberta’s Quality Management in Clinical Research Department (QMCR) and the Northern Alberta Clinical Trials & Research Centre (NACTRC) – coordinates patient recruitment, regulatory affairs, clinical trial monitoring, data safety monitoring and budgeting on an as-needed, a la carte basis.

“This clinical trial is unique in many respects. It’s the first study that the Clinical Trials & Research Program is about to embark on at the University of Alberta, and it will also be looking at a target population that has not had any opportunity for treatments before, and with a novel compound,” says Chue.

“We’re focusing on individuals who exhibit very early symptoms of psychosis, but they’re not severe enough to make a diagnosis, and not necessarily clearly indicative of schizophrenia at that point. These are things like increased social difficulty, falling academic performance, disrupted sleep and problems with thinking, or other subtle signs that something is amiss. Typically this occurs over a one to two-year period before any full-blown psychotic symptoms emerge.”

Developing an effective medication for early intervention and treatment of the target population is a key goal of clinicians. At least fifty per cent of those who exhibit symptoms of an early psychosis will develop schizophrenia.

“Up until now this group has gone under-recognized and under-treated, and as a consequence we often only see individuals once they’ve dropped out of high school or university or wind up living on the street. They may only be in their 20s but by then the illness has already been present and untreated for four or five years,” Chue explains.

“If we can intervene within the first two years of the illness or earlier, we can have a very positive impact on both the individuals affected and society as a whole. These individuals could probably finish school, go to university, get a job and have a family, as opposed to suffering a very negative and potentially deteriorating course.”

The focus on early intervention and treatment is consistent with various public policy initiatives that have also targeted children and adolescents, including Valuing Mental Health, a 2015 report by the province’s Alberta Mental Health Review Committee; Valuing Mental Health – Next Steps, a follow-up report released in mid-2017; and Alberta Health Services’ Patient First Strategy.

Although Boehringer Ingelheim’s compound is aimed at treating APSS, it is not a conventional anti-psychotic drug, says Chue. Instead, BI 409306 blocks the action of a specific enzyme, phosphodiesterase-9, thereby improving cognition and potentially...
Where Creativity and Medicine Meet
Pamela Brett-MacLean’s Passion for the Arts Led to the Birth of the U of A’s Arts & Humanities in Health & Medicine Program

The long intellectual and creative journey that took Pamela Brett-MacLean from Ontario to Western Canada can be traced back to the mid-1990s.

At that time Brett-MacLean – now an Associate Professor in the Department of Psychiatry and Director of the Arts & Humanities in Health & Medicine (AHHM) Program in the Faculty of Medicine & Dentistry – found that she was increasingly drawn to crossing disciplinary boundaries.

“My background is in Psychology. I completed my Master’s degree in Community Psychology at the University of Guelph, and then worked for a time in the Department of Social and Evaluation Research at the Addiction Research Foundation in London, Ontario (now part of the Centre for Addiction and Mental Health),” she explains.

“When I started working as a research associate in the Faculty of Medicine at the University of Western Ontario, I began to seriously explore opportunities for pursuing interdisciplinary doctoral studies. However, an opportunity came up to work as a researcher in the Faculty of Medicine at the University of British Columbia, so off I went,” she says. “After all, Vancouver has its charms!”

It was after her two-year contract at UBC expired that Brett MacLean had her big ‘aha’ moment. While pondering her career options, she discovered that UBC offered exactly what she was looking for: an Interdisciplinary Studies Graduate Program, the oldest program of its kind in Canada.

“It had been searching for just such a program and it was right there at UBC. My passions have always been around the arts, which are such a huge contributor to culture, communities, growing and learning, and there is also a health-promoting aspect to it. I often found that much of what I wanted to be involved in was relegated to the bottom of my ‘in basket,’ so to speak, so I decided to complete my PhD in Interdisciplinary Studies with a focus on arts and health,” she says.

While still working on her dissertation, Brett-MacLean moved to Edmonton with her husband, who had accepted a position in Alberta’s capital city with Health Canada. She was also drawn by Edmonton’s vibrant arts community and concluded that the prairie city offered her the greatest opportunity to build her own career.

“Chue and his colleagues are currently gearing up to launch the patient recruitment process for the trial, which becomes active at the UAH site on May 16th. They are considering using social media to reach out to students at the University of Alberta who might be interested in participating. They may also contact counsellors at Edmonton-area schools so they can inform students ready have the illness and wouldn’t be appropriate candidates for this study.”

Those who are simultaneously dealing with substance abuse issues would also be ruled out as viable candidates. As a result, although the goal is to recruit just five patients at the UAH trial site, Chue and Martins agree that many times that number of potential candidates will have to be screened upfront before five suitable participants are identified.

Once they are recruited, patients who receive the drug will be treated for a one-year period. Results from the Phase II trial are not expected to be released until at least 2021.

Another key component of the trial is that it is a joint effort involving both the U of C in Calgary and the U of A, says Chue.

“This is one of the first examples of a reciprocal ethics arrangement for both locations. Previously, you’d have to get separate approvals at the U of C and the U of A, with additional costs and time. Now it’s a very simplified approval. This is an example of increased cooperation and collaboration between the two universities as well as the support from NACTRC and CRUE, which has really streamlined the whole clinical trial process for us.”

Scott Jamieson
Karen Martins

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Where Creativity and Medicine Meet

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“I remember scanning cities across Canada for arts and health initiatives and discovered that there was a lot going on in Edmonton,” she says.

In addition to a strong arts culture, among the many local arts and health related programs Brett-MacLean discovered were the Nina Haggerty Centre for the Arts, a collective of artists with developmental disabilities; iHuman, an arts-based organization directed to young people struggling with mental health and substance issues; and the McMullen Gallery and Artists on the Wards program at University of Alberta Hospital.

While working as a researcher in the Department of Family Medicine at the University of Alberta, Brett-MacLean finished her PhD, which focused on people who had discovered the liberating, life-affirming value of the arts later in life, including a woman named Mary Topping. At 92, Topping continued to paint and sculpt and exhibit her work both on her own and as part of a collective of women artists she met when she enrolled in a visual arts degree program at the University of Alberta at 80 years of age.

“I met Mary by chance at the McMullen Gallery at University of Alberta Hospital. She was the guest instructor for the drop-in art session at the gallery that week and a number of her works were on exhibit. Rather than thinking about the latter part of life in terms of deficit and deterioration, Mary, similar to other artists I met who came to art in later life, exemplified the many ways that art offers a means for being fully alive through the things we love and the passions we follow.”

Brett-MacLean’s passion for the arts, how the arts intersect with health and medicine, and the role creative expression can play in nurturing well-rounded health professionals who exude empathy, caring and compassion, came to the attention of Thomas Marrie, then Dean of the University of Alberta’s Faculty of Medicine & Dentistry.

“There was just one other medical humanities program in Canada at the time, at Dalhousie University, and as it happened, Dean Marrie came to the U of A from Dalhousie. He appreciated how much the medical humanities program seemed to matter to people there. So I spent three weeks organizing a program proposal for him,” says Brett-MacLean.

The move paid off. In 2006, Brett-MacLean and Dr. Verna Yiu – who was appointed President and CEO of Alberta Health Services (AHS) a decade later – were named Co-Directors of the newly created program.

“Verna had already introduced a number of humanism initiatives in the Faculty. We enjoyed a wonderful collaborative relationship during the early years of the program, and even after she moved on to other positions, she remained a great supporter of the AHHM program,” says Brett-MacLean. “She is currently supporting a storytelling initiative throughout AHS, so she has carried that on. I was very lucky to have the opportunity to work with her.”

Brett-MacLean’s multiple roles as Director of the AHHM program encompass both pan-Faculty efforts, and contributions across the continuum of learning.

She contributes to undergraduate programs in the Faculty in various ways. “In year one during orientation week we participate in a Scavenger Hunt event. It brings students across all health professions undergraduate programs directly into the AHHM program office and has helped students to understand what the program offers,” she says.

In the MD program, she has also supported the introduction of an interpretive art project, which offers students the opportunity to reflect on significant insights they gained regarding the experience of chronic illness after visiting with their patient mentors over a two-year period.

“We invite students to use different media to capture something significant that they’ve learned through a more metaphorical, symbolic language that is new to many of our students,” she explains.

“For the last four years we have organized an exhibit of the projects our students have completed, along with their artists’ statements, during a Patient Appreciation Event. The event gives us an opportunity to help ‘make visible’ and celebrate the contributions our patient mentor volunteers and their family members make to our students’ understanding of the ‘art of medicine.’ Many of the students’ interpretive projects are displayed in the John W. Scott Health Sciences Library through the month of April each year.”

Brett-MacLean has also created several arts and humanities electives that medical students and others can experience, including an arts-based research elective, Directed Studies in Medical/Health Humanities; Communicating Care: A Theatre-Based Approach; Shadowing Artists on the Wards; The Art of Observation; and The Healer’s Art elective.

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Increasingly, clerkship students from other medical schools are applying to complete two or three week directed studies and art-based electives with the AHHM program as visiting students. Cristina Balaita, who recently was accepted as a psychiatry resident at the University of Toronto, describes her elective experience with the AHHM program as highly enriching.

“The space to reflect and create was an extremely valuable one for me, as there are few opportunities to do this in medical school. I realized through the elective that the process of creating can be a powerful one in making connections between areas of learning and in bringing one closer to an exploration of meaning … which is immeasurably important to mental health and continued motivation in one’s work,” she says.

In addition to undergraduate teaching, Brett-MacLean is Co-Director of the Fostering Humanism and Professionalism Teaching Scholars (TSP 007) course with Dr. Carol Hodgson, which is offered to residents and Faculty members.

Under her direction, the program organizes ‘signature’ offerings, such as the AHHM Speaker Series and Science in the Cinema, which the AHHM program helps to organize in partnership with the Office of Research. Each season one of the featured films usually focuses on mental health issues.

The program also attempts to organize at least one high-profile event each year. The long list of artists, writers and performers who have participated in past events include Christine Borland, Vincent Lam, Brian Lobel and David Diamond, as well as medical/health humanities scholars and educators such as Rita Charon, Arthur Frank, Alan Bleakley, Alan Peterkin, Jonathon Bolton, Arno Kumagai and William T. Branch Jr.

Another ongoing contribution to the Faculty involves an initiative that resulted from a Teaching & Learning Enhancement Fund grant that Brett-MacLean and Dr. Verna Yiu were awarded. That ultimately led Dr. Douglas Miller, former Dean of the Faculty of Medicine & Dentistry, to suggest in 2014 that David Diamond, Artistic Director of Theatre for Living, visit regularly each spring and fall and work with various programs within the Faculty.

This initiative was subsequently supported by Dr. Richard Fedorak, current Dean of the Faculty of Medicine & Dentistry, and continues on today. Through interactive theatre-based workshops, Diamond has helped numerous groups to explore difficult issues such as moral distress, relational ethics, mechanization of healthcare, communication and effective team functioning, and struggling to overcome barriers to well-being – all with a view to enhancing community and promoting healthy learning environments within the Faculty. They are currently booking workshops through 2019.

At the recent Creating Space meeting organized in advance of the 2018 Canadian Conference on Medical Education in Halifax, Brett-MacLean presented on a workshop that Diamond facilitated. This helped to support team-building in relation to the collaborative research initiative involving people impacted by head and neck cancer, health researchers and artists.

The See Me, Hear Me, Heal Me project led by Dr. Minn Yoon in the School of Dentistry has led to the FLUX exhibit which is opening on May 18th at the International Museum of Surgical Science in Chicago. Brad Necyk, one of the participating artists, is a doctoral student in the Department of Psychiatry who is co-supervised by Drs. Brett-MacLean and Andy Greenshaw, Associate Chair – Research.

Brett-MacLean presents and publishes widely on her work. She is heading to Palma de Mallorca, Spain, in July where she will present a paper on digital learning approaches to health humanities at EDULEARN 2018, an international conference on education and new learning technologies.

In addition to her teaching and research roles, Brett-MacLean continues to support the growth of the health humanities across Canada. She recently helped to found the new Canadian Association for Health Humanities and is currently serving as an advisor to the newly elected CAHH executive committee.

Looking ahead, what does Brett-MacLean foresee as her program continues to build its public profile, on campus and beyond?

“I want to ensure that the AHHM program continues to grow and expand in response to the interests and needs of those across the Faculty, so I am planning to introduce an AHHM program affiliate membership initiative this year,” she says.

“I also hope to support expansion of the health humanities by introducing a Mental Health Humanities initiative in the Department of Psychiatry. And, of course, I’ll also continue to publish and present on the leading edge health humanities innovations we are introducing in the Faculty here at the University of Alberta.”