

2012

Black Dog Institute Annual Report

*Translating Research
into Real Patient
Outcomes*



BLACK DOG INSTITUTE

TURNING VISION INTO REALITY

The Black Dog Institute is poised to expand our life-saving activities and have a positive impact on the mental health of all Australians.

With the support of government, business and the community, the Black Dog Institute will:

- DIAGNOSE** mood disorders accurately and early
- TREAT** mood disorders using innovative, effective and accessible strategies
- PREVENT** the onset of mood disorders through understanding of the risk factors and delivering prevention programs
- REDUCE** the impact of mood disorders and save lives

We invite you to join us on our journey

Black Dog Institute© 2012

ABN 12 115 954 197

Black Dog Institute is a company limited by guarantee

postal address

Hospital Road, Prince of Wales Hospital, Randwick NSW 2031

telephone

61 02 9382 4530

facsimile

61 02 9382 8208

email

blackdog@blackdog.org.au

website

www.blackdoginstitute.org.au

cover

Mathew Johnstone

design

shelena436@gmail.com

studio

p3.unsw.edu.au

print

Kate.Holt@aus.fujixerox.com

Paper Stock: Tudor RP is FSC Recycled Certified and Australian made. Tudor RP is also Certified Carbon Neutral by the Department of Climate Change & Energy Efficiency's National Carbon Offset Standard (NCOS), an Australian Government Initiative. It contains 100% recycled fibre and no chlorine bleaching occurs in the recycling process. Australian Paper is ISO 14001 certified. Sales of Tudor RP support Landcare Australia.

2012 | Black Dog Institute Annual Report

*Translating Research
into Real Patient
Outcomes*



BLACK DOG INSTITUTE

Black Dog Institute Annual Report

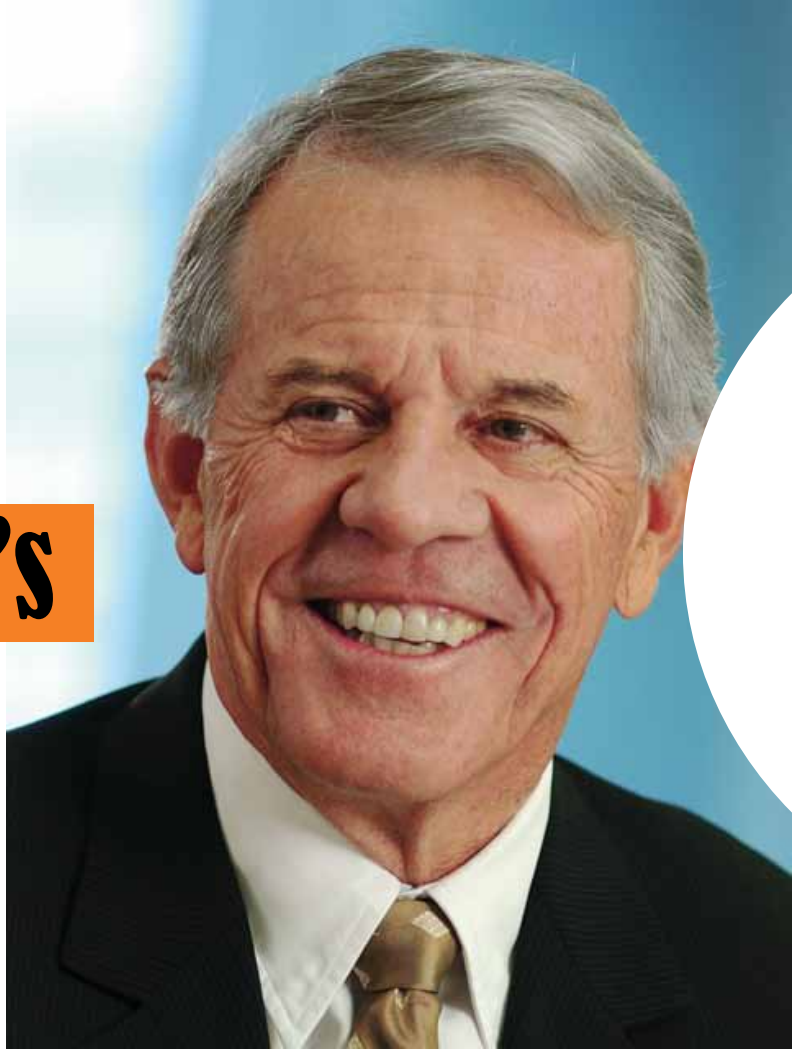
Contents

2012

Chairman's Report	4
Executive Director's Report	6
What is the 'Black Dog'?	8
General Manager's Report	10
Research	12
Bipolar Disorder	12
Depression	16
Suicide Prevention	18
eHealth	21
Positive Psychology and Resilience	23
Systems Neuroscience	24
Neurostimulation	26
Psychosocial Research	28
Healthy Brain Ageing	29
Perinatal Depression	30
Workplace Mental Health	32
Clinical Services	34
Education and Community Programs	38
Writing Competitions and Books	42
Developing Countries Program	46
Development and Fundraising	48
Communications	51
The Black Dog Institute Website	53
The Black Dog Index	54
Creative Development	56
The Black Dog Institute International Lectures	57
Our People	59
Special Acknowledgements	62
UNSW School of Psychiatry 50th Anniversary	64
Financial Report	66
The Institute and Pharmaceutical Companies	68
Research Funding	69
Publications	72
Conference Presentations and Educational Meetings ...	75
Donations and Bequests	78
Bequest Form	80



Chairman's Report



In 2012 the Black Dog Institute has revitalised, adopting a strategic plan that places a strong focus on high quality research as the foundation for improving outcomes for patients suffering mood disorders such as depression and bipolar disorder.

After a decade of growth under its founding executive director, Professor Gordon Parker, the Institute is now an established international leader in its field. With the appointment of Professor Helen Christensen as a distinguished successor to Professor Parker, we are expanding our research programs.

Our model is based on the presumption that quality research leads to new discoveries. In turn, discoveries translate into clinical treatments, impactful school, workforce and community programs, and improved health policies.

Our continued growth has been supported from many quarters. We have a dynamic and dedicated Board, drawn from the private, public and academic sectors, that provides a skilful contribution to meet our high expectations. This year, we had two founding board members retire – Mr Nicholas Cowdery, former Director of Public Prosecutions for NSW, and Associate Professor Meg Smith, from the University of Western Sydney, after providing outstanding service for the best part of 11 years. We thank them warmly for their unstinting efforts and generosity of talent and time.

We are indeed fortunate to have a remarkable team of people working for and dedicated to the Institute. We salute them and acknowledge the inspiration that they provide. In this regard we are pleased to have our first full-time General Manager in Will Bonney, who brings impressive business acumen, passion and enormous energy to the role.

We are also indebted to the ongoing support from the NSW Ministry of Health, the Commonwealth Department of Health and Ageing (DoHA) and the National Health and Medical Research Council (NHMRC).

Coupled with this are our fruitful relationships with partner organisations to improve our reach nationally and internationally and the ties we have with other research institutions and mental health service providers.

Collaboration is the key to getting results in the health sphere. An example of this is our productive partnership with The Health-Science Alliance, Australia's first Academic Health Science Centre, based on the UNSW/Randwick public hospital campuses. The Alliance comprises nine of the country's top medical research institutes and health care providers and is working toward harnessing and integrating the research, education, training and clinical expertise of each partner to maximise optimal health outcomes for patients and the community.

The Institute also depends on the generosity of individuals and corporations. One such supporter and good friend of the Institute, the late Albert Hunt, sadly lost his life in a motor vehicle accident this year. His financial support kick-started many initiatives which in years to come will be recognised as the impetus to providing significant improvements for people with mood disorders. Albert was a great character and a champion for better mental health services, particularly in the bush. We will miss him. On behalf of the Board I extend our sincere condolences to Albert's family.

We look ahead with hope and conviction as we strive to accelerate understanding of the basic biological causes of depression and suicide, and develop treatments and interventions accordingly. It is a long journey but full of promise and possibility.



Peter Joseph AM
Chairman

Executive Director's Report

In 2012, the Black Dog Institute consolidated a decade of clinical and research excellence by conducting a formal evaluation to identify our strengths and refine our mission.

Through this process we sought input from mental health consumers, our funders, prominent researchers, policy makers and our own staff. This input formed the basis of a comprehensive strategic plan that will underpin the delivery of our mission – ***To improve the lives of people affected by mood disorders through translational research, clinical expertise and education programs.***

Unlike many other research-based institutions, the Black Dog Institute is truly translational. This means our research is designed to directly and rapidly lead to improvements in clinical practice and education. We do not research for research sake, rather we proactively identify and target community need and partner with other organisations to ensure maximum impact and efficiency.

I am pleased to say our community focus and recognised research expertise has resulted in



significant government research funding. This includes a highly prestigious NHMRC Program grant for research into bipolar disorder, led by Professors Mitchell, Schofield, Parker and Breakspear, and the establishment of an NHMRC Centre of Research Excellence in Suicide Prevention led by myself and supported by leading researchers and clinicians from around Australia. Further new funding has been obtained to investigate suicide ideation, new depression treatments, neuroimaging and mental health screening. Whilst the research may seem diverse, the central goal is to improve the lives of people who suffer from depression and bipolar disorder.

The challenge for 2013 is to expand our efforts to accommodate the needs of a large country. We know that mental health issues are on the rise in Australia and current management programs are not optimal. Our eHealth programs such as **myCompass** have already reached tens of thousands of individuals directly and will continue to do so. We are planning new clinics in brain stimulation, depression, bipolar disorder, psychological practice and web-based

adolescent care. Wherever possible, our research outcomes will be made accessible nationally. Our education and workplace programs will be delivered across Australia using evidence-based materials. We will be targeting groups such as young people and indigenous Australia where we know risk is high and outcome is promising.

2012 was a momentous year for the Black Dog Institute and 2013 is poised to be even more exciting. I hope you enjoy learning about our work and feel inspired to join us on our journey.

Helen Christensen
Executive Director, Black Dog Institute



What is the Black Dog?

About the Institute

The Black Dog Institute is a world leader in the diagnosis, treatment and prevention of mood disorders such as depression and bipolar disorder. Founded in 2002, the Institute is an independent not-for-profit organisation that combines expertise in clinical management with cutting-edge research.

One in five Australians are affected by mental illness every year, with one of the most common of these being depression. It touches people of all ages and from all walks of life, and places an enormous burden on individuals, families, workplaces and the health system.

Living with the 'black dog' (as Winston Churchill labelled his depression) can be overwhelming, a feeling of being trapped in a dark haze. It can manifest as extreme lethargy, irritability or sadness. In extreme cases, it can result in thoughts of suicide or self-harm.

But there is hope.

The Black Dog Institute's research program extends from risk identification genomic studies to development of websites to enhance mental resilience

in teenagers. We are conducting clinical trials into new treatment methods as well as conducting ground-breaking imaging studies to 'see' what happens to the brain when depression strikes.

While diagnosis and treatment is of utmost importance, the Black Dog Institute also places emphasis on teaching people to recognise the symptoms of mood disorders in themselves and others, as well as providing them with the right psychological tools to hold the 'black dog' at bay.

The Black Dog Institute is a collaborative organisation that partners with universities, health services and community groups across the country. We focus on access – running education programs in regional areas and providing a number of clinically-endorsed training programs both for health care professionals and workplaces.

Our patron is Her Excellency, the Governor of New South Wales, Professor Marie Bashir AC CVO.

Our vision is to develop the best translational research institute to lower the impact of mood disorders.

LOGO:

The striking Black Dog Institute logo that captures the famous Churchill symbol – the ‘V’ for victory gesture and the shadow of the black dog’s head – was developed by Mr John Bevins.



Our Mission, Values and Philosophy

Our mission is to identify, prevent and treat mood disorders to improve outcomes.

We value:

- Compassion and respect
- Excellence and innovation
- Transparency and equity
- Collaboration and professionalism.

The Institute's philosophy:

The highest quality research leads to new discoveries. Discoveries translate into clinical treatments, school, workforce and community programs and health policies. Training health professionals and providing knowledge to patients, families, carers and communities increases impact. Working with partner organisations improves reach nationally and internationally.

General Manager's Report



In 2012 the Institute undertook a thorough review of its strategy and directions, stakeholder perceptions and general population awareness. This process resulted in a strategic plan from 2012 to 2015, driving the Institute's efforts toward population-based impact.

Within this strategy, Black Dog Institute has the following key objectives:

1. To strengthen research performance and broaden the range of fields in which Black Dog Institute has recognised expertise
2. To deliver a range of effective, cutting-edge and sustainable clinical services in depression and bipolar disorder, brain stimulation, step-up/step-down eHealth interventions and ongoing psychological services that build on and complement research excellence
3. To ensure that Black Dog Institute is a leader in new mental health developments, health reform and health technology
4. To create sustainable education activities by building on the Institute's strengths in training health care professionals, workplaces, schools and communities and to create new models of delivery
5. To ensure the Institute remains a financially sustainable and accountable organisation, a partner of choice and a great place for staff to work.

Consistent with its history, the Institute remains committed to conducting high quality research to provide the evidence-base for improved prevention, intervention and recovery tools and models of care. The consumer is at the centre of everything we do.



Stretch targets are included in the strategic plan, including increasing our sphere of influence and overcoming geographic barriers. To this end, we are working with and through other high quality mental health service providers to broaden our education reach and significantly increase our impact all around Australia and the world.

In 2012 we have seen a dramatic increase in the number of corporate partners with whom we are engaged with workplace programs. These partnerships are based on generating value by assisting companies to better address depression in the workplace on a commercial basis.

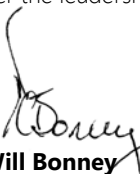
The range of offerings the Institute provides to different segments of the population to improve outcomes from anxiety, depression and bipolar disorder continues to expand in breadth and sophistication. Our commitment is to provide ongoing improvements

to the prevention, treatment and recovery from mood disorders for all Australians.

Finances and Audit

The Institute was returned to a sustainable financial footing throughout 2012 by re-aligning research, clinical and education activities in line with revenue.

Ernst & Young once again conducted the external annual audit of the Institute's accounts for the year ended 30 June 2012. A concise version of these accounts is provided in this report. The Institute is grateful for the work undertaken by Ernst & Young under the leadership of the Audit Partner, Mr Rob Lewis.



Will Bonney

General Manager Black Dog Institute

Research



Research Manager, Kristy Delmas

Bipolar Disorder

Research Leaders – *Professor Philip Mitchell, Professor Gordon Parker, Associate Professor Vijaya Manicavasagar, Mr Dusan Hadzi-Pavlovic, Dr Gloria Roberts*

Bipolar disorder is the name used to describe a set of 'mood swing' conditions, the most severe form of which used to be called 'manic depression'. One in 75 Australians suffer from bipolar disorder but current practices to identify people with the disorder are extremely poor. Whilst we know that bipolar disorder has high heritability (70-80 per cent of cases occur in people with close family relations with bipolar disorder) we also know that the environment must play an important role.

The Black Dog Institute is at the forefront of new research; working to pinpoint the genetic and environmental risk factors associated with bipolar disorder and investigating new and more effective ways of managing the condition.

Research activity from 2012 includes:

Identifying brain activation differences in people at risk of bipolar disorder

– This study investigated functional brain activity in young people at increased genetic risk for bipolar disorder. It was found that whole-brain corrected analyses revealed a highly specific and significant lack of recruitment of particular regions of the brain in the high-risk participants compared to the others. This impaired function may represent a trait marker of vulnerability to bipolar disorder.

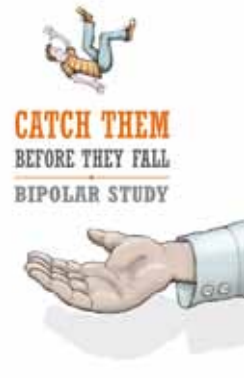
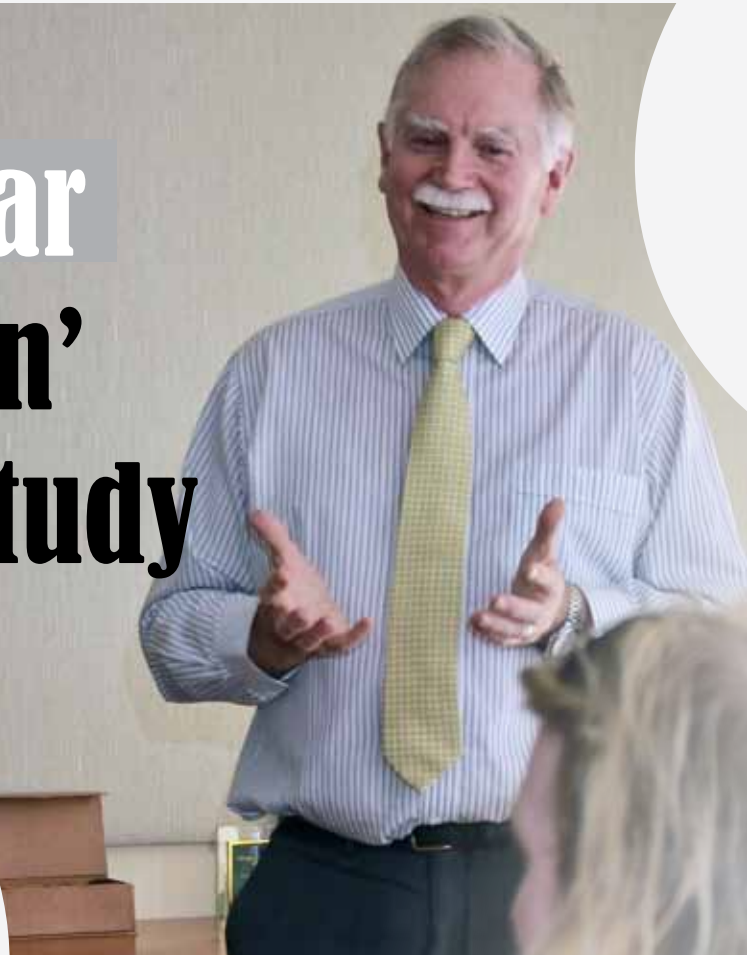
Triggers of mania and depression in young adults with bipolar disorder – The research identified triggers of bipolar ‘highs’ or bipolar ‘lows’ in young adults with bipolar disorder. Researchers also looked at whether the events that led to mania or hypomania were the same as those that led to depression. The most common triggers of mania/hypomania were emotional change and sudden changes in sleep/wake times. Depressive events were closely linked to stress, including injury and sleep deprivation. Menstruation triggered depression in women with bipolar disorder.

Reduced emotional regulation shown in people with bipolar disorder and schizophrenia

– This study examined brain function during self-regulation of negative emotional experience in patients with bipolar disorder and schizophrenia as both these patient groups show cognitive deficits in brain regions that would normally function to self-regulate emotion. The study looked to see if there were similar abnormalities in prefrontal brain regions in these patient groups and the results showed that neither patient group was able to reduce their own negative experience to the degree that healthy controls could.

Can mindfulness be a useful adjunct treatment for bipolar disorder? – This study compared the efficacy of Mindfulness-Based Cognitive Therapy (MBCT) plus treatment as usual (TAU) to TAU alone for patients with bipolar disorder over a 12-month follow-up period. Analysis of data found no significant differences between the groups, either on time to first recurrence of a mood episode, total number of recurrences, or Montgomery-Asberg Depression Scale or Young Mania Rating Scale scores over the 12-month follow-up. We concluded that, while MBCT did not lead to significant reductions in time to relapse, total number of episodes or mood symptom severity at 12-month follow-up, there was some evidence for an effect on anxiety symptoms.

Bipolar Kids 'n' Sibs Study



Professor Philip Mitchell

How do you identify those at risk and what are the subtle first signs of developing the condition? And, how do you identify those who are resilient and who will not go on to develop bipolar disorder?

The University of New South Wales (UNSW) and the Black Dog Institute are taking part in the largest international study of its type to pinpoint the risk factors associated with bipolar disorder.

Heading the Australian effort is Professor Philip Mitchell, from the Black Dog Institute and the UNSW School of Psychiatry, who is conducting the study in collaboration with four major research institutions in the United States – Johns Hopkins University in Baltimore and the Universities of Michigan, Indiana and Washington.

What we know is that about 80 per cent of bipolar disorder is hereditary. About 10 per cent of people with bipolar disorder take their lives, and, in Australia, about 10 per cent of bipolar sufferers make one suicide attempt every year. Also, about half of bipolar sufferers do not take or do not regularly take their medication.

In Australia, around two hundred 12 to 30-year-olds are being recruited to take part in the Bipolar Kids 'n' Sibs Study and researchers are looking at all the biological factors that may contribute to the illness, including a patient's DNA, using brain-imaging, psychological testing, clinical evidence and history of drug use.

...80 per cent of bipolar disorder is hereditary...

...10 per cent of people with bipolar disorder take their lives...

...10 per cent of bipolar sufferers make one suicide attempt every year

"We are tracking participants who have at least one relative with bipolar disorder or who are sufferers themselves," said Professor Mitchell. He believes there is a growing body of evidence that the earlier the treatment, the better the outcome.

"What we have found so far is that young people with a family history of bipolar disorder respond less adaptively to emotional experiences. This gives us a strong lead in our goal of developing strategies for early intervention and prevention with those persons who are at risk."

Professor Mitchell said the Bipolar Kids 'n Sibs Study was in its third year and patients are checked every year, while every two years brain scans are repeated to look at changes in the brain over time.

New recruits, aged between 12 to 30 years, are still being sought. To participate or obtain more information, phone 1800 352 292 or email: bipolar-kidsandsibs@unsw.edu.au

Depression

Research Leaders – *Professor Gordon Parker, Professor Helen Christensen, Mr Dusan Hadzi-Pavlovic, Dr Alex Wilde*

One in seven Australians will experience depression in their lifetime. It is generally acknowledged that depression is a common experience and that we have all felt 'depressed' about something occurring in our lives – while sometimes we just feel 'down' for no reason at all. However, depression can be an illness when our mood state is severe, for instance if the 'down' mood lasts two weeks or more and interferes with our ability to function at home or at work.

The Black Dog Institute has built a reputation as a leading world authority in the diagnosis and treatment of depression. Our research has formed the basis of many new treatment paradigms and is now also shedding light on how to prevent or minimise depression onset.



Research activity from 2012 includes:

Treating insomnia to prevent depression – The NHMRC-funded 'Good Night Study' was launched in late 2012. It uses a web-based training program aimed at improving mental wellbeing and reducing depression by teaching people to sleep better for the 1 in 10 Australians who report problems with either falling asleep or staying asleep, a proportion that rises steeply for people who have depression and anxiety. Preliminary trials of this specialised web-based program called SHUTi (Sleep Healthy Using The Internet), developed by Associate Professor Lee Ritterband from the University of Virginia, US, show that this method, which combines changes in behaviour, information about sleep 'hygiene' and a fresh view of the problem, is effective in improving sleep, reducing depression and increasing mental wellbeing.



Determining melancholic from non-melancholic depression – This study aimed to separate features that are different for ‘melancholic’ and ‘non-melancholic’ depression. It is suggested that ‘melancholic’ depression (about 10 per cent of depressive disorder) is a more biological illness and that the bulk of depressive disorder can be categorised as ‘non-melancholic’, with the latter more closely associated with stress and personality factors. The Sydney Melancholia Prototype Index developed by the researchers found that ‘non-melancholic’ participants in the study had more anxiety disorders, a higher number of stressors and were more likely to have a personality style that could predispose them to non-melancholic depression. Clinician ratings of patients were found to be more accurate than ratings made by patients of their own mood state.

Implications of genetic tests for psychiatric illness – It is now possible to link a person’s genetic ‘markers’ to their risk of developing a particular disease and to sell such tests direct to the consumer. Since the information may influence life-changing health decisions, it is very important to ensure that there is sound evidence to support the use of any particular genetic test. Advantages of such tests are that early protection such as medication and therapies can be implemented, hopefully lowering risk, and some genetic tests can also predict medication response. Disadvantages include that such tests can increase rather than diminish stigma, and cause unnecessary distress and discrimination in instances where the illness/condition never develops.

Suicide Prevention

Research Leaders – *Professor Helen Christensen, Dr Fiona Shand, Dr Bregje Van Spijker*

Every day at least six Australians die from suicide and a further 30 people will attempt to take their own life. In fact, Australians are more likely to die from suicide than skin cancer; yet we know comparatively little about the processes that lead to suicide and how and when to intervene effectively.

Black Dog Institute research is looking for answers to this problem and concentrating on the development of evidence-based intervention programs that will save lives. Much of our activity in this area focuses on groups who we know have a higher risk of suicide such as indigenous people. Complementing this work will be pioneering research conducted within the prestigious new NHMRC Centre for Research Excellence. This work will combine research study data to identify suicide risk factors in Australia, develop new interventions for suicidal ideation, and model research data with the aim of adapting policy to ensure funding is directed accordingly.



Research activity from 2012 includes:

Preventing suicide in young indigenous people – Work has begun on a new a mobile phone 'App' to help young indigenous people to deal with suicidal thoughts and psychological distress. The App will use evidence-based psychological strategies adapted from acceptance and commitment therapy and dialectical behaviour therapy. Consultations suggest that much of the proposed content is already being delivered to young indigenous people in face-to-face interventions and that an App may overcome barriers to help-seeking such as cost, stigma, lack of anonymity, and poor access to services. This project is being developed in partnership with HITnet, the Young and Well Cooperative Research Centre, the UNSW Muru Marri Indigenous Health Unit, UNE, Alive & Kicking Goals! in the Kimberley, and Thoughtworks, and will be piloted in 2013.



Living with Deadly Thoughts – This web-based program is being developed by Professor Helen Christensen and Dr Bregje Van Spijker. It is based on a program currently successfully used in the Netherlands and uses simple but engaging modules to help people understand and manage suicidal thoughts before they become significantly life-threatening. We know that many people do not access treatment when they first experience suicidal thoughts and want to remain anonymous. This application is a confidential way to obtain clinical and effective treatment. A trial of this new program will commence in early 2013.

Community-based study of suicidal thoughts – This study examined the psychological predictors of suicidal ideation and suicide attempt, using Joiner's Interpersonal Theory of Suicide. The researchers found support for the concept that the risk for suicide increases when multiple psychological factors come into play. These include feeling hopeless, experiencing isolation even though you might want to belong, and perceiving that you are a burden on those around you. The innovation of the study rests in the testing of this model within a community sample as most previous research has been restricted to clinical samples.

Researchers (left to right) Rebecca Ridani, Professor Helen Christensen and Dr Fiona Shand have taken on the challenge to better understand the complex pathways that lead to suicide

NHMRC Centre for Research Excellence in Suicide Prevention



Researchers at the Black Dog Institute and the University of NSW, in partnership with the Brain and Mind Institute, The University of Sydney, the Queensland Institute for Medical Research, The Australian National University, and The University of Melbourne have been awarded a prestigious NHMRC Centre for Research Excellence to determine how best to save people from suicide. Researchers from Otago and Auckland Universities are also involved.

The five-year \$2.5million grant will enable desperately needed research into the best way to deliver interventions to those at risk, developing a better understanding of the complex pathways that lead to suicide and encouraging help seeking in groups known to be high risk such as adolescents, people living with mental illness and construction workers.

Chief Investigator and Executive Director of the Black Dog Institute, Professor Helen Christensen, believes research is urgently needed if we are to reduce rates of suicide in Australia. The view is shared by Australian Minister for Mental Health, Mark Butler MP,

who believes people at risk are highly vulnerable and often don't get the help they need.

This fresh approach aims to identify the way in which access to eHealth services may lead to decreased suicide risk within different local areas and amongst different age groups. It includes much needed investigations into cyber bullying in young people, and indigenous mental health.

New theories are emerging about what risks lead to suicide. Re-using data from a multitude of studies will allow us to test these theories.

Ultimately, the aim is to develop and recommend evidence-based programs of intervention that will be accessible and effective to anyone who needs help.

Work has already begun on eHealth initiatives aiming to build resilience in young people and educate people about living with suicidal thoughts. These are expected to be launched in 2013.

eHealth

Research Leaders – *Professor Helen Christensen, Associate Professor Judy Proudfoot, Associate Professor Vijaya Manicavasagar, Professor Gordon Parker*

eHealth refers to the delivery of health services via electronic technologies such as computers, mobile phones and tablets. A clinically proven alternative to face-to-face consultations, eHealth interventions provide the public with evidence-based information, education, support and treatment when, where and how they want. Not only convenient and cost effective, it also reduces barriers to accessing services that result from social disadvantage, stigma and living in areas where there are few mental health services.

Black Dog Institute eHealth programs are now providing free and accessible treatment and diagnostics to tens of thousands of people across Australia. All of our programs are developed and evaluated by clinicians and research specialists to ensure they remain updated and relevant to the community using them.



Research activity from 2012 includes:

Launch of myCompass – **myCompass** is a web-based, self-help program delivered via mobile phones and computers for people with mild to moderate depression, anxiety or stress. Funded by the Australian Government, the program provides a unique way for people to monitor their moods, triggers and behaviours in 'real time' and in natural settings. Launched mid-2012, more than 9,000 people from Australia and all over the world have signed up. **myCompass** is a free and confidential service. See www.mycompass.org.au for more information.

Pictured are the myCompass team (left to right) Cesar Anonuevo, Mary-Rose Birch, Alexis Whitton, Associate Professor Judy Proudfoot and Dr Janine Clarke



**Federal Minister for
Mental Health and
Ageing, Mark Butler,
at the launch of the
myCompass program**

Black Dog Mood Assessment Program (MAP) proves clinically effective – This research examined the usefulness of the Mood Assessment Program (MAP) 12 months after an online version for patients was made available for access by Australian health practitioners. Feedback from nearly 10,000 patients indicated that the great majority judged the MAP as straightforward to complete. Some professionals also offered their judgments. Responses supported the acceptability of the MAP to patients and its utility to clinicians in relation to diagnostic and formulation issues, as well as in advancing communication between practitioners and their patients. In addition, the MAP has been shown to improve efficiency and time management in assessing those with a mood disorder.

Stepped care intervention for Australian youth – This program, to be introduced in 2013, aims to provide an early intervention service to young people at risk of depression and anxiety. Referred from community organisations or through self-referral, young people will be assessed and offered one of three streams of evidence-based interventions for anxiety and depression, including web-based interventions. A range of support from healthcare professionals will also be offered. The progress of each young person will be monitored to check if they need to be 'stepped up' to a different intervention.

Positive Psychology and Resilience

Research Leader – Associate Professor Vijaya Manicavasagar



The Black Dog Institute is committed to promoting resilience-building as a key ingredient in breaking the cycle of mood disorders. To this end the concept of resilience-building forms an integral part of all our clinical, community and professional education programs.

Our community programs for young people such as '**HeadStrong**' and '**BITE BACK**', together with our workplace talks, offer practical suggestions for resilience-building as universal preventions for mood disorders. And our professional education programs for general practitioners, psychologists and youth workers ensure that health professionals are mindful of both 'recovery' and 'prevention' as conjoined strategies in helping people with mood disorders.

BITE BACK is a world-first online positive psychology website specifically designed for adolescents. An engaging interactive tool, **BITE BACK** aims to help young people work to their full potential by recognising their strengths, learning to become more mindful and improving their appreciation of life. It includes activities, blogs, interviews, videos and information on a variety of domains including social relationships, gratitude, and mindfulness. **BITE BACK** is an open, freely available website [www.biteback.org.au]

Systems Neuroscience

Research Leaders – Associate Professor Michael Breakspear, Dr Tjeerd Boonstra



The Systems Neuroscience team
(left to right) Kees De Leeuw, Stewart Heitmann, Associate Professor Michael Breakspear, Tjeerd Boonstra, Angela Langdon and Saeid Mehrkanoon

The discipline of systems neuroscience covers the basic principles of large-scale brain dynamics, how these arise from (and reshape) cortical architectures, and how they underpin cognitive operations, such as perception, inference and motor control.

They also contribute to our understanding of major mental illnesses such as mood disorders, schizophrenia, autism and dementia. Understanding of these disorders requires employing – and further advancing – cutting-edge neuroscience techniques and their applications.



Research activity from 2012 includes:

Hemodynamic travelling waves in human visual cortex – Functional magnetic resonance imaging (fMRI) experiments have advanced our understanding of the structure and function of the human brain. Dynamic changes in the flow and concentration of oxygen in blood are observed experimentally in fMRI data via the blood oxygen level dependent (BOLD) signal. Since neuronal activity induces this hemodynamic response, the BOLD signal provides a non-invasive measure of neuronal activity. Understanding the mechanisms that drive this BOLD response is fundamental for accurately inferring the underlying neuronal activity. The goal of this study is to systematically predict spatiotemporal hemodynamics from a biophysical model, then test these in a high resolution fMRI study of the visual cortex. Using this theory, we predict and empirically confirm the existence of hemodynamic waves in cortex – a striking and novel finding.

Neural mechanisms of intermuscular coherence: Implications for the rectification of surface electromyography – This study employed a computational model to look at the role of the motor unit action potential (MAUP) on the translation of 'oscillatory activity'. (Oscillatory activity plays a crucial role in corticospinal control of muscle synergies.) This was tested and compared to test results from intermuscular coherence between bilateral leg muscles. The model shows that the effect of electromyography rectification depends on the uniformity of MUAP shapes. The data provided support for a heterogeneous distribution of MUAPs which implies that the shape of MUAPs is an essential parameter to reconcile experimental and computational approaches.

Neurostimulation

Research Leaders – Professor Colleen Loo, Dr Donel Martin



Neurostimulation refers to using different mechanisms to stimulate brain cells in order to treat and manage psychiatric disorders such as bipolar disorder and depression. Traditionally, the only treatment option within this sphere was electroconvulsive therapy (ECT) which is not a suitable treatment for everyone.

Research at the Black Dog Institute is leading the way into new forms of neurostimulation, including transcranial Direct Current Stimulation (tDCS). This involves stimulating frontal areas of the brain with very small currents while patients remained awake and

alert. The treatment has no known serious side effects and is suitable for patients seeking an alternative to medication or those who are unable to tolerate anti-depressant drugs or Electroconvulsive Therapy (ECT).

The neurostimulation team are also researching the use of ketamine to help relieve depression. Traditionally used for anaesthesia or sedation, ketamine led to dramatic improvements in people suffering clinical depression, evident from within hours of the treatment to a day later.



Professor Colleen Loo demonstrating transcranial Direct Current Stimulation (tDCS)

Research activity from 2012 includes:

Effects of brain stimulation on memory and brain activity in depression – Advances in non-invasive electrical stimulation of ongoing brain activity – such as transcranial direct current stimulation (tDCS) – continue to offer new hope for the treatment of major depression. Yet the mechanisms of clinical change are unknown. In this study, we investigated the acute effects of tDCS treatment on cortical activity in patients with depression whilst they performed a difficult memory task. The brain mechanisms measured in response to the task may indicate an improvement of selective attention directly after tDCS treatment. This study underlines the promise of functional brain imaging tests in understanding and monitoring response to brain stimulation treatment.

Ketamine as a neuroprotective agent in

ECT – This study investigated the neuroprotective and synergistic effects of adjunctive sub-anaesthetic doses of the drug ketamine with ECT. Participants prescribed right-unilateral ultrabrief ECT were randomly assigned to receive ketamine or saline placebo with their anaesthesia and were assessed on cognitive, safety, and antidepressant efficacy outcomes. It was found that the addition of ketamine significantly increased the speed of antidepressant response over the first week of treatment – however efficacy outcomes were the same between ketamine and placebo by the end of the ECT course. Ketamine was not shown to have any neuroprotective advantage in this study. Finally, the use of adjunct sub-anaesthetic ketamine in this study did not produce any significant psychomimetic side effects.

Psychosocial Research

Research Leader – *Professor Kay Wilhelm*

Psychosocial research crosses research boundaries to employ holistic thinking in health and welfare. It promotes scholarship and research with a strong practice and policy focus in response to the complex demands on health services. It positions the individual in networks of interpersonal relationships, organisations, and wider systems. Research is attuned to and draws on the social and psychological sciences, political theory, social policy, philosophy and cultural studies and aims to impact on the wider community as well as the individual.



Research activity from 2012 includes:

On a blue note: Why depressed people listen to music – Research suggests that negative mood may be associated with attraction to negative emotion in music, a finding that runs counter to mood management theory. Despite such evidence, no study has examined how and why depressed people listen to music. Qualitative thematic analysis was conducted with textual responses from 294 online survey respondents (148 with depression and 146 without). Findings revealed that depressed people were more likely to use music to reflect or express emotion, while those without depression were more likely to use music for energy and inspiration. Negative emotion in music enabled some to attend to negative emotion, with subsequent dissipation of negative mood. For others, it was connected with negative cognition and a worsening of negative mood.

Healthy Brain Ageing

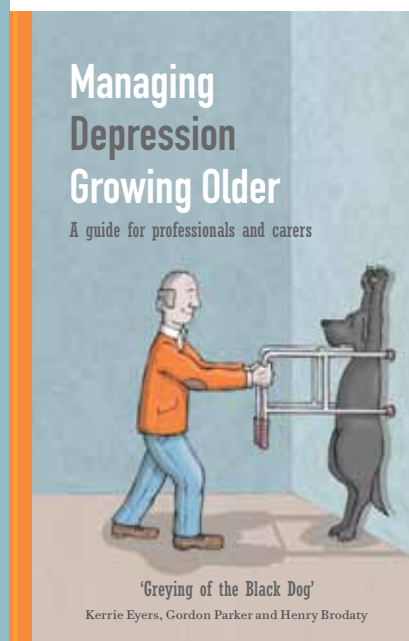
Research Leaders – Professor Henry Brodaty,
Professor Perminder Sachdev

An estimated eight per cent of older adults in Australia experience depression and the number will increase as the population 'greys'.

Black Dog Institute partners with affiliate organisations such as the UNSW Centre for Healthy Brain Ageing to find answers to help older Australians live a productive and healthy life in these golden years.

Research activity from 2012 includes:

Reducing behavioural and psychological symptoms of dementia in the community – Non-pharmacological interventions delivered by family caregivers have the potential to reduce the frequency and severity of behavioural and psychological symptoms of dementia, with the effect at least equalling that of pharmacotherapy.



Changing topological patterns in normal ageing – Researchers examined normal ageing from the perspective of topological patterns of structural brain networks constructed from two healthy age cohorts 20 years apart. We then constructed structural brain networks using 90 cortical and subcortical regions as a set of nodes, and further analysed the topological properties of the age-specific networks. We found that the brain structural networks of both cohorts had small-world architecture, and the older cohort (age range 64-68) had lower global efficiency but higher local clustering in the brain structural networks compared with the younger cohort (age range 44-48). The older cohort had reduced hemispheric asymmetry and lower centrality of certain brain regions, but that of the prefrontal cortex (PFC) was not different. These structural network differences may provide the basis for changes in functional connectivity and cognitive function as we age and may explain the development of cognitive disorders and depression in old age.

Perinatal Depression

Research Leader – *Professor Marie-Paule Austin*



In recent years, the term 'postnatal' depression has been replaced by the term 'perinatal' depression to encompass the period from conception until 12 months postpartum. This reflects a wider understanding of the natural history of this condition and its far-reaching impact on sufferers, their partners and other members of the family.

Depression affects around 10 per cent of women in the antenatal period and an increasing number of studies are finding links between significant depression and anxiety during pregnancy, and adverse outcomes for both mother and baby. Detecting depression and anxiety during pregnancy creates an opportunity to intervene early and reduce the longer-term impact of these conditions.

Research activity from 2012 includes:

Detection and management of mood disorders in the maternity setting – Researchers put together evidence-based guidelines about mood disorders arising in the 'perinatal' period (from conception to the first year after birth) arising in up to 13 per cent of women and causing significant problems to the adjustment of the mother, baby, partner and wider family. The guidelines' aim is to educate health professionals to be more confident about when and how to intervene when they think a woman is suffering from serious levels of depression or anxiety.

Major depressive disorders in the perinatal period – This population-based study aimed to investigate hospital admission of major depressive disorders during the perinatal period. Birth records from 1 July 2002 to 31 December 2004 in the NSW Midwives Data Collection were linked with records for the same period from the NSW Admitted Patients Data Collection. Overall, risk of admission rose significantly across the entire first postpartum year and remained elevated up to 24 months postpartum. This study has significant implications for policy and service planning for women with depressive disorders in the perinatal period.



How you can help



Volunteering for Research Studies

The online Volunteer Research Register (VRR) is on the Black Dog Institute website. The VRR allows people to register their interest in participating in mental health research studies. It has been designed to securely store details such as a person's name, contact details and some basic information including date of birth, whether a person has ever been diagnosed with a mental health problem, and if they have previously participated in a Black Dog Institute research study. When a research study starts, we will search the register for people who might be suitable and email them information about it as well as an invitation to take part should they be interested.

You can join the 1800 other people donating their time to research by registering at www.blackdogvolunteers.org.au.



Workplace Mental Health

Research Leader – *Dr Samuel Harvey*

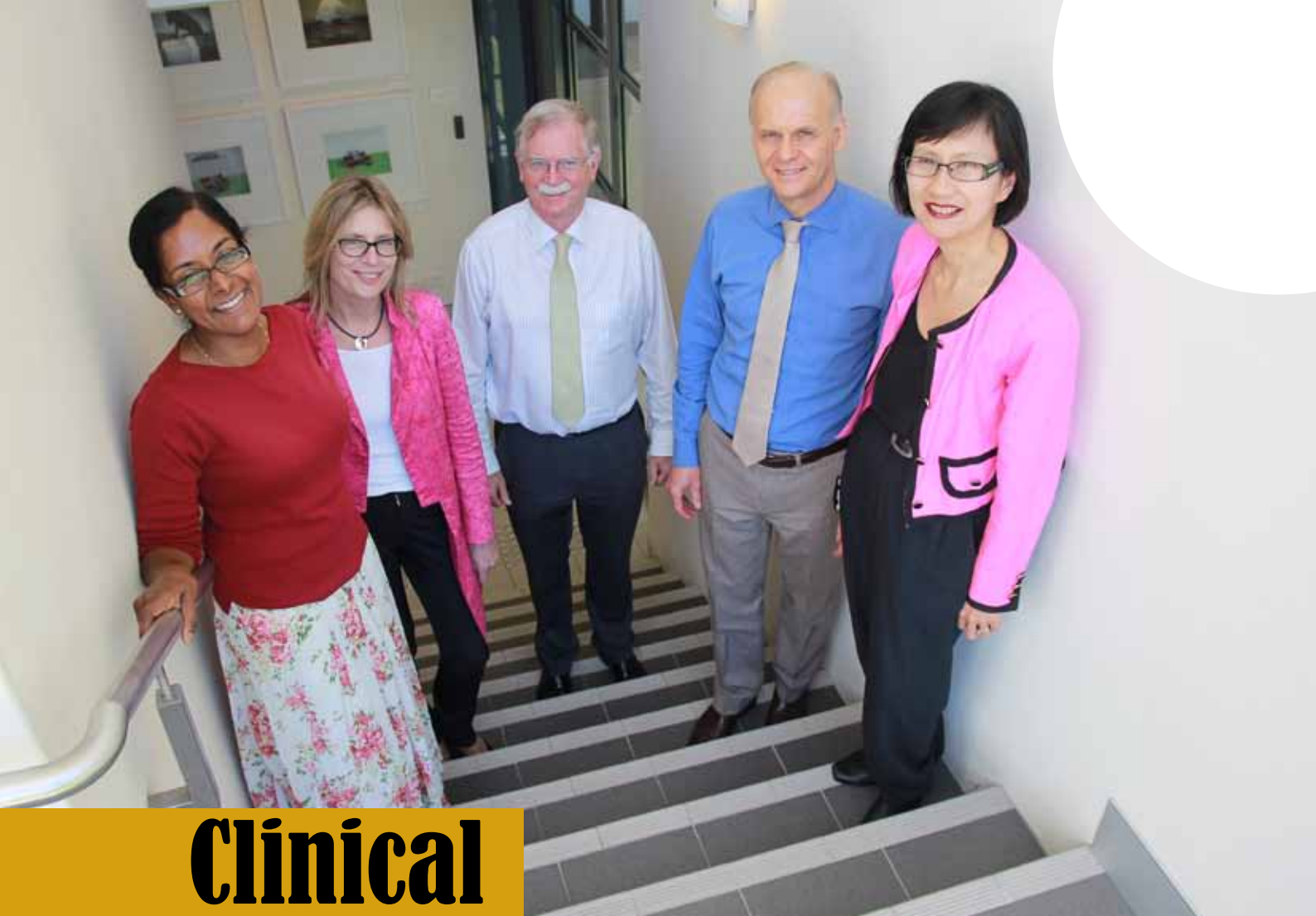
One of the most powerful ways in which mental illness leads to social exclusion is via its impact on occupational function. In recent decades in most developed countries, mental disorders have taken over from musculoskeletal problems as the leading cause of sickness absence and long-term work incapacity. However, sickness absence forms only part of the economic costs associated with mental illness. There is increasing evidence that many individuals suffering from mental disorders, such as depression, will remain at work but will be under-performing in their usual roles. Thus, once the costs of reduced productivity and increased staff turnover are added to the cost of absenteeism, the annual work-related cost of depression in Australia is estimated to be \$12.6 billion.

While the economic consequences of mental illness in the work place are dramatic, the importance of the association between work and mental health goes well beyond this. Those without work are almost always financially dependent and prevented from playing a full and active role in society. Being in work is associated with lower prevalence of depression and lower incidence of suicide. The adverse economic and health effects of 'worklessness' are felt not only by the individuals who are not working, but also by their families and children. There is good evidence that in most situations the benefits of work for an individual's mental and physical health outweigh any risks.

... the annual work-related cost of depression in Australia is estimated to be \$12.6 billion...

The Black Dog Institute, working together with UNSW, has secured funding from NSW Health for a three-year program of research focused on the relationship between work and mental health. This research program is being led by Dr Samuel Harvey, an academic psychiatrist who has recently returned to Australia after spending 10 years working in the UK. His post at the Black Dog Institute and UNSW is the first clinical academic position in workplace mental health in Australia and one of the very few academic positions world-wide to focus specifically on the relationship between mental health and work.

Initially, the Workplace Mental Health Research Program will focus on the mental health of NSW emergency workers, but it is hoped that over time it will expand to consider the entire working age population. Emergency workers have a key role in our society, but their work is often stressful and dangerous and significant numbers of emergency workers have difficulties with mental illness as a result. The aims of the new program of research are relatively broad, but include trying to establish ways of identifying which emergency workers are at risk of developing mental health problems, considering ways of increasing worker resilience and preventing mental disorders, and testing new interventions to help promote early identification and return to work amongst unwell emergency workers.



Clinical Services

Clinical leaders (left to right)
Associate Professor Vijaya
Manicavasagar, Professor Helen
Christensen, Professor Philip
Mitchell, Dr Paul Friend and
Professor Colleen Loo

The Black Dog Institute has an ambitious plan to establish a network of expert clinics providing an expanded range of services for patients suffering mood disorders.

Already, the Institute operates a Depression Clinic (headed by Dr Paul Friend) and a Bipolar Disorder Clinic (headed by Professor Philip Mitchell) which are highly regarded by referring doctors, their patients and friends.

In 2012, the demand for clinical assessment increased significantly and the Institute feels there is scope for other clinical services, headed by their research leaders in the different fields, namely:

- Web-based adolescent care (Professor Helen Christensen)
- Psychological practices (Associate Professor Vijaya Manicavasagar)
- Brain stimulation (Professor Colleen Loo).

The following additional information is provided on the different clinical services.

Depression Clinic

The Depression Clinic has been a flagship of the Institute's activities for the past decade.

Through this clinic, the Institute provides high-quality comprehensive assessments of patients. The patient and their family/friends receive a thorough explanation of their condition and the recommended management plan. In turn, the referring doctor receives a detailed medical report and management plan for his patient. The service is available to any person who is registered with Medicare and referred by a medical practitioner.

The Depression Clinic has also established, once a month, a similar clinic service in Tamworth.

The Clinic is currently exploring the use of video conferencing to provide this service to other regional areas of New South Wales and elsewhere in Australia.



Bipolar Clinic

The Bipolar Clinic is conducted by Professor Mitchell, who is also Head of the UNSW School of Psychiatry, and Professor Loo. A comprehensive assessment is undertaken of patients and in a similar manner to the Depression Clinic, management strategies are provided to the referring doctor and other clinicians involved in the care of the patient.

The proposed network of expert clinics will provide the scope to have improved clinical outcomes tailored around the latest evidence-based research.

Web-Based Adolescent Care

Evidence suggests that the needs of young people with sub-threshold depressive and anxiety disorders are largely unmet. They often fail to seek help through resourcing issues within their region or fail to meet entry criteria for existing mental health services.

The Institute believes these young people are 'falling through the gaps' and may progress to being victims of more severe mood disorders.

Intervening early may reduce the downstream costs associated with the progression of these sub-threshold syndromes into full blown disorders and improve the overall quality of life for the young person.

Interventions delivered over the internet (also known as web-based interventions) have been shown to be effective in treating depression and anxiety in both adults and young people. This approach is relatively cost-effective, can be delivered anywhere at any time and can overcome traditional access barriers.



Psychological Practices

In recent times, Associate Professor Manicavasagar has overseen the expansion of psychological services within the various project streams at the Institute. The new emphasis is on offering an ongoing clinical psychology service to patients referred by Black Dog Institute psychiatrists as well as by direct referrals from general practitioners and psychiatrists in the community. In particular, these referrals would comprise patients with complex mood disorders.

As part of this new charter, research will be conducted into novel psychological interventions. This will enable the Institute to gather pilot data for developing broader research questions and to seek funding through conventional funding bodies, corporate sponsorship or by direct donations to projects.

Brain Stimulation

The Brain Stimulation Clinic would encompass novel treatments, including Transcranial Magnetic Stimulation (TMS), transcranial Direct Current Stimulation (tDCS) and the drug Ketamine (currently used as an anaesthetic and in pain management).

In addition, this clinic would also be a tertiary referral service for psychiatrists requiring a second expert opinion on the use of Electroconvulsive Therapy (ECT), typically for patients with depression who have not responded to standard treatment with ECT. Referrals are to the head of the clinic, Professor Loo, and must be from a psychiatrist.

Education and Community Programs

New Education Stream

The Black Dog Institute is establishing a consolidated Education stream to facilitate expanded services and a greater national presence.

Our education programs have been in high demand for several years, as shown in the separate reports presented below.

From 2013, the Black Dog Community and Professional teams will combine to gain maximum benefit from translating research findings into patient outcomes for different audiences across the workforce, the community at large and health professionals.

The new model will improve the Institute's influence and ability to engage in expansionary activities such as grant applications and establishing formal collaborations with the Commonwealth and other States and Territories, as well as other not-for-profit bodies.

Professional Education and Training team

In 2012, the Black Dog Institute expanded the scope and the range of Education and Training programs.

Feedback from health professionals who participated in these courses is overwhelmingly positive as they believe their management of mood disorders with their patients has improved significantly.

The Institute's Professional Education and Training (PET) team is responsible for the provision of accredited mental health education of:

- General Practitioners and GP registrars
- Psychologists
- School Counsellors
- Nurses
- Allied Health professionals
- Clinicians working with young people.

R.E.A.C.H. Support group facilitators (pictured on left); a group of participants (pictured on right) who attended an education workshop in the grounds of the Black Dog Institute at Randwick



Our programs are based on more than 20 years of research and clinical findings. Our experienced Institute psychiatrists, GPs and psychologists deliver face-to-face workshops throughout NSW and in some capital cities nationwide. Funded by participant fees, our programs are independent of input from pharmaceutical companies.

In 2012 alone, our team has trained around 2,500 health professionals.

This year the team has added to the suite of Black Dog Institute health professional programs with the development and launch of two six-hour GP workshops: Managing Anger and Dealing with Anxiety Disorders.

Our focus for the future development of new programs is to reach multi-disciplinary groups of health professionals in order to create a feeling of teamwork, especially in rural and remote areas, and increase knowledge and understanding between the various different practitioners.

We have begun the process of developing a new multi-disciplinary program called Depression Dilemmas, for GPs, psychologists and, potentially, social workers and mental health nurses. This will be a six-hour accredited program delivered in three separate

two-hour sections, which can be run consecutively on one day, or individually over three evenings. These sections are titled: Co-morbid Depression and Alcohol, Depression in the Elderly, and Resistant Depression.

Further underlying our efforts in rural communities, the Institute, in partnership with the Rural and Remote Area Psychologists Program (RRAPP), hosted 80 rural psychologists from 22-24 August for their annual conference. In addition to delivering a number of Psychology and Youth professional education programs, the Institute has created the opportunity to further extend our relationship with RRAPP and work together to improve mental health outcomes in the rural community.

Special Thanks to:

Our team of program facilitators

- Divisions of General Practice/ Medicare Locals
- Royal Australian College of General Practitioners QI&CPD staff
- General Practice Mental Health Skills Collaboration
- Australian College of Rural and Remote Medicine
- General Practice Conference and Exhibition
- Australian Psychological Society.

Community Programs



The goal of the Community Programs team is to help all Australians recognise the signs and symptoms of mood disorders and encourage them to seek help, by providing education and reducing stigma.

Our community education programs in 2012 reached over 11,000 participants, and ranged from hands-on resilience building workshops to conference presentations and educational seminars. We delivered presentations and workshops in a number of rural locations including Cobar, Moree, Tamworth, Casino, Albury, Cooma, Griffith, Mt Gambier and Alice Springs.

Our **R.E.A.C.H. (Responsibility, Education, Acceptance, Connection and Hope)** support group program in 2012 was funded by a grant from

the Qantas Foundation, and has continued its strong growth. The program has been taken up by mental health service providers including Lifeline and Centacare, who are also able to offer it to their clients as part of their services. In 2013 we will be building on this success by offering the program to service provider organisations across Australia.

The **HeadStrong** program national rollout was launched in 2012. Funded by the **nib** Foundation, the program provides a set of easy to use tools for secondary school teachers to educate students about mood disorders and how to seek help. The core of the program is a set of colourful and humorous images by Matthew Johnstone, which breathe life into the topic



and make it attractive for both teachers and students to learn about mood disorders. Content is tied to the teaching curriculum of each State's educational system, and each State will receive a tailored version of the curriculum resource during the rollout.

Volunteers: Our volunteers are a great asset and are able to provide a very personal account of the impact of mood disorders and a message of hope alongside the information being presented. They also provide us with the ability to reach many more people than we could on our own, and we are grateful for their fantastic support.

Some of our volunteer Community Presenters (far left) at a 2012 training day.

Youth presenters (bottom left hand corner) having fun at a training day while these other photographs are examples of people helping raise awareness and support for the Black Dog Institute at different community events in 2012

Writing Competitions and Books

Because everyone deserves peace of mind

New South Wales Minister for Mental Health, Kevin Humphries, with the runner-up in the writing competition, Rachel Witton

Walking the Tightrope – Caring for Someone with Depression or Bipolar Disorder

The impact of depression is like the tremors of an earthquake. While one in five Australians will personally experience clinical depression or a bipolar disorder over their lifetime, there are the families, friends and work colleagues who are also drawn into the crisis.

Often, it is these people on the perimeter who selflessly reach out to assist those who are living with a mood disorder, offering their time, acceptance, support and hope.

In searching for strategies to deal with mood disorders, the 2012 Black Dog Institute Writing Competition put the spotlight on the powerful stories that come from Carers, with a particular focus on the ques-

tions: What worked best, what didn't work and what did you learn?

While depression can be very isolating, individuals fighting this private battle are often surrounded by those who love them – family, friends, and colleagues all looking for practical and sensitive ways to show their support.

The 2012 writing competition was conducted with the support of Carers Australia, Mental Health Carers ARAFMI NSW Inc. and Hunter Institute of Mental Health's national initiative, Partners in Depression.

The winning entrant from Sydney, who wished to remain anonymous, received a cash prize of \$2,000 for her essay titled **Caring**. In 1500 words this writer paints a vivid account of how she cares for her husband.

Second prize, \$1,000, was won by Ms McGee Noble from Fitzroy in Victoria for her essay, titled

'You're in a relationship; your needs are important. He may not be able to give you everything, and often he will have nothing (or close to nothing) to give. But if you can express how he can help you and he can give you something (no matter how small), then you have a little more to give back to him when the day has taken its toll.'

From the winning entry in Black Dog Institute's annual writing competition: 2012's topic tapped into the experience of carers.

Walking the Tightrope. Third prize of \$500 was awarded to Ms Hannah Bretherton from Maroubra, NSW, for her essay ***Crowded House.***

Highly Commended:

- The Rollercoaster Ride – Rachael Witton, Noosa Heads, Qld
- Bridging the Shadows Together – Hannah Chim, Epping, NSW
- Untitled – name withheld, Ngunnaul, ACT
- The Closed Door – name withheld, Darlinghurst, NSW
- Enough Hope for Two – name withheld, Avalon Beach, NSW.

Over the past eight years the writing competition has focused on a wide range of topics, including

adolescents, the elderly, perinatal depression and tackling mood disorders in the workplace, as well as mastering depression and bipolar disorder; resulting in the publication of five (soon to be six) books by distinguished publishing companies.

People have commented that most books on depression and bipolar disorder have been written from the outside looking in. Drawing together perceptions and personal accounts from those who have experienced such mood disorders – whether personally or in this case, as a Carer – allows us to reverse this approach.

'Inside out' views offer rich information that assists in breaking down the mysteries and management of mood disorders and these are particularly appreciated by general readers.



**Author and
Publications
Consultant,
Kerrie Evers**

Book awarded the 2012 Book of the Year prize

In 2012, the Institute launched a book titled 'Managing Depression Growing Older: A Guide for Professionals and Carers' by Kerrie Evers, Gordon Parker and Henry Brodaty (Allen & Unwin, Sydney). It is based on numerous research findings and underpins the Institute's focus on resilience and healthy ageing. The book has been awarded the 2012 Book of the Year prize by the Australasian Journal on Ageing.

Currently life expectancy at 65 years has increased by 10 years, to 18 or more additional years. This latest book is timely in showing that those growing older today have more choices than did any previous generation and that depression is not the invariable companion of those who are 65 years and older.

"More than 90 per cent of people can anticipate an older age that is, in the main, fruitful and satisfying," said Professor Helen Christensen, Executive Director of the Black Dog Institute, when launching the book this year. However, Professor Christensen cautioned, "We need to plan ahead to achieve an effective, financially secure, healthy, engaged and content older age."

"While there are the predictable challenges that come with age – changing roles, irrelevance, loneliness, health and financial problems – self-awareness and the support of others helps to chart a course through these shoals."

The aim of the book is to reduce stigma about depression and ageing and to give the 'invisible people' – the elderly with depression – and their carers a voice.

The book outlines the warning signs of mental illness, symptoms of 'clinical' depression and prominent risk factors. In addition, there is an extensive list of what an older person who is depressed can do to help themselves, including tapping into help networks such as general practitioners, local church and community groups and maintaining a formal written wellness plan.

The book was described by NSW Minister for Mental Health, Kevin Humphries, as an important tool in the battle against the stigma and discrimination that unfortunately still surrounds mental health.

Summary of the revised edition of 'Bipolar II Disorder: Modelling, Measuring and Managing'.

Second edition, 2012. Edited by Professor Gordon Parker and published by Cambridge University Press.

The lifetime risk of developing bipolar II disorder is five to seven per cent, yet the condition is often poorly detected. Mood elevation states are less extreme than in bipolar I disorder although the depressive episodes are usually severe. When correctly treated, the outcome is positive, but bipolar II is often poorly managed, resulting in a high suicide rate. This is the only academic and clinical management review focusing entirely on bipolar II, scrutinising history, epidemiology, burden and neurobiology and including an extensive clinical debate by international experts about effective management strategies.

In the revised edition, new chapters cover comorbidity, over-represented personality styles, illness 'trajectories' and distinguishing bipolar II from personality-based emotional dysregulation states. Evidence for different clinical management options is reviewed in detail, and two clinical management models are presented and then debated. This book is essential reading for all health professionals managing mood disorders and informative to patients seeking information about their condition and treatment options.

Developing Countries Program



Developing countries across the Asia-Pacific Region have limited mental health training for primary care providers, resulting in mood disorders being largely undiagnosed and untreated.

To help alleviate the problem, a Developing Countries Program was initiated in which the Black Dog Institute was able to share its expertise with senior health clinicians from these countries.

In 2008 the first group of 14 health professionals, from Sri Lanka, Fiji, Papua New Guinea and Solomon Islands, came to Sydney for an intensive training program.

The program has continued on a regular basis and in 2012 a group of 11 clinicians, from Fiji, Samoa, Solomon Islands, Tokelau, Tonga and the Maldives, brought the total to nearly 50 participants who have received training.

According to Associate Professor Vijaya Manicavasagar, the Black Dog Institute Project Director, the program is helping build capacity amongst local personnel by providing education about evidence-based high quality treatments for mood disorders and by training participants to train other health professionals.

Our thanks are extended to The Chris Molner Bequest, AusAid, the Ministries of Health in Pacific Island countries and the World Health Organisation Pacific Islands Mental Health Network (WHO PIMHnet) for their support.

EXERCISE YOUR MOOD

As part of the campaign to raise awareness for the Exercise your Mood in 2012, the Black Dog Institute was represented in two of the world's iconic open water relay swims.

On 21 July, a team travelled to Lake Tahoe in California to compete in the Trans Tahoe Relay swim run by the Olympic Club. The team consisted of Alexander Studzinski, Joey Pedraza, Peter Thiel, Codie Grimsey, Trent Grimsey, and Ridge Grimsey. The race attracted 183 teams this year. The Blackdog team led the race from the start, and won in the record time of 3 hours 11 minutes.

On 1 September, two teams competed in the Maui Channel Swim. The first team consisted of Codie Grimsey, Ridge Grimsey, Alexander Studzinski, Xavier Desharnais, Rhys Mainstone and Peter Thiel. This Black Dog team again led the race from the start to finish first in the record time of 2 hours 47 minutes.

The second team (pictured left to right) of Luke Morgan, Shelly Clarke, Millie Joseph, Elizabeth Sloane, Lachlan Benson and Peter Joseph also managed to finish the gruelling race.



Development and Fundraising



Community fundraisers spearheaded our efforts in 2012 to increase awareness about mood disorders and raise funds to help support the delivery of services to those in need.

No challenge seems too great. As well as annual community events like the City2Surf or the Blackmore's Running Festival, we have had fundraisers run a marathon in Antarctica and another across the Sahara, ride a horse from Braidwood in southern New South Wales to Melbourne and ride a rickshaw across Asia.

Behind these challenges are often the personal stories about battling with a mood disorder or trying to come to terms with the loss of a loved one through tragic circumstances.

Fundraising for the right cause and helping to raise awareness can be a healing experience. It is also a humbling experience for everyone involved with the Black Dog Institute as we hear these personal stories and see first-hand the impact on the families of those who suffer.

Following on are some of their stories:

The **2012 Black Dog Ride to the Red Centre** was a great success, with more than 400 riders

participating this year and \$255,745 raised for the Black Dog Institute.

Congratulations go out to ride founder Steve Andrews and his volunteer supporters, including State ride leaders across Australia who worked tirelessly to make the 2012 event a huge success. A very big thank you also to Channel Nine, and reporter Simon Bouda, who participated in the ride and was the highest individual fundraiser. The fantastic media coverage each morning by weatherman, Steve Jacobs, on the Today Show, and nightly reports on television news throughout the ride, really helped to increase the profile of this national event. We are pleased to have supported the growth of the Black Dog Ride over the past four years for the awareness it has helped to generate.

The **2012 Zoo2Zoo Bike Ride** is another annual community event that helps increase awareness in NSW each year. This year the Zoo2Zoo riders endured one of the toughest days in Zoo2Zoo history with snow, torrential rain and howling winds to combat along the way. Total funds raised were well over \$100,000 and warm thanks go out to the volunteer organisers Andrew McKay, Jim Scollon, Andrew Back



and Grant Hittman. Our gratitude also to Andy Hinks and the QBE Foundation for their continuing support.

Our Ambassador Ed Fernon competed this year in the Pentathlon at the London Olympics. His gruelling training regime in the months leading up to the Olympics and during the event would have been more than enough for most people. But on his return Ed was straight back into the saddle preparing for his epic horse ride from Braidwood to Melbourne following the **Legend of Archer**. Ed's efforts raised over \$50,000 for the Institute and created significant awareness and media coverage as he travelled along the bicentennial route through NSW and Victoria to Healesville.

The New York Marathon is an iconic international event and when the McFadden family approached us to run for the Black Dog Institute in memory of their father we were very pleased to be able to spread our wings to far shores. Their journey in helping to destigmatise the issue of depression and their bravery in talking about the impact of suicide to the media, as well as their amazing fundraising support was humbling to say the least. However, no one

could have imagined that such an iconic event would be cancelled at the last minute as a result of extreme weather conditions caused by hurricane Sandy. Fortunately, they still went ahead and ran a marathon together on the streets of New York, raising nearly \$30,000.

The **Josh Davies Memorial Golf Day** is an initiative of the Davies family in memory of their son Josh. This is their second annual event and it raised more than \$15,000 for the Black Dog Institute. They

Black Dog Institute Rural Project Manager, Christopher Rule (pictured on left in the orange singlet), led by example as a participant in the Blackmore's Running Festival. Black Dog Institute ambassador Michelle Bridges, for the City-2Surf (centre) with some of the Institute's other participants in the event. (Top Right) Former Miss Universe Australia, Rachel Finch, was our ambassador for the Yoga Aid Challenge. (Bottom right) Chairman, Peter Joseph and Executive Director, Professor Helen Christensen, happily accept a cheque from Steve Andrews (Black Dog Ride to the Red Centre)

have now established **The Jed Project** which aims to eradicate youth suicide, and we applaud their courage in speaking publicly about their loss to help others.

This year we welcomed the support of Michelle Bridges as our Ambassador in the **City2Surf** and Rachel Finch as our Ambassador in the international **Yoga Aid Challenge**. These combined events raise hundreds of thousands of dollars for the Institute each year as well as creating widespread awareness as our fundraisers reach out through their own networks to promote the reasons for their challenge. We are so appreciative of each and every individual who chooses to support us as well as the organisers of these huge public events.

The **Parramatta Eels** rugby league team chose to support the Black Dog Institute throughout their 2012 season, and players Ben and Nathan Smith have been wonderful Ambassadors helping, as role models in the community, to talk about depression and how to seek help through their association with the Institute.

This year we welcomed a number of new corporate partners to the Institute. **Juniper Networks** are supporting a Chair for our **BITE BACK** youth online program. **Veritas Event Management** has very generously produced dozens of new videos for use on our website to extend our eHealth offering. PR and Communications agency **MAGNUS** have again contributed significant pro bono support to assist us with delivering our messages to various media and corporate audiences over the last year. It is the support of generous companies such as these that help us to raise our profile and increase our fundraising capability and we thank them for their commitment in these difficult financial times.

Our ambassadors again gave willingly of their time to support the Black Dog Institute in 2012. Our special thanks is extended to Geoff Huegill (Olympian/swimmer), David Spindler (golf), Andrew Johns (rugby league), Brendan Capell (swimming), Libby Trickett

(Olympian/swimmer), John Konrads (Olympian/swimmer), Bridie O'Donnell (cycling), Ky Hurst (Olympian swimmer, ironman), Peter Thiel (swimmer), Stephanie Gilmore (surfing), Preston Campbell (rugby league), Lara Tamsett (athletics), Richard Harry (rugby union), Rachel Finch (celebrity yoga instructor), Michelle Bridges (author, exercise and fitness expert), Ben and Nathan Smith (rugby league), Ed Fernon (Olympian/modern pentathlete), and Federal politicians, Andrew Robb, Peter Dutton, Amanda Rushworth, Peter Wright, Christopher Pyne and Simon Crean.

There are many hundreds of people and organisations that support us each year – far too many to be named individually in this report. Without you, we would not be able to offer the valued services we provide, nor conduct leading-edge research. So THANK YOU once again for your much appreciated support.

**The future of fundraising is online!
And communicating through social
media channels is vital to the
success of any business, including
not-for-profits.**

**The Institute has invested in our
online capability this year with
many new improvements on our
website and opportunities for our
supporters to be involved.**

**If you haven't seen the changes,
please check them out on [www.
blackdoginstitute.org.au](http://www.blackdoginstitute.org.au) and help
us spread the 'e' word.**

Communications



Sharing our stories

In a country the size of Australia it just isn't possible for Black Dog Institute representatives to be everywhere at once. Rather than restricting our activities, we are increasingly turning to the media and online communities to spread the word.

Black Dog Institute in the news

The work of the Institute is regularly featured in media outlets across the country. From promotion of our regional education talks to the national launch of new clinical programs, we actively engage with journalists to ensure our messages are accurate and relevant.

There were a number of high profile media stories featuring Black Dog Institute research in 2012. Of particular note was the launch of the **myCompass** online self-help program which was reported on radio, TV and print across the country. The inaugural Black Dog Index, launched by Professor, Helen Christensen, was featured on the front page of The Australian and widely discussed on talkback and news radio. Professor Colleen Loo and her research into brain stimulation treatments for depression was also publicised nationally in high quality media outlets.

In addition to specific research stories, Black Dog Institute clinicians and researchers were regularly sought for expert comment. This is a direct reflection of the high regard in which they are held.

The activities of supporters and fundraisers were profiled widely in the media in 2012. The Black Dog Ride to the Red Centre received wonderful television coverage through the support of Channel 9, and Olympian Ed Fernon completed his fundraising Legend of Archer ride to much fanfare generated by multiple television, radio and print stories.

Research in plain English

Not everything that Black Dog Institute achieves makes it into the mainstream media. Institute researchers are continuously advancing our understanding by publishing findings in scientific journals, launching clinical trials or developing new management regimes.

To make sure our supporters are kept updated on all our achievements we have implemented a weekly research update that is shared via the website and social media. Written by experienced Black Dog Institute volunteer Kerrie Evers, these stories provide a 'Plain English' description of research outcomes and processes. Visit the research section of the Black Dog Institute website to stay up to date.

Pictured, Head of Communications and Media, Gayle McNaught



The Black Dog cyber community

As people spend more and more time online, we are expanding our digital media channels to ensure our supporters can interact with us and each other.

Our online presence has increased dramatically in 2012. Thousands of people are now following and sharing our social media updates, images and videos.

Social media is a wonderful way to quickly and effectively share everything from important health information, to personal stories and inspirational fundraising adventures. People can now join different online communities depending on their interests and use our social media channels to chat with other like-minded people. It also provides effective means to distribute up-to-the-minute research discoveries, policy changes and clinical opportunities to people across the country.

Anyone is welcome to join the conversation – we'd love to meet you!

[facebook.com/blackdoginst]

[twitter.com/blackdoginst]

[linkedin.com/company/black-dog-institute]

[pinterest.com/blackdoginst]

[youtube.com/blackdoginst]

The last year saw some changes to the Black Dog Institute communications team. After a decade of highly successful media and communications activity, Ian Dose left the Institute in early 2012 to pursue new challenges.

The new Head of Communications and Media, Gayle McNaught, brings considerable expertise in health and research communications gained from previous roles at the Garvan Institute, Westmead Hospital and the Juvenile Diabetes Research Foundation.

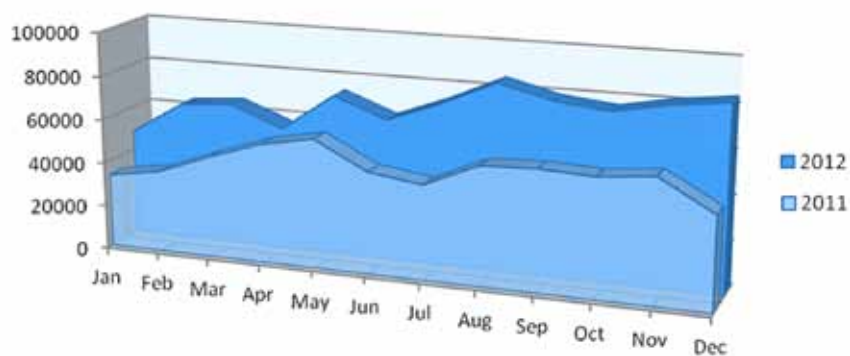
The Black Dog Institute Website

The Black Dog Institute website offers quality information and online tools to people seeking help for mood disorders. In 2012, 846,585 unique visitors accessed our website, an increase of 32 per cent from the previous year. While many were from around the world, 68 per cent of these visitors were from within Australia.

The self-tests for bipolar disorder and depression were the highest ranking pages, followed by the main content in the depression and bipolar sections.

Improvements were made to the research section of the site and visitors can now view individual profiles of our key researchers in the 'Meet our researchers' pages, with some containing video interviews.

Unique Visitors to the Black Dog Institute Website



The Black Dog Index

Measuring the mental health of Australians



A new measure of national mental health has been developed by the Black Dog Institute in response to international recognition that traditional economic-based measures do not sufficiently reflect a country's health.

The Black Dog Index aims to calculate our level of happiness and put a tally around how many of us are living with depression, anxiety and suicidal thoughts. Similar measures are formally collected in the UK and Canada.

In 2012, Newspoll contacted over 1200 adults from all walks of life around the country and asked them to provide a score out of 10 for a series of questions about their mental health and personal circumstances (including income, marital status, education and political views). The results were compiled into an overall 'Happiness' score out of 100 which can be measured over time and linked with other measures such as unemployment or mortgage interest rates.

According to Newspoll Chief, Martin O'Shannessey, the happiest people were older, married, tertiary educated and earning over \$90,000. Conversely, depression was connected strongly with divorce.

Black Dog Institute Director, Professor Helen Christensen, initiated the project with the aim of broadly identifying what factors are involved with people feeling happy or unhappy. As well as giving a snapshot of rates of mental illness, the index will provide much-needed information on how to more effectively improve overall mental health and reduce suicide rates.

"The good news is that the inaugural Black Dog Index score is quite high at 77. This means that on the whole we are quite a happy bunch of people," says Professor Christensen.

"Worryingly, the index also showed that four per cent of respondents were actively troubled by



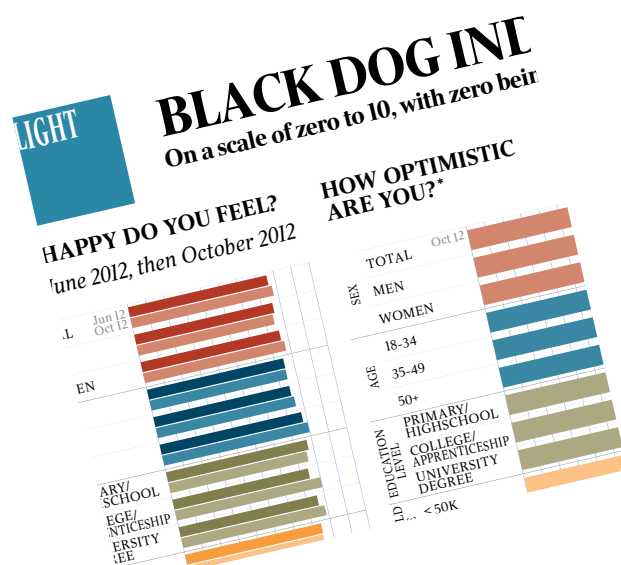
The Black Dog Index aims to calculate our level of happiness. If we are looking for a sign of optimism, this photograph (an entry in a recent Black Dog Institute photographic competition) can't help but bring a smile to your face.

suicidal thoughts. This translates to approximately half a million people across the country. With suicide now overtaking motor vehicle accidents as the major cause of death in young people, these are results we need to take very seriously.

"Traditionally, we have kept silent on suicide to minimise the risk of glorifying it. New evidence shows us that talking about suicide can be beneficial by encouraging people experiencing suicidal thoughts to seek treatment.

"It's my hope that new programs like the Black Dog Index will improve public awareness about suicide and help those people who feel life isn't worth living to contact Lifeline, their GP or a friend or family member to talk about it – because help is available."

The Black Dog Index will be conducted by Newspoll at regular intervals, with results reported in The Australian newspaper.



THE BLACK DOG INDEX



NEWSPOLL
WHEN THE ANSWER MATTERS

THE AUSTRALIAN

BLACK DOG 2012

[illegible]

Matthew Johnstone (pictured) has produced some wonderful videos for the World Health Organisation (WHO). These are being used worldwide today to raise awareness of depression. Search for them on the WHO YouTube channel and share them on your social media sites to show your support.

YouTube channel and share them on your social media sites to show your support.

YouTube channel and share them on your social media sites to show your support.

YouTube channel and share them on your social media sites to show your support.

YouTube channel and share them on your social media sites to show your support.

The Black Dog Institute International Lectures

The Uses and Misuses of Psychiatric Diagnosis – Professor Allen Frances MD

Professor Allen Frances, prior Chair of the DSM-IV Task Force and Professor Emeritus, Duke University, cogently presented his views on the problems of the latest update of the DSM (Diagnostic and Statistical Manual of Mental Disorders), DSM 5, and the very real concerns evidenced by fellow professionals and members of the public. His lecture, delivered in the Institute's Robert Dean lecture theatre on June 20, was filled to overflowing.

Dr Frances first traced the antecedents of psychiatry to more modern times and through to the DSM. From interpreting which spiritual entity was angry and what was needed to appease it, management of disturbed people moved from more aggressive interventions to focus on what was wrong with the individual and how best to treat the illness.

Early to mid 20th Century saw a growing need to collect uniform statistics about mental disorder and for clinicians to be able to 'read off the same page'. This led to the development in America of a psychi-

atric 'manual' for categorising mental disorders, the DSM-I. In Europe, the International Classification of Diseases (ICD) also had a section on mental disorders.

However, by the 1980s this psychiatric classification system was becoming irrelevant. Inter-rater reliability for each diagnostic category was very low. The DSM task force partially addressed this, and also developed semi-structured interviews. But the definitions in the DSM are still theoretical and open to multiple interpretations.

Particularly concerning in the DSM 5 are the 'subsyndromal' disorders; confusion about whether to focus on symptoms or on behaviour; the misuse of the Manual (for example, its diagnoses are 'built into' judgments for US healthcare insurance); and judgments in the forensic area. Unprecedented numbers of adults and children are being treated for increasing numbers of possible psychiatric disorders, and there are real concerns about the accuracy of the data in the DSM 5 itself.



Too wired to sleep? Don't switch off, switch on: A New Research Trial by Black Dog Institute Researchers is Using the Internet to Improve Sleep

Associate Professor Lee Ritterband, Director of the Behavioral Health and Technology Centre at the University of Virginia, presented his research on using the internet to treat insomnia.

He is collaborating with the Black Dog Institute on the NHMRC-funded 'Good Night Study' that aims to use internet-based insomnia interventions to reduce depression and improve wellbeing. The program which he and others developed, called 'SHUTi', enables users to identify and monitor their sleep patterns and to learn how to overcome insomnia.

Nearly everyone has experienced poor sleep at some stage in their lives and it's common to suffer short periods of insomnia during illness, periods of stress or travel.

Unfortunately, up to one third of all Australians report ongoing problems with either falling asleep or staying asleep, and this proportion rises significantly for people with depression and anxiety.

Treatment for poor sleep is often based around medication, a solution that can only be used short term. Recent research has proven that simple cognitive behavioural techniques are a highly effective

alternative. These techniques focus on identifying and changing the behaviours and patterns of thinking that interfere with good sleep.

Traditionally, these techniques have only been available via face-to-face clinical sessions but the 'Good Night Study' led by Professor Helen Christensen at the Black Dog Institute is making it accessible to all by taking them online.

The 'Good Night Study' is one of the first in the world to investigate an online psychological intervention into insomnia and depression.

The study uses a specialist internet program developed by researchers at the University of Virginia, USA. 'SHUTi' enables users to identify and monitor their sleep patterns whilst gently leading them through a series of learning modules.

According to Associate Professor Ritterband, preliminary results have already shown SHUTi to be effective and potentially able to serve as a front line weapon in the battle against insomnia.

Pictured, Associate Professor Lee Ritterband

Our People

Black Dog Institute Board of Directors

Mr Peter Joseph, AM, BComm, MBA
Chairman of the Black Dog Institute.

Also Chair, St James Ethics Centre and The Health-Science Alliance. Director, Advisory Council, Emergency Architects Australia. Former Chairman of Dominion Mining Limited, the GPT Group and St Vincents and Mater Health Sydney.

Professor Helen Christensen
BA (Hons) Syd, M Psychol, PhD, FASSA, MAPS (Appointed 23 January 2012)
Executive Director of the Black Dog Institute.

Also Professor of Mental Health, UNSW; NHMRC Senior Principal Research Fellow; Member NHMRC Academy; President Australasian Society for Psychiatric Research; Treasurer, International Society for Research on Internet Interventions; Member, Australian Committee for e-Mental Health; Emeritus Professor, The Australian National University.

Mr Douglas Snedden, BEc
Mr Snedden is Chair of Odyssey House NSW; board member of Transfield Services Limited, Hillgrove Resources Limited, Accenture Foundation, and St James Ethics Centre.

Mr James Blomfield, MA, MBA
Mr Blomfield is a Strategy Manager at National Australia Bank.

Mr Nicholas Cowdery AM, QC, BA, LLB, LLD (Hons) (Resigned 2012)
Mr Cowdery is the former Director of Public Prosecutions for New South Wales. He is currently a visiting Professor of Law, and a consultant.

Ms Melanie Kiely (Kneale), BBus Sci (Hons) GAICD

Ms Kiely is Executive General Manager – Health and Wellness at HBF, management consultant, director and immediate past Chief Operating and Technology Officer at nib Health funds and is a graduate of the Australian Institute of Company Directors. She is a former non-executive Director of the Hunter United Credit Union and Chair of the Audit Committee and a Director of Hybrid Strategies Pty Ltd. She is also a former Board Member of MBFin2life and a NSW Council Member of Save the Children. Previously she was Group

Executive of Strategy at the MBF Group and a partner at Accenture.

Mr Craig Knowles, FAPI, CPV
The Hon Craig Knowles holds a number of advisory roles, statutory appointments, and commercial and not-for-profit directorships: Chair, Murray Darling Basin Authority; Chair of the Australian Centre for Photography, President of the Asthma Foundation NSW and the Children's Medical Research Institute (CMRI), Member, Central Sydney Planning Committee; Trustee of the Hoc Mai Foundation, Fellow of the Australian Property Institute. Previously a senior Minister in the New South Wales Government for 10 years: portfolios included Health, Infrastructure and Planning, Housing, Natural Resources, Forests, and Lands.

Professor Philip Mitchell, AM, MB BS (Hons I), MD, FRANZCP, FRCPsych
Professor Mitchell is a Scientia Professor, and Head of the School of Psychiatry at the University of New South Wales; Convenor of Brain Sciences UNSW; Consultant Psychiatrist, Prince of Wales Hospital; Director, Bipolar Disorder Clinic, Black Dog Institute; Guest Professor, Shanghai Jiaotong University; Member of the NHMRC Academy; and Board Member of the Anika Foundation for Adolescent Depression and Suicide.

Associate Professor Meg Smith
OAM, BA (Hons), M.Psychol, PhD, FAPS (Resigned 2012)

Professor Smith was an adjunct community psychologist in the School of Social Sciences at the University of Western Sydney. She is President of the Mental Health Association, NSW, and a community member of the Mental Health Review Tribunal and the Guardianship Tribunal.

Dr Timothy Smyth, MB, BS, LLB, MBA
Dr Smyth is a consultant, Special Counsel, Holman Webb lawyers; and Chair, Eastern Sydney Medicare Local. Formerly, he was Deputy Director-General, NSW Ministry of Health and has over 25 years experience across the NSW Health system. Other former positions: Partner, DLA Phillips Fox lawyers; Director, Australian Commission on Safety and Quality in Health Care; and Chairman, IPG Holdings Ltd; and International Parking Group Pty Ltd.

Mrs Carol Berg, BMus, MM

Mrs Berg is Chairman of the Board of The Marmalade Foundation Inc. She is Vice President (immediate past President), National Choral Association (NSW/ACT Branch) and past Director of the Board of the Bundanon Trust.

Public Officer, Company Secretary and General Manager

William Bonney MMgt FAICD

Senior Management and Administrative Staff

Finance Controller
Steven Franks

Finance Officer
Maria Kinantra

Finance Support Officer
Jeannie Higgins

Head, Communications and Media
Gayle McNaught

Digital Marketing Manager
Melinda Zanello (resigned 2012)

Head, Development and Fundraising
Vicki Miller (resigned 2012)

Suzie Graham (started 4 February 2013)

Project Manager, Events and Fundraising
Fleur Mortimer

Creative Director
Matthew Johnstone

Publications Consultant
Kerrie Evers

Annual Report Editor
Ian Dose

Centre Manager
Christine Boyd (resigned 2012)
Marian Spencer (started 2 April 2013)

Receptionist
Pauline Trantalis

Domestic Services
Teresa Silva





Emily Selmon



Fleur Mortimer



Luke Egan



Katherine Petrie

PROJECT AREAS

Research Team

Director, Research

Professor Helen Christensen
BA (Hons) Syd, M Psychol, PhD,
FASSA, MAPS

Executive Assistant (Professor Christensen and William Bonney)

Emily Selmon
Anne Madden (resigned, 2012)

Personal Assistant (Professor Parker)

Karlyn Greenfields

Research Manager

Kristy Delmas

Research Investigators

Professor Marie-Paule Austin

Associate Professor Michael
Breakspear

Scientia Professor Henry Brodaty
AO

Associate Professor Ute Vollmer-
Conna

Associate Professor Brian Draper

Mr Dusan Hadzi-Pavlovic

Dr Samuel Harvey

Professor Colleen Loo

Associate Professor Vijaya
Manicavasagar

Scientia Professor Philip Mitchell
AM

Scientia Professor Gordon Parker
AO

Associate Professor Judy
Proudfoot

Scientia Professor Perminder
Sachdev AM

Professor Kay Wilhelm AM

Hospital Scientist

Dusan Hadzi-Pavlovic

Senior Lecturer, School of Psychiatry, ARC Future Fellow

Dr Melissa Green

Black Dog Institute Professorial Fellows

(since November 2012)

Professor Maree Teesson

Professor Richard Bryant

Visiting Fellows

Dr Philip Batterham

Dr Alison Calear

Dr Louise Farrer

Dr Bregje Van Spijker

Brain Sciences Coordinator

Dr Karen Kool

Black Dog Institute Affiliates

Mr Mathew McFadden

Research Fellows

Dr Tara Donker

Post Doctoral Fellows

Dr Tjeerd Boonstra

Dr Luke Egan

Dr Donel Martin

Dr Tania Perich

Dr Gloria Roberts

Dr Fiona Shand

Dr Alex Wilde

PhD Students

Ms Justine Corry

Ms Julie Crabtree

Ms Kathryn Fletcher

Mr Stewart Heitmann

Ms Kerrie-Anne Ho

Mr Matthew Hyett

Mr Muhsin Karim

Dr Angela Langdon

Mr Saeid Mehrkanoon

Mr Michael Player

Ms Nicole Reilly

Ms Jessica Rowland

Ms Alana Shepherd

Ms Mona Taouk

Ms Kishani Townshend

Research Students

Ms Megan Boyd

Mr Rowan Burckhardt

Mr Timothy Ghan

Ms Inika Gillis

Ms Leah Girshkin

Mr Mark Schira

Mr Chiel van de Steeg

Senior Research Officer

Ms Kathryn Fletcher

Research Officers

Dr Angelo Alonzo

Ms Bettina Christl

Dr Janine Clarke

Ms Clare McCormack

Dr Tania Perich

Research Associates

Ms Justine Corry

Ms Sadhbh Joyce

Dr Janan Karatas

Ms Nicole Reilly

Research Assistants

Ms Mary-Rose Birch

Dr Heather Brothie

Mr Rowan Burckhardt

Ms Michaela Davies

Mr Andrew Frankland

Ms Inika Gillis

Ms Leah Girshkin

Dr Rebecca Graham

Dr Bronwyn Hegarty

Ms Deserae Horswood

Mr Matthew Hyett

Ms Ameika Johnson (left 2012)

Ms Cassandra Joslyn

Ms Phoebe Lau

Ms Stacey McCraw

Mr Matthew Modini

Ms Amelia Paterson

Ms Katherine Petrie

Mr Michael Player

Ms Tamara Powell (left 2012)

Mr Yann Guide

Ms Rebecca Ridani

Ms Poppy Rourke (left 2012)

Ms Jessica Rowland

Ms Leona Tan

Mr Nick Vella

Ms Meg Wang

Ms Alexis Whitton

Mr Adam Wright

Data Entry Clerk

Penny Sawdy

Community Programs

Manager, Community Programs

Michael Sluis

Program Manager, Volunteers

Sarah Connor

Project Manager, Community Education

Kate Hille

Project Manager, Youth Initiatives

Liza Culleney (on leave)

Mei Li Quah

Project Manager, Rural Initiatives

Christopher Rule

Education Project Officer

Sharnelle Cowan

Program Facilitators, Workplace Programs

Dr Caryl Barnes

Matthew Johnstone

Dr Kris Kafer

Anthony Merritt

Claire Nabke-Hatton

Matthew Stanton

Wayne Wigham

Angela Vrankic

Clinical Services

Clinical Director

Dr Paul Friend

Medical Secretaries

Orla Dempsey

Hayley Tierney

Consultant Psychiatrists

Dr Caryl Barnes

Dr Melissa Barrett (on leave)

Dr Shulamit Futeran

Dr Michael Hong

Professor Colleen Loo

Scientia Professor Philip Mitchell
AM

Scientia Professor Gordon Parker
AO

Dr Anne-Marie Rees (on leave)

Dr Howe Synnott

Clinical Administration

Secretary

Louise Dyer

Clinical Psychologists

David Gilfillan (resigned 2012)

Liz Sheppard (resigned 2012)

Professional Services

Director, Psychological Services

Associate Professor Vijaya Manicavasagar

Manager, Professional Education and Training

Katherine Dabich (on leave)

Mood Assessment Program (MAP)

Dr Jan Orman

Mood Assessment Program Administrator

Louise Dyer

Education Project Officers

Katie Denton (General Practitioner Program) (on leave)

Aimee Gayed (Psychology Program) (on leave)

Chilin Gieng

Education Consultants – Clinical

Dr Caryl Barnes (Workplace Programs)

Dr Vered Gordon (General Practice Program Developer)

Dr Jan Orman (General Practitioner Services Consultant)

Program Facilitators, Professional Education Programs

Julie Allan

Dr Anne Camac

Dr Sarah Edelman

David Gilfillan

Dr Guy Gordon

Dr Vered Gordon

Dr Margaret Gottlieb

Dr Kristine Kafer

Dr Carol Kefford

Associate Professor Vijaya

Manicavasagar

Anthony Merritt

Dr Jan Orman

Dr Joseph Rey

Elizabeth Sheppard

Dr Julian Short

Jodie Wassner

Dr Sarah Weaver

Developing Countries Project

Project Leader

Associate Professor Vijaya Manicavasagar

Project Manager

Dr Ilse Blignault

Participant Liaison Officers

Marguerite Pepper

Kate Cashel

eHEALTH

Director

Associate Professor Judy Proudfoot

Technical Support Analyst

Cesar Anonuevo

Web and Communications Officer

Sako Hampartzoumian

Leah Greenfield

BITE BACK Youth Website Project Leader

Associate Professor Vijaya Manicavasagar

Project Manager

Jacqui Wallace

Project Officers

Rowan Burckhardt

Deserae Horswood

Nic Newling

Sarah Versitano

Volunteers

Rebecca Acton

Raja Ahluwalia

Marissa Barnes

Amanda Barter

Allyssa Beasley

Maryanne Beggs

Lisa Bell

Merida Bell

Wendy Birrell

Jessica Boh

Megan Boyd

Judi Bray-Ferguson

Jessica Brown

John Canning

Mary Canning

Gary Carey

Brent Carryer

Jenni Chong Sun

Julia Collins

Bernadette Connor

Careena Cook

Frances Cracknell

Tracey Cremming

Craig Curtis

Ingrid De Leede-Smith

Kees de Leeuw

Beatrice Dowsett

Zoya D'Souza

Sally Edwards

Sarah Edwards

Amy Eggleton

Melissa Ellis

Kerrie Eysers

Melanie Faithfull

Michael Fajardo

Carolyn Farrugia

Yang Feng

Lewis Ford

Marion Fraser

Dianne Gaddin

Nyree Gale

Irene Gallagher

Gerd Garrard

Tanya Glazer

Leah Greengarten

Lee Hagan

David Hales

Angela Hancock

Karen Heagney

Tim Heffernan

Kylie Henman

Michael Henson

Wendy Highfield

Michael Hines

Joy Ho

Kim Holmes

Erin Howard-Gillis

Amber Hu

Peter Hurley

Simone Isemann

Trudy Jenkins

Warren Jones

Phil Cairns

Travis King

Belinda Kirley

Claire Koski

Paul Lamphee

Natalie Lantry

Linda Leard

Sarah L'Huillier

David Liddle

Christie Loch

Christine Lopasinski

Phoebe O'Carrigan

Cheryl O'Grady

Liezl Maritz

Jasmine Marosvary

Brad McCarthy

Casey McDonald

Mark McGrath

Katherine McGuiggan

Philippa Moore

Judith Myers

Kathleen Naish

Janet Namey

Lucinda Napper

Stevan Nikolin

Sue Phelps

Katherine Petrie

John Polar

Judy Polgar

Keira Pride

Anne Riches

Dominique Robert-Hendren

Margherita Roser

Susie Rust

Jamie Salton

Adam Schwartz

Anne Schwartz

Dale Skinner

Ben Smith

Nathan Smith

Shirley Sneddon

Carly Sperring

David Spindler

Julia Stadum

Jason Starling

Yuan Yue Sun

Jeanette Svehla

Rodney Thompson

Dominic Tran

Isabelle Truong Davis

Nicholas Valentine

Gabrielle Waters-McKay

Amy Watts

Laura Watts

Stephanie Webster

Stephanie Williams

Wayne Wigham

Andrew Wilkinson

Robyn Winwood-Smith

Cheryl Wood

Kimberley Wood

Rachel Worsley

Jo Xu

Britig-te Zonta



Matthew Modini



Pauline Trantalis



Kathryn Fletcher



Tara Donker

Special Acknowledgements



Christine Boyd

Few people contributed as much as Christine Boyd to the growth of the Black Dog Institute.

Christine resigned in September this year after spending a quarter of a century working in the mental health field, including the past 11 years at the Black Dog Institute as Facilities Manager.

Her career started in January 1987 at the Mood Disorders Unit (the Institute's predecessor) at Prince Henry Hospital. From typewriters to computers, there wouldn't have been too many people at the Unit and the Institute, who didn't receive a helping hand from Christine as new technology entered our lives.

It was also her influence over the years that shaped the way visitors to the Institute were greeted in such a friendly and professional manner in reception and at the clinic.

While we will miss her guidance and wisdom and administrative capacity, all our best wishes go out to her as she resets her compass to new endeavours.



Vicki Miller

Vicki spent nearly four years as the Corporate Relations and Development Manager in a role that inspired so many people to generously support the work of the Black Dog Institute.

Her energetic drive was responsible for broadening the Institute's fundraising programs as well as building relationships and partnerships with our donors.

Vicki believed the most humbling experience had been dealing with families who had lost someone to suicide and come to the Institute to raise money to help make a difference.

Being a southern highlander and travelling to the Black Dog Institute to the city from Bowral can be an arduous daily grind, and after making such a valuable contribution, Vicki has decided to find new challenges closer to home.

Vicki leaves us with her heartfelt message: 'I have enjoyed working with so many passionate and inspiring people at the Institute and will always consider my time there as the highlight of my career.'



David Gilfillan and Liz Sheppard

David's principal role was to develop the psychological clinical services offered by the Black Dog Institute.

He joined the Institute in 2006 and a year later he became the first psychologist to work in the Depression Clinic. At first this involved individual work but later expanded to include bipolar disorder wellbeing groups which proved remarkably successful.

In addition, over the past few years David, as a senior clinical psychologist, has also facilitated training programs for psychologists and health workers as well as being involved in other general training programs undertaken by the Institute.

David has stepped down from his full-time role at the Institute but will continue to be associated with the delivery of the Institute's professional education and training initiatives.

Liz Sheppard, another outstanding clinical psychologist, has strongly supported David over the past couple of years. Liz has resigned her full-time position but, like David, is expected to undertake other part-time work for the Institute in 2013.

Both wished to acknowledge that a highlight of their time at the Black Dog Institute was the opportunity to work with leading professionals in the mood disorders field, and to interact with clients from whom they have learnt much.

UNSW School of Psychiatry 50th Anniversary



We are fortunate to have the Head of the UNSW School of Psychiatry, Professor Philip Mitchell, on site.

Many of the School's teaching sessions are located at the Institute, along with Professor Mitchell's research teams. In 2012, the School celebrated its 50th Anniversary.

The Foundation Head of the School of Psychiatry was Professor Leslie Kiloh. There have only been two others, Professor Gordon Parker, and the current Head, Professor Philip Mitchell.

UNSW School of Psychiatry Executive

1st Row (L-R): Professor Helen Christensen, Mrs Jennifer Robinson, Scientia Professor Henry Brodaty, Scientia Professor Gordon Parker, Scientia Professor Philip Mitchell (Head of School), Professor Gavin Andrews, Professor Vaughan Carr, Professor Kay Wilhelm

2nd Row (L-R): A/Professor Kimberlie Dean, Professor Colleen Loo, Professor Florence Levy, Dr Kristin Laurens, Dr Katerina Zavitsanou, Dr Melissa Green, Associate Professor Uté Vollmer-Conna, Professor Rhashel Lenroot, Associate Professor Vijaya Manicavasagar, Associate Professor Judy Proudfoot

3rd Row (L-R): Scientia Professor Perminder Sachdev, Mr Dusan Hadzi-Pavlovic, Associate Professor Philip Ward, Associate Professor Zachary Steel, Dr Samuel Harvey, Dr Michael Valenzuela, Associate Professor Julian Troller, Associate Professor Kuldip Sidhu

Absent: Professor Marie-Paule Austin, Professor Brian Draper, Professor Valsa Eapen, Professor Derrick Silove, Professor Cynthia Shannon-Weickert, Dr Thomas Weickert

Below: Professor Helen Christensen with Supporters Guy and Eve Sheppard



Community Fundraising

The Institute is a Deductible Gift Recipient. Gifts of \$2 and over are tax deductible and an official receipt will be issued. Donations can be made online by credit card or EFT.

Team Black Dog is a movement of people like you, rallying together to raise funds and awareness for the Black Dog Institute. By giving your time, money or influence you can make a real difference to the lives of those living with mental illness.

The aim of Team Black Dog is to build a powerful and passionate community raising funds and awareness about mood disorders. All funds are directed to the diagnosis, treatment and prevention of mood disorders such as depression and bipolar disorder.

Join us now by:

1. Creating your own fundraising event
2. Joining an existing community fitness or challenge event
3. Setting up a 'Forget me not fund' in memory of someone you love
4. Making a financial donation by supporting a community fundraiser.

Financial Report

The Income Statement and Balance Sheet from the Institute's Annual Financial Report for the year ended 30 June 2012 is set out below.

Black Dog Institute 30 June 2012

Statement of comprehensive income for the year ended 30 June 2012		
	30-June-2012	30-June-2011
Recurring grant from NSW Department of Health	1,461,300	1,425,600
Non-recurring grant from NSW Health	30,000	
Non-recurring grant from NSW Science and Medical Research	825,092	664,160
Non-recurring grant from Commonwealth - Mobile Tracking System	869,478	576,403
Non-recurring grant from Commonwealth - Strategic Mental Health	--	500,000
AusAid Developing Countries Grant	103,173	(1,756)
Federal grant from National Health and Medicare Research	40,419	--
HeadStrong Program Grant	165,000	--
Income from Higher Education Research Data Collection	665,523	--
Donations	1,360,413	1,454,876
Facility fees	472,569	384,725
Education and training fees	400,956	343,033
Revenue from fundraising events	148,430	73,435
Other revenue	127,107	125,878
Revenue	6,669,460	5,546,354
Employee benefits expense	(2,482,678)	(2,258,892)
Depreciation and amortisation expense	(254,537)	(253,508)
Education and training	(409,375)	(454,462)
Professional fees	(2,238,387)	(2,962,742)
Expenses related to fundraising event	(142,772)	(43,560)
Other expenses	(1,279,125)	(1,230,780)
(Deficit)/Surplus before income tax	(137,414)	(1,657,590)
Income tax expense	--	--
(Deficit)/surplus for the period	(137,414)	(1,657,590)
Other comprehensive income	--	--
Total comprehensive income for the year	(137,414)	(1,657,590)

Black Dog Institute 30 June 2012

Statement of financial position		
	30-June-2012	30-June-2011
ASSETS		
Cash and cash equivalents	1,218,546	1,598,779
Trade and other receivables	883,504	749,873
Total Current Assets	2,102,050	2,348,652
Non-current Assets		
Property, plant and equipment	3,613,059	3,814,481
Trade and other receivables	172,000	--
Total Non-current Assets	3,785,059	3,814,481
TOTAL ASSETS	5,887,109	6,163,133
LIABILITIES		
Current liabilities		
Trade and other payables	365,572	504,182
Total Current Liabilities	365,572	504,182
TOTAL LIABILITIES	365,572	504,182
NET ASSETS	5,521,537	5,658,951
EQUITY		
Retained earnings	5,521,537	5,658,951
TOTAL EQUITY	5,521,537	5,658,951

A copy of the complete Annual Financial Report is available on application. Requests for further information should be directed to the Institute's General Manager. The full financial report is posted on the Institute's website: www.blackdoginstitute.org.au

The information shown relates to the Institute's company accounts and does not include additional funds made available for research through collaborative arrangements with other organisations, including UNSW. Such details are provided under 'Research Funding'.

The Institute and Pharmaceutical Companies

The Institute's policy concerning pharmaceutical companies is outlined on our website www.blackdoginstitute.org.au

The Black Dog Institute Board continues to endorse the Institute operating within ethical guidelines formulated by Australian professional and regulatory organisations, as well as the requirements associated when its specialists or other staff work with pharmaceutical companies.

The Institute lists below the national and international appointments and positions held by its medical staff on pharmaceutical company Advisory Boards, and seeks to maximise the diversity of these appointments. A list of the Institute's sponsorships is also available on the website.

The Black Dog Institute keeps its policy on relations with pharmaceutical companies under constant review and welcomes comment.

Pharmaceutical company advisory board appointments

Professor Marie-Paule AUSTIN	\$3000 contribution from Pfizer to fund the St John of God Perinatal Mental Health Seminar, November 2012.
Professor Henry BRODATY	Consultant: Pfizer, Novartis, Lundbeck, Janssen, Merck, Baxter, Lilly. Investigator on drug trial for Alzheimer's disease: Sanofi, Lilly, Servier.
Professor Gordon PARKER	Member of Lundbeck National Advisory Board. Advisor to Servier Pharmaceuticals. Speaker for meetings sponsored by Eli Lilly, Astra-Zeneca, Lundbeck, GlaxoSmithKline, Pfizer and Servier.



Research Funding

New research funding for Black Dog Institute

A highlight this year was Black Dog Institute researchers receiving prestigious NHMRC (National Health and Medical Research Council) projects grants for new research into depression, suicidal thoughts, ageing and schizophrenia.

This latest NHMRC funding was awarded to Professors Helen Christensen, Colleen Loo, Perminder Sachdev and Dr Melissa Green to support new research starting in 2013. Visiting Black Dog Fellow Dr Philip Batterham has also received funding for work being undertaken jointly at the Black Dog Institute and the Australian National University.

NHMRC Project Grants are reviewed by scientific peers and awarded according to the quality and impact of the research being undertaken. The new research being conducted at Black Dog will enhance our understanding of the brain and also improve our ability to treat and prevent mental health conditions in the community. These successful grants are listed below.

Reducing suicide ideation: a randomised controlled trial of a novel web intervention.

Professor Helen Christensen, Dr Bregje van Spijker, Professor Andrew MacKinnon, Dr Alison Cleave, Dr Philip Batterham

An MRI study of emotional processing deficits in childhood.

Professor Rhoshel Lenroot, Professor Mark Dadds, Dr John Brennan, Dr David Hawes, Dr Melissa Green, Dr Kristin Laurens

Epistatic genetic effects on neuroanatomical subtypes of schizophrenia.

Dr Melissa Green, Dr Murray Cairns, Dr Kristin Laurens, Professor Vaughan Carr

Electrical Stimulation with a 'Random Noise' Pattern: A New Approach for the Treatment of Depression.

Professor Colleen Loo, Professor Philip Mitchell, Associate Professor Janet Taylor

The Older Australian Twins Study (OATS) of healthy brain ageing and age-related neurocognitive disorders.

Professor Perminder Sachdev, Dr Margaret Wright,

Professor David Ames, Associate Professor Julian Trollor, Dr Wei Wen, Professor Bernhard Baune, Ms Teresa Lee, Dr John Crawford

Development and population-based validation of hierarchical adaptive mental health screeners.

Dr Philip Batterham, Dr Matthew Sunderland, Dr Natacha Carragher, Dr Alison Cleave

In collaboration with other organisations, the Institute undertakes a wide variety of research activities as outlined below (Institute staff and affiliates are shown in bold)

Grant Holders	Austin , Reilly, Loxton, Chojenta, Milgrom
Granting Body	Bupa Foundation Health Award
Study	Psychosocial assessment in the perinatal period: Does it improve maternal health outcomes?
Duration	2010-2012 (\$248,075)
Grant Holders	Austin , Sullivan, Highet, Morgan, Mihalopoulos, Croft
Granting Body	NHMRC Linkage grant with beyondblue
Project	The Australian perinatal mental health reforms: Using population data to evaluate their impact on service utilisation and related cost-effectiveness
Duration	2012-2014 (\$1,009,140)
Grant Holders	Gallbally, Lewis, Buist, Austin
Granting Body	beyondblue National Priority Driven Research
Project	Maternal and infant outcomes following antidepressants exposure in pregnancy
Duration	2012-2014 (\$216,000)
Grant Holders	King, Kildea, Austin
Granting Body	Canadian Institutes of Health Research
Project	QF2011: The effects of the Queensland flood on pregnant women, their pregnancies, and their children's early development
Duration	October 2011-2015 (1,790,000)
Grant Holders	McMahon, Austin , Jones, Rapee, Donald, Grant
Granting Body	NHMRC Project Grant
Study	Maternal anxiety in pregnancy and infant bio-behavioural regulation: Testing the foetal programming hypothesis
Duration	2010-2012 (\$556,650)
Grant Holders	Kingston, Austin , Biringer, Chaput, Hegadoren, Lasiuk, MacQueen, McDonald, McGrath, Schopflocher, Sword, Watts
Granting Body	Norliern Foundation
Study	Integrated maternal psychosocial assessment to care trial pilot (IMPACT-Pilot)
Duration	2012-2013 (\$124,996)
Grant Holders	Kingston, Austin , Biringer, Heaman, Hegadoren, Higgenbottom, Lasiuk, S. McDonald, S.D. McDonald, Sword, Watts
Granting Body	Alberta University
Study	Barriers and facilitators of psychosocial assessment in pregnant and postpartum women and their healthcare providers in Alberta.
Duration	2012-2013 (\$50,000)

Grant Holders	Kingston, Austin , Biringier, Heaman, Hegadoren, Higgenbottom, Lasiuk, S. McDonald, S.D. McDonald, Sword, Watts
Granting Body	Alberta University
Study	Development and Testing of a Survey of Barriers and Facilitators of Psychosocial Assessment in Pregnant and Postpartum Women and their Healthcare Providers.
Duration	2012-2013 (\$15,000)
Grant Holder	Breakspear plus other Chief Investigators
Granting Body	James F McDonnell Collaborative Gift
Study	Brain Network Recovery Group
Duration	2011-2016 (\$3 million)
Grant Holder	Breakspear plus other Chief Investigators
Granting Body	Australian Research Council
Study	Optimizing autonomous system control with brain-like hierarchical control systems
Duration	2007-2012 (\$3.3 million)
Grant Holders	Brodaty , Crawford, Lee, Trollor
Granting Body	Gold Star Award, UNSW
Study	The Older Australian Twins Study (OATS) of healthy ageing and age-related neurocognitive disorders
Duration	2012 (\$40,000)
Grant Holders	Brodaty , Ames
Granting Body	CSIRO Prevention Flagship
Study	A tale of three cities: Comparison of two epidemiological studies
Duration	2012-2013 (\$120,000)
Grant Holders	Whiteford, Degenhardt, Irkis, Vos, Eagar, Mihalopoulos, Andrews, Head, Gunn, Hall (chief investigators), Brodaty (associate investigator)
Granting Body	NHRMC Centres of Research Excellence (CRE) Grant
Study	Evidence-based mental health planning: Translating evidence into policy and services
Duration	2012-2017 (\$2,442,370)
Grant Holders	Christensen
Granting Body	NHMRC Centre for Research Excellence (CRE)
Study	Improving suicide prevention in Australia through better implementation of effective interventions, improved risk identification and evidence informed policy
Duration	2012-2017 (\$2,490,060)
Grant Holders	Christensen
Granting Body	DOHA
Study	One-off funding for a mobile phone application to prevent suicide in Indigenous communities
Duration	2011-2012 and continuing (\$225,000)
Grant Holders	Christensen
Granting Body	NHMRC
Study	Uncoupled SPRF Research Fellowship
Duration	2012-2013 (\$306,500)
Grant Holders	Christensen
Granting Body	UNSW Brain Sciences Seed Funding 2013
Study	Funding for Visit to BDI by Dr Annette Beautrais, University of Auckland, New Zealand
Duration	2012-2013 (\$7,500)
Grant Holders	Christensen
Granting Body	NHMRC capacity building grant
Study	Translating population-based mental health and ageing research into evidence-based prevention and policy
Duration	2009-2013 (\$267,264)
Grant Holders	Hickie, Christensen , Naismith, MacKinnon, Walker, Banati, Norrie, Amminger, Bourne
Granting Body	Bupa Health Foundation (formally the MBF Foundation) Grants Program
Study	The Beyond Ageing Project: Phase 2
Duration	2012-2013 (\$448,634)
Grant Holders	Hickie, Davenport, Luscombe (USyd); Christensen , Batterham , Shand, Egan, Petrie (UNSW)
Granting Body	YAW-CRC National Survey 1 (2011-2012)
Study	National Survey 1: Young and Well: young people's mental health and well being and use of information and communication technology
Duration	2012-2013 (\$427,619)

Grant Holders	Glozier, Christensen , Griffiths, Naismith, Hickie, Ritterband
Granting Body	beyondblue National Priority Driven Research Program
Study	An RCT of the efficacy of adjunctive internet based CBTi in treating depression and anxiety in older men (SOMNA)
Duration	2012-2014 (\$391,364)
Grant Holders	Hickie, Glozier, Naismith, Christensen , Neal
Granting Body	The Heart Foundation and beyondblue; Cardiovascular Disease and Depression Strategic Research Program
Study	An RCT of a web-based intervention to improve depression, cognitive function and adherence in people with CVD (CREDO)
Duration	2009-2012 (\$594,200)
Grant Holders	Christensen , Griffiths, Mackinnon, Kenardy
Granting Body	NHMRC Project Grant
Study	The effectiveness of an indicated prevention program for anxiety
Duration	2009-2012 (\$628,039)
Grant Holders	Christensen , Glozier, Griffiths, Butler
Granting Body	NHMRC Project Grant
Study	A novel intervention targeting insomnia to prevent Major Depressive Disorder in the community
Duration	2011-2013 (\$913,390.00)
Grant Holders	Christensen , Griffiths, Reynolds, Bennett
Granting Body	Australian Rotary Health - Project Grant (Mental Health)
Study	Living with deadly thoughts: Reducing suicidal thoughts through a web-based self-help intervention.
Duration	2012 (\$67,362)
Grant Holders	Christensen , Griffiths, Tait, Barney, Bennett, Bennett, Calear , Reynolds, Farrer
Granting Body	Department of Innovation, Industry, Science & Research: Cooperative Research Centre
Study	Young People, Technology & Wellbeing: Cooperative Research Centre
Duration	2011-2016 (\$92,000)
Grant Holders	Christensen , Van Spijker , Mackinnon, Calear , Batterham
Granting Body	NHMRC Project Grant
Study	Reducing suicide ideation: A randomised controlled trial of a novel web intervention
Duration	2013-2015 (\$433,889)
Grant Holders	Teesson, Baker, Mills, Kay-Lambkin, Haber, Baillie, Christensen , Birchwood, Spring, Brady
Granting Body	NHMRC Centre for Research Excellence (CRE)
Study	Centre of Research Excellence in Mental Health and Substance Use: Translating innovative prevention and treatment
Duration	2012-2017 (\$2,442,370)
Grant Holder	Green
Granting Body	ARC Future Fellowship
Study	Imaging genetics in schizophrenia and bipolar disorder: Adjudicating neurocognitive endophenotypes
Duration	2009-2013 (\$700,000)
Grant Holder	Maloney, Laurens, Green
Granting Body	Rotary Mental Health Research Grant
Study	Identifying targets and timing for early intervention: A NSW population record-linkage study to detect childhood indicators of risk for mental illness
Duration	2011-2013 (\$68,377)
Grant Holder	Green , Weickert, Mitchell , Schofield
Granting Body	NHMRC Project Grant
Study	Imaging genetics in schizophrenia and bipolar disorder: Adjudicating neurocognitive endophenotypes
Duration	2010-2014 (\$549,500)
Grant Holders	Harvey , Bryant, Christensen , Mitchell
Granting Body	beyondblue
Study	Work and depression/anxiety disorders: A systematic review of reviews
Duration	2012-2013 (\$93,149)
Grant Holders	Lai
Granting Body	NSW Institute of Psychiatry Research Fellowship
Study	A study of ketamine as an antidepressant treatment.
Duration	2012 (\$55,000)

Grant Holders	Loo
Granting Body	Granting Body: Stanley Medical Research Foundation
Study	A controlled trial of transcranial Direct Current Stimulation (tDCS) as a treatment for unipolar and bipolar depression
Duration	2012 (\$681,595)
Grant Holders	Loo, Sachdev, Mitchell , Dokos
Granting Body	UNSW Major Research Equipment and Infrastructure Grant
Study	Near infrared spectroscopy
Duration	2012 (\$44,213)
Grant Holders	Valenzuela, Loo , Pujol, Djuric, Velakoulis, Yucel, Dragunow
Granting Body	NHMRC Program Grant
Study	Role of neurogenesis in clinical recovery from depression during ECT: Application of a novel in vivo magnetic resonance spectroscopy technology
Duration	2011-2013 (\$505,312)
Grant Holders	Loo, Mitchell , Taylor
Granting Body	NHMRC Project Grant
Study	Electrical stimulation with a random noise pattern: A new approach to the treatment of depression
Duration	2013-2015 (\$505,380)
Grant Holders	Menon, Loo , Martin, Bowman
Granting Body	St George Medical Research Foundation Establishment Grant
Study	Does transcranial direct current stimulation enhance outcomes from computerised cognitive remediation in patients with schizophrenia? A randomised controlled trial in a rehabilitative setting.
Duration	2012 (\$17,000)
Grant Holders	Low , Todaro, Elias
Granting Body	Department of Ageing, Disabilities & Home Care Applied Research Grant
Study	An untapped resource: Older CALD volunteers – understanding barriers and motivations to volunteering in NSW
Duration	2010-2012 (\$249,206)
Grant Holders	Menon
Granting Body	RANZCP New Investigator Grant
Study	Does transcranial direct current stimulation enhance outcomes from computerised cognitive remediation in patients with schizophrenia? – A randomised controlled trial in a rehabilitative setting
Duration	2012 (\$5,882)
Grant Holders	Mitchell
Granting Body	Lansdowne Foundation
Study	Epigenetic study of young people at high-risk of bipolar disorder
Duration	2012 (\$60,000)
Grant Holders	Meiser, Mitchell , Schofield, Trevena, Barlow-Stewart, Dobbins, Christensen
Granting Body	ARC Linkage Grant
Study	Cluster randomised controlled trial of an online psycho-educational intervention for people with a family history of depression for use in general practice
Duration	2012-2014 (\$199,257)
Grant Holders	Mitchell, Schofield, Parker, Breakspear (AI: Loo)
Granting Body	NHMRC Program Grant
Study	Depressive and bipolar disorders: Causes, prevention and treatment innovations
Duration	2013-2017 (\$7.1 million)
Grant Holders	Goecke, Parker, Christensen , Epps, Cohn, Lucey
Granting Body	Australian Research Council
Study	Affective sensing technology for the detection and monitoring of depression and melancholia
Duration	2013-2015 (\$360,000)
Grant Holders	Parker, Hadzi-Pavlovic, Manicavasagar
Granting Body	NHMRC Project Grant
Study	A comparative clinical efficacy trial of treatments for melancholia
Duration	2010-2012 (\$374,250)
Grant Holders	Parker, Mitchell, Malhi and Associate Investigators
Granting Body	NHMRC Program Grant
Study	Identifying determinants of both the origins and the progression of the depressive and bipolar (mood) disorders
Duration	2008-2012 (\$5,883,133)

Grant Holders	Proudfoot, Manicavasagar, Wallace, Bonney
Granting Body	Australian Government Department of Health and Ageing
Study	MyCompass and BITE BACK
Duration	2012-2015 (\$2,282,500)
Grant Holders	Proudfoot, Christensen, Hadzi-Pavlovic, Wilhelm
Granting Body	beyondblue
Study	Preventing depression and suicide in men
Duration	2013-2014 (\$286,388)
Grant Holder	Sachdev, Brodaty , Andrews
Granting Body	NHMRC Program Grant
Study	The prevention, early detection, and effective management of neurocognitive disorders in the elderly
Duration	2010-2014 (\$6,090,000)
Grant Holders	Mohan, Associate investigators: Martin, Sachdev, Brodaty, Loo , Gates
Granting Body	Dementia Collaborative Research Centre grant
Study	Transcranial direct current stimulation to enhance outcomes from computer facilitated cognitive training in patients with mild cognitive impairment.
Duration	2012 (\$40,000)
Grant Holder	Sachdev, Brodaty , Andrews, Lord Team Investigators: Trollor, Valenzuela, Anderson, Low, Withall, Menant.
Granting Body	NHMRC Capacity Building Grants in Population Health and Health Services Research
Study	Prevention and management of mental disorders in older Australians
Duration	2009-2013 (\$2,352,525)
Grant Holders	Sachdev , Reppermund
Granting Body	UNSW/Go8 DAAD Scheme
Study	Genetic associations of cognitive ageing and depression
Duration	2012-2013 (\$17,100)
Grant Holders	Sachdev , Richmond, Kochan, Wen , Crawford
Granting Body	NHMRC Project Grant
Study Name	A cognitive and neuroimaging study of exceptionally old age: Sydney Centenarian Study
Duration	2010-2012 (\$826,500)
Grant Holders	Sachdev , Martin, Ames, Schofield, Broe, Brodaty , Trollor, Wright, Wen, Halliday, Lee
Granting Body	NHMRC/ARC Strategic Award (AWAP Program)
Study	Gene-environment interactions in healthy ageing and age-related neurodegeneration (Twin Study)
Duration	2007-2012 (\$2,000,000)
Grant Holders	Sachdev , Wright, Ames, Trollor, Wen, Baune, Lee, Crawford
Granting Body	NHMRC Project Grant
Study	The Older Australian Twin Study (OATS) of healthy brain ageing and age-related neurocognitive disorders
Duration	2013-2015 (\$912,222)
Grant Holder	Wilde, Mitchell , Meiser, Schofield
Granting Body	beyondblue National Priority Driven Research Projects
Study	Development of an interactive depression risk assessment and tailored preventive intervention for healthy young people at high genetic risk of depression and bipolar disorder
Duration	2011-2013 (\$200,000)
Grant Holder	Butler, Levy, Kaldor, Al-Yaman, Wilhelm , Dodson, Gray, Allsop
Granting Body	NHMRC Capacity Building Grant
Study	From Broome to Berrima: Building Australia-wide research capacity in indigenous offender health and health care delivery
Duration	2009-2014 (\$2,740,728)
Grant Holder	Butler, Schofield, Greenberg, Weatherburn, Wilhelm , Carr, D'Este, Mitchell
Granting Body	NHMRC Partnership Project Grant
Study	Reducing impulsive behaviour in repeat violent offenders using a selective serotonin reuptake inhibitor (Zoloft)
Duration	2010-2014 (\$1,033,120)

Publications

The Institute prides itself on the quality and quantity of its research. Its research findings are widely distributed to peer-reviewed professional and scientific publications, as well as to the general public via the media and fact sheets on our website. The Institute's impressive research output during 2012 is listed below. Institute members and associates are in bold type.

Aburn, M. J., Holmes, C. A., Roberts, J. A., **Boonstra, T. W.** & **Breakspear, M.** (2012). Critical fluctuations in cortical models near instability. *Frontiers in Fractal Physiology*, 3, article 331. doi: 10.3389/fphys.2012.00331.

Alonzo, A., Brassil, J., Taylor, J. L., **Martin, D.** & **Loo, C. K.** (2012). Daily transcranial direct current stimulation (tDCS) leads to greater increases in cortical excitability than second-daily transcranial direct current stimulation. *Brain Stimulation*, 5, pp. 208-213. doi: 10.1016/j.brs.2011.04.006.

Aquino, K. M., Schira, M. M., Robinson, P. A., Drysdale, P. M. & **Breakspear, M.** (2012). Hemodynamic travelling waves in human visual cortex. *PLoS Computational Biology*, 8, e1002435. doi: 10.1371/journal.pcbi.1002435.

Attu, S. D., Rhebergen, D., Comijs, H. C., **Parker, G.** & Stek, M. L. (2012). Psychomotor symptoms in depressed elderly patients: Assessment of the construct validity of the Dutch CORE by accelerometry. *Journal of Affective Disorders*, 137, pp. 146-150. doi: 10.1016/j.jad.2011.12.035.

Austin, M-P., **Reilly, N.** & Sullivan, E. (2012). The need to evaluate public health reforms: Australian perinatal mental health initiatives. *Australian and New Zealand Journal of Public Health*, 36, pp. 208-211. doi: 10.1111/j.1753-6405.2012.00851.x.

Bai, S., **Loo, C.**, Al Abed, A. & Dokos, S. (2012). A computational model of direct brain excitation induced by electroconvulsive therapy: Comparison among three conventional electrode placements. *Brain Stimulation*, 5, pp. 408-421. doi: 10.1016/j.brs.2011.07.004.

Baikie, K., Geerlings, L. & **Wilhelm, K.** (2012). Expressive writing and positive writing for participants with mood disorders: An online randomized controlled trial. *Journal of Affective Disorders*, 136, pp. 310-319. doi: 10.1016/j.jad.2011.11.032.

Banfield, M. A., Barney, L.J., Griffiths, K.M. & **Christensen, H.M.** (2012). Australian mental health consumers' priorities for research: Qualitative findings from the SCOPE for Research project. *Health Expectations*. doi: 10.1111/j.1369-7625.2011.00763.x

Batterham, P.J., **Christensen, H.** & Mackinnon, A.J. (2012). Mental health symptoms associated with morbidity, not mortality, in an elderly community sample. *Social Psychiatry and Psychiatric Epidemiology*, 47(1), 79-85. doi: 10.1007/s00127-010-0313-0.

Batterham, P. J., **Calea, A. L.** & **Christensen, H.** (2012). The Stigma of Suicide Scale: Psychometric properties and correlates of the stigma of suicide. *Crisis: The Journal of Crisis Intervention and Suicide Prevention*. 30:1-9. E-pub ahead of print. doi: 10.1027/0227-5910/a000156.

Batterham, P. & **Christensen, H.** (2012). Longitudinal risk profiling for suicidal thoughts and behaviours in a community cohort using decision trees. *Journal of Affective Disorders*. 142(1-3):306-14. doi: 10.1016/j.jad.2012.05.021. Epub 2012 Jul 26.

Batterham, P., Glozier, N., **Christensen, H.** (2012, Nov) Sleep disturbance, personality and the onset of depression and anxiety: prospective cohort study. *Australian and New Zealand Journal of Psychiatry*, 46(11):1089-98. doi: 10.1177/0004867412457997. Epub 2012, Aug 16.

Baumeister, H. & **Parker, G.** (2012). Meta-review of depressive subtyping models. *Journal of Affective Disorders*, 139, pp. 126-140. doi: 10.1016/j.jad.2011.07.015.

Birznies, I., **Boonstra, T. W.** & Macefield, V. G. (2012). Modulation of human muscle spindle discharge by arterial pulsations – Functional effects and consequences. *PLoS ONE*, 7, e35091. doi: 10.1371/journal.pone.0035091.

Blignault, I., **Manicavasagar, V.**, **Parker, G.**, Wijeratne, C. & Sumathipala, A. (2012). Building capacity in identification and management of mood disorders: An Australia-Sri Lanka collaboration. *Australasian Psychiatry*, 20, pp. 53-56. doi: 10.1177/1039856211432481.

Boonstra, T. W. & **Breakspear, M.** (2012). Neural mechanisms of intermuscular coherence: Implications for the rectification of surface electromyography. *Journal of Neurophysiology*, 107, pp. 796-807. doi: 10.1152/jn.00066.2011.

Borness, C., **Proudfoot, J.** & Venezuala, M. (2012). Methodological challenges and solutions when conducting a multicentre, online, randomized controlled trial of brain training within a public service organization. *Journal of Workplace Behavioral Health*, 27, pp. 272-288. doi: 10.1080/15555240.2012.725602.

Bryant, R. A., Hung, L., Guastella, A. J. & **Mitchell, P. B.** (2012). Oxytocin as a moderator of hypnotizability. *Psychoneuroendocrinology*, 37, pp. 162-166. doi: 10.1016/j.psyneuen.2011.05.010.

Bunce, D., Mackinnon, A., **Christensen, H.** & **Batterham, P.** (2012). Depression, anxiety and cognition in community-dwelling adults aged 70 years and over. *Journal of Psychiatric Research*, 46, pp. 1662-1666. doi: 10.1016/j.jpsychires.2012.08.023.

Calea, A., **Christensen, H.**, Griffiths, K. & Mackinnon, A. (2012, Dec 11). Adherence to the MoodGYM Program: Outcomes and predictors for an adolescent school-based population. *Journal of Affective Disorders*. E-pub ahead of print. doi: 10.1016/j.jad.2012.11.036.

Chan, H., **Alonzo, A.**, **Martin, D.**, **Player, M.**, **Mitchell, P.**, **Sachdev, P.** & **Loo, C.** (2012). Treatment of major depressive disorder by transcranial random noise stimulation: Case report of a novel treatment. *Biological Psychiatry*, 72, e9-e10. doi: 10.1016/j.biopsych.2012.02.009.

Chan, H., **Mitchell, P.**, **Loo, C. K.** & **Harvey, S.** (2012). Pharmacological treatment approaches to difficult-to-treat depression. *Medical Journal of Australia Open*, 1 (Suppl. 4), pp. 44-77. doi: 10.5694/mjaol2.10495.

Chan, H. N. & **Mitchell, P. B.** (2012). Antidepressant drugs. *Side Effects of Drugs Annual*, 34, pp. 17-24. doi: 10.1016/B978-0-444-59499-0.00002-7.

Christensen, H., **Calea, A. L.**, Andersson, G., Thorndike, F. P. & Tait, R. J. (2012). Beyond efficacy: The depth and diversity of current internet interventions. *Journal of Medical Internet Research*, 14, e92. doi: 10.2196/jmir.2206.

Christensen, H., **Batterham, P. J.**, Soubelet, A. & Mackinnon, A. J. (2012). A test of the Interpersonal-Psychological Theory of Suicidal Behaviour in a large community-based cohort. *Journal of Affective Disorders*. 2 August. E-pub ahead of print. doi: 10.1016/j.jad.2012.07.002.

Cole, N. & **Parker, G.** (2012). Cade's identification of lithium for manic depressive illness – The prospector who found a gold nugget. *Journal of Nervous and Mental Disease*, 200, pp. 1101-1104. doi: 10.1097/NMD.0b013e318275d3cb.

Crabb, R., Cavanagh, K., **Proudfoot, J.**, Learmonth, D., Raffie, S. & Weingardt, K. R. (2012). Is computerised cognitive-behavioural therapy a treatment option for depression in late life? A systematic review. *British Journal of Clinical Psychology*, 51, pp. 459-464. doi: 10.1111/j.2044-8260.2012.02038.x.

Eyers, K., **Parker, G.** & **Brodsky, H.** (2012). *Managing Depression Growing Older. A Guide for Professionals and Carers*. Sydney, Australia: Allen & Unwin.

Eyers, K., **Parker, G.** & **Brodsky, H.** (2012). *Managing Depression, Growing Older. A Guide for Professionals and Carers*. UK: Routledge.

Fletcher, K. (2012). Personality styles associated with Bipolar II Disorder. In G. Parker (Ed.), *Bipolar II Disorder. Modelling, Measuring and Managing* (2nd ed.) (pp. 70-80). Cambridge, UK: Cambridge University Press.

Fletcher, K., **Parker, G.**, **Barrett, M.**, **Synnot, H.** & **McCraw, S.** (2012). Temperament and personality in Bipolar II Disorder. *Journal of Affective Disorders*, 136, pp. 304-309. doi: 10.1016/j.jad.2011.11.033.

Freyer, F., Roberts, J. A., Becker, R., Robinson, P. A., Ritter, P. & **Breakspear, M.** (2012). A canonical model of multistability and scale-invariance in biological systems. *PLoS Computational Biology*, 8, e1002634. doi: 10.1371/journal.pcbi.1002634.

Friston, K. J., Adams, R., Perrinet, L. & **Breakspear, M.** (2012). Perceptions as hypotheses: Saccades as experiments. *Frontiers in Perception Science*, 3, article 151. doi: 10.3389/fpsyg.2012.00151.

Friston, K. J., **Breakspear, M.** & Deco, G. (2012). Perception and self-organised instability. *Frontiers in Computational Neuroscience*, 6, article 44. doi: 10.3389/fncom.2012.00044.

Gili, M., Roca, M., Armengol, S., Asensio, D., Garcia-Campayo, J. & **Parker, G.** (2012). Clinical patterns and treatment outcomes in patients with melancholic, atypical and non-melancholic depressions. *PLoS ONE*, 7, e48200. doi: 10.1371/journal.pone.0048200.

Gosling, J. A., **Batterham, P.** & **Christensen, H.** (2012). Cognitive-behavioural factors that predict sleep disturbance 4 years later. *Journal of Psychosomatic Research*, 73, 424-429. doi: 10.1016/j.jpsychores.2012.08.011.

Gulliver, A., Griffiths, K. M., **Christensen, H.** & Brewer, J. L. (2012). A systematic review of help-seeking interventions for depression, anxiety and general psychological distress. *British Medical Council Psychiatry*. 12:81. doi: 10.1186/1471-244X-12-81.

Gulliver, A., Griffiths, K. M., **Christensen, H.**, Mackinnon, A., **Calea, A. L.**, Parsons, A., Bennett, K., **Batterham, P. J.** & Stanimirovic, R. (2012). Internet-based interventions to promote mental health help-seeking in elite athletes: an exploratory randomized controlled trial. *Journal of Medical Internet Research*, 14(3):e69. doi: 10.2196/jmir.1864.

Grant, K. A., Bautovich, A., **Reilly, N.**, McMahon, C., Leader, L. & **Austin, M-P.** (2012). Parental care and control during childhood: Associations with maternal perinatal mood disturbance and parenting stress. *Archives of Women's Mental Health*, 15, pp. 297-305. doi: 10.1007/s00737-012-0292-0.

Griffiths, K. M., Mackinnon, A. J., Crisp, D. A., **Christensen, H.**, Bennett, K., et al. (2012) The Effectiveness of an online support group for members of the community with depression: A randomised controlled trial. *PLoS ONE* 7(12): e53244. doi:10.1371/journal.pone.0053244.

Hadzi-Pavlovic, D. & Boyce, P. (2012). Melancholia. *Current Opinion in Psychiatry*, 25, pp. 14-18. doi: 10.1097/YCO.0b013e32834dc147.

Harvey, S. B., Hatch, S. L., Jones, M., Hull, L., Jones, N., Greenberg, N., Dandeker, C., Fear, N. & Wessely, S. (2012). The long-term consequences of military deployment: A 5 year cohort study of UK reservists deployed to Iraq. *American Journal of Epidemiology*, 176, pp. 1177-1184. doi: 10.1093/aje/kws248.

Heitmann, S., Ferns, N. & **Breakspear, M.** (2012). Muscle co-contraction modulates damping and joint stability in a three-link biomechanical limb. *Frontiers in Neurobotics*, 5, article 5. doi: 10.3389/fnbot.2011.00005.

Heitmann, S., Gong, P. & **Breakspear, M.** (2012). A computational role for bistability and traveling waves in motor cortex. *Frontiers in Computational Neuroscience*, 6, article 67. doi: 10.3389/fncom.2012.00067.

Henderson, M., Brooks, S. K., del Busso, L., Chalder, T., **Harvey, S. B.**, Hotopf, M., Madan, I. & Hatch, S. (2012). Shame! Self-stigmatisation as an obstacle to sick doctors returning to work: A qualitative study. *BMJ Open*, 2, e001776. doi: 10.1136/bmjopen-2012-001776.

- Henderson, M. & **Harvey, S. B.** (2012). Occupational psychiatry. In E. Guthrie, M. Temple & S. Rao (Eds.), *Seminars in Liaison Psychiatry* (2nd ed.). London: Gaskell Publishing.
- Hyett, M., Rourke, P., Vollmer-Conna, U. & Parker, G.** (2012). The nature and course of depression related to acute coronary syndrome. *Health Issues*, 108, pp. 27-29.
- Johnson, M., Schmeid, V., Lupton, S. J., **Austin, M-P.**, Matthey, S. M., Kemp, L., Meade, T. & Yeo, A. E. (2012). Measuring perinatal mental health risk. *Archives of Women's Mental Health*, 15, pp. 375-386. doi: 10.1007/s00737-012-0297-8.
- Kalu, U., Sexton, C., **Loo, C. & Ebmeier, K.** (2012). Transcranial direct current stimulation in the treatment of major depression: A meta-analysis. *Psychological Medicine*, 42, pp. 1791-1800. doi: 10.1017/S0033291711003059.
- Karim, M., Harris, J. A., Morley, J. W. & **Breakspear, M.** (2012). Prior and present evidence: How prior experience interacts with present information in a perceptual decision making task. *PLoS ONE*, 7, e37580. doi: 10.1371/journal.pone.0037580.
- Knudsen, A. K., Lervik, L. V., **Harvey, S. B.**, Løwik, C. M. S., Omenäs, A. N. & Mykletun, A. (2012). A comparison of chronic fatigue syndrome / myalgic encephalopathy with other disorders: An observational study. *Journal of the Royal Society of Medicine Short Reports*, 3, p. 32. doi: 10.1258/shorts.2011.011167.
- Knudsen, A. K., Skogen, J. C., **Harvey, S. B.**, Stewart, R., Hotopf, M. & Moran, P. (2012). Personality disorders, common mental disorders and receipt of disability benefits: Evidence from the British National Survey of Psychiatric Morbidity. *Psychological Medicine*, 42, pp. 2631-2640. doi: 10.1017/S0033291712000906.
- Langdon, A., Breakspear, M. & Coombes, S.** (2012). Phase-locked cluster oscillations in periodically forced integrate-and-fire-or-burst neuronal populations. *Physical Review E*, 86, 061903. doi: 10.1103/PhysRevE.86.061903.
- Levy, Y., **Austin, M-P. & Halliday, G.** (2012). Use of ultra-brief pulse electroconvulsive therapy to treat severe postnatal mood disorder: A case series. *Australasian Psychiatry*, 20, pp. 429-432. doi: 10.1177/1039856212458979.
- Li, M., Wang, Y., Zhen, X., Ikeda, M., Iwata, N., Luo, X., Chong, S., Lee, J., Rietschel, M., Zhang, F., Muller-Myhsok, B., Cichon, S., Weinberger, D. R., Mattheisen, M., Schulze, T. G., Martin, N. G., **Mitchell, P. B.**, Schofield, P. R., Moods Consortium, Liu, J. & Su, B. (2012). Meta-analysis and brain imaging data support the involvement of VRK2 (rs2312147) in schizophrenia susceptibility. *Schizophrenia Research*, 142, pp. 200-205. doi: 10.1016/j.schres.2012.10.008.
- Loo, C., Alonzo, A., Martin, D., Mitchell, P., Galvez, V. & Sachdev, P.** (2012). Transcranial direct current stimulation for depression: 3-week, randomised, sham-controlled trial. *British Journal of Psychiatry*, 200, pp. 52-59. doi:10.1192/bjp.bp.111.097634.
- Loo, C., Garfield, J., Katalinic, N., Schweitzer, I. & Hadzi-Pavlovic, D.** (2012). Speed of response in ultrabrief and brief pulse width right unilateral ECT. *International Journal of Neuropsychopharmacology*, pp. 1-7. doi: 10.1017/S1461145712000879.
- Loo, C., Katalinic, N., Garfield, J., Sainsbury, K., Hadzi-Pavlovic, D. & MacPherson, R.** (2012). Ketamine as a neuroprotective agent in electroconvulsive therapy: A randomised controlled trial. *Journal of Affective Disorders*, 142, pp. 233-240. doi: 10.1016/j.jad.2012.04.032.
- Loo, C., Katalinic, N., Martin, D. & Schweitzer, I.** (2012). A review of ultrabrief pulse width electroconvulsive therapy. *Therapeutic Advances in Chronic Disease*, 3, pp. 69-85. doi: 10.1177/2040622311432493.
- Loo, C. & Martin, D.** (2012). Could transcranial direct current stimulation have unexpected additional benefits in the treatment of depressed patients? *Expert Review of Neurotherapeutics*, 12, pp. 751-753.
- Lord, A., Horn, D., **Breakspear, M.** & Walter, M. (2012). Changes in community structure of resting state brain networks in unipolar depression. *PLoS ONE*, 7, e41282. doi: 10.1371/journal.pone.0041282.
- Manicavasagar, V. & Giffillan, D.** (2012). Psychological interventions for Bipolar II Disorder. In G. Parker (Ed.), *Bipolar II Disorder. Modelling, Measuring and Managing* (2nd ed.) (pp. 142-150). Cambridge, UK: Cambridge University Press.
- Manicavasagar, V., Perich, T. & Parker, G.** (2012). Cognitive predictors of change in cognitive behaviour therapy and mindfulness-based cognitive therapy for depression. *Behavioural and Cognitive Psychotherapy*, 40, pp. 227-232. doi: 10.1017/S1352465811000634.
- McAuley, E. Z., Scimone, A., Tiwari, Y., Agahi, G., Mowry, B., Holliday, E. G., Donald, J. A., Shannon-Weickert, C., **Mitchell, P. B.**, Schofield, P. R. & Fullerton, J. M. (2012). Identification of sialyltransferase 8B as a generalized susceptibility gene for psychotic and mood disorders on chromosome 15q25-26. *PLoS One*, 7, e38172. doi: 10.1371/journal.pone.0038172.
- Mitchell, P. B.** (2012). Bipolar disorder: The shift to overdiagnosis. *Canadian Journal of Psychiatry*, 57, pp. 659-665.
- Mitchell, P. B.** (2012). Psychiatrists and the pharmaceutical industry: On the ethics of a complex relationship. In M. Dudley, D. Silove & F. Gale (Eds.), *Mental Health and Human Rights* (pp. 346-361). Oxford University Press.
- Mitchell, P. B.** (2012). Update on bipolar disorder. *Medical Observer*, September, pp. 29-31.
- Mitchell, P. B., Levy, F., Hadzi-Pavlovic, D., Concannon, P., Hutchins, P., Mulcahy, D., Clarke, S., Salmelainen, P., Warner, A. & Hughes, C.** (2012). Practitioner characteristics and the treatment of children and adolescents with attention deficit hyperactivity disorder. *Journal of Paediatrics and Child Health*, 48, pp. 483-489. doi: 10.1111/j.1440-1754.2011.02242.x.
- Morris, R., Sparks, A., **Mitchell, P. B.**, Shannon Weickert, C., Weickert, T. & **Green, M. J.** (2012). Lack of cortico-limbic coupling in bipolar disorder and schizophrenia during emotion regulation. *Translational Psychiatry*, 2, e90. doi: 10.1038/tp.2012.16.
- Murray, C. J. L., Vos, T., Lozano, R., Naghavi, M., Flaxman, A. D., Michaud, C., et al. (Black Dog Institute co-author: **Mitchell, P. B.**) (2012). Disability-adjusted life years (DALYs) for 291 diseases and injuries in 21 regions, 1990-2010: A systematic analysis for the Global Burden of Disease Study 2010. *Lancet*, 380, pp. 2197-2223. doi: 10.1016/S0140-6736(12)61689-4.
- Mykletun, A. & **Harvey, S. B.** (2012). Prevention of mental disorders: A new era for workplace mental health. *Occupational and Environmental Medicine*, 69, pp. 868-869. doi: 10.1136/oemed-2012-100846.
- Parker, G.** (2012). *A Piece of My Mind – A Psychiatrist on the Couch*. Sydney, Australia: Pan Macmillan.
- Parker, G.** (2012). A psychiatrist on the couch – Views from the other side. *The Sydney Papers Online*, p. 116.
- Parker, G.** (2012). A vulnerable profession: Depression among lawyers. *Precedent*, 110, pp. 17-21.
- Parker, G.** (2012). Acta is a four-letter word. *Acta Psychiatrica Scandinavica*, 126, pp. 476-478. doi: 10.1111/j.1600-0447.2012.01919.x.
- Parker, G.** (Ed.) (2012). *Bipolar II Disorder. Modelling, Measuring and Managing* (2nd ed.). Cambridge, UK: Cambridge University Press.
- Parker, G.** (2012). Bringing melancholia out of the shadows. *Revista Brasileira de Psiquiatria*, 34, pp. 375-376. doi: 10.1016/j.rbp.2012.08.006.
- Parker, G.** (2012). Clinical models for managing Bipolar II Disorder: Model 1. In G. Parker (Ed.), *Bipolar II Disorder. Modelling, Measuring and Managing* (2nd ed.) (pp. 182-191). Cambridge, UK: Cambridge University Press.
- Parker, G.** (2012). Comorbid conditions associated with Bipolar II Disorder. In G. Parker (Ed.), *Bipolar II Disorder. Modelling, Measuring and Managing* (2nd ed.) (pp. 56-62). Cambridge, UK: Cambridge University Press.
- Parker, G.** (2012). Defining and measuring Bipolar II Disorder. In G. Parker (Ed.), *Bipolar II Disorder. Modelling, Measuring and Managing* (2nd ed.) (pp. 35-46). Cambridge, UK: Cambridge University Press.
- Parker, G.** (2012). Introduction. In G. Parker (Ed.), *Bipolar II Disorder. Modelling, Measuring and Managing* (2nd ed.) (pp. XI-XV). Cambridge, UK: Cambridge University Press.
- Parker, G.** (2012). John Cade. *American Journal of Psychiatry*, 169, pp. 125-126. doi: 10.1176/appi.ajp.2011.11111697.
- Parker, G.** (2012). Obituary: Dr John Ellard (1924-2011). *Australasian Psychiatry*, 20, pp. 74-75. doi: 10.1177/1039856211433093c.
- Parker, G.** (2012). Personality disorders – Treat or retreat? *Medicine Today*, 13, pp. 18-27.
- Parker, G.** (2012). Rounding up and tying down. In G. Parker (Ed.), *Bipolar II Disorder. Modelling, Measuring and Managing* (2nd ed.) (p. 266). Cambridge, UK: Cambridge University Press.
- Parker, G. & Brothie, H.** (2012). Chocolate and Mood. In R. Paoletti, A. Poli, A. Conti & F. Visioli (Eds.), *Chocolate and Health* (pp. 147-153). Italy: Springer-Verlag.
- Parker, G. & Fletcher, K.** (2012). Is Bipolar II Disorder increasing in prevalence? In G. Parker (Ed.), *Bipolar II Disorder. Modelling, Measuring and Managing* (2nd ed.) (pp. 63-69). Cambridge, UK: Cambridge University Press.
- Parker, G., Fletcher, K., Blanch, B. & Greenfield, L.** (2012). Take-up and profile of individuals accessing a web-based bipolar self-test screening measure. *Journal of Affective Disorders*, 138, pp. 117-122. doi: 10.1016/j.jad.2011.12.013.
- Parker, G., Fletcher, K. & Hadzi-Pavlovic, D.** (2012). Is context everything to the definition of clinical depression? A test of the Horwitz and Wakefield postulate. *Journal of Affective Disorders*, 136, pp. 1034-1038. doi: 10.1016/j.jad.2010.11.021.
- Parker, G., Graham, R., Hadzi-Pavlovic, D., Fletcher, K., Hong, M. & Futeran, S.** (2012). Further examination of the utility and comparative properties of the MSQ and MDQ bipolar screening measures. *Journal of Affective Disorders*, 138, pp. 104-109. doi: 10.1016/j.jad.2011.12.016.
- Parker, G., Graham, R., Hadzi-Pavlovic, D., Friend, P., Synnott, H. & Barrett, M.** (2012). Does testing for bimodality clarify whether the bipolar disorders are categorically or dimensionally different to unipolar depressive disorders? *Journal of Affective Disorders*, 137, pp. 135-138. doi: 10.1016/j.jad.2011.09.023.
- Parker, G., Graham, R., Rees, A.-M., Futeran, S. & Friend, P.** (2012). A diagnostic profile of those who return a false positive assignment on bipolar screening measures. *Journal of Affective Disorders*, 141, pp. 34-39. doi: 10.1016/j.jad.2012.02.026.
- Parker, G. & Manicavasagar, V.** (2012). Personality type and depression. *Medical Observer*, April, pp. 27-29.
- Parker, G., McCraw, S. & Fletcher, K.** (2012). Cyclothymia. *Depression and Anxiety*, 29, pp. 487-494. doi: 10.1002/da.21950.
- Parker, G. & Orman, J.** (2012). Examining the utility of the Black Dog Institute's online Mood Assessment Program in clinical practice. *Australasian Psychiatry*, 20, pp. 49-52. doi: 10.1177/1039856211432464.
- Parker, G., Paterson, A., Fletcher, K., Blanch, B. & Graham, R.** (2012). The 'magic button question' for those with a mood disorder – Would they wish to re-live their condition? *Journal of Affective Disorders*, 136, pp. 419-424. doi: 10.1016/j.jad.2011.11.008.
- Parker, G., Paterson, A., Fletcher, K., Hyett, M. & Blanch, B.** (2012). Out of the darkness: The impact of a mood disorder over time. *Australasian Psychiatry*, 20, pp. 487-491. doi: 10.1177/1039856212466160.
- Pini, S., Gesi, C., Abelli, M., Muti, M., Lari, L., Cardini, A., **Manicavasagar, V.**, Mauri, M., Cassano, G. B. & Shear, K. M. (2012). The relationship between adult separation anxiety disorder and complicated grief in a cohort of 453 patients with mood and anxiety disorders. *Journal of Affective Disorders*, 143, pp. 64-68. doi: 10.1016/j.jad.2012.05.026.
- Player, M., Taylor, J., Alonzo, A. & Loo, C.** (2012). Paired associative stimulation increases motor cortex excitability more effectively than theta-burst stimulation. *Clinical Neurophysiology*, 123, pp. 2220-2226. doi: 10.1016/j.clinph.2012.03.081.
- Powell, J., Hamborg, T., Stallard, N., Burls, A., McSorley, J. -L., Bennett, K., Griffiths, K. M. & **Christensen, H.** (2012). Effectiveness of a web-based cognitive-behavioural tool to improve mental wellbeing in the general population: Randomized controlled trial. *Journal of Medical Internet Research*, 15, e2. doi: 10.2196/jmir.2240.
- Protopopescu, X., **Austin, M-P., Reilly, N. & Barnett, B.** (2012). Screening and psychosocial assessment for perinatal depression, distress, and dysfunction. In C. R. Martin (Ed.), *Perinatal Mental Health: A Clinical Guide* (eKindle ed.) (pp. 307-322). United Kingdom: M&K Publishing.

Proudfoot, J., Parker, G., Manicavasagar, V., Hadzi-Pavlovic, D., Whitton, A., Nicholas, J., Smith, M. & Burckhardt, R. (2012). Effects of adjunctive peer support on symptoms and attrition in an online psychoeducation program for bipolar disorder: A randomised controlled trial. *Journal of Affective Disorders*, 142, pp. 98-105. doi: 10.1016/j.jad.2012.04.007.

Proudfoot, J., Whitton, A., Parker, G., Doran, J., Manicavasagar, V. & Delmas, K. (2012). Triggers of mania and depression in young people with bipolar disorder. *Journal of Affective Disorders*, 143, pp. 196-202. doi:10.1016/j.jad.2012.05.052.

Psychotropic Guidelines Sub-Committee (Black Dog Institute co-author: **Mitchell, P.**) (2012). *Psychotropic Therapeutic Guidelines* (7th ed.). Melbourne, Australia: Therapeutic Guidelines Ltd.

Rees, A. & Parker, G. (2012). The role of fish oil in managing Bipolar II Disorder. In G. Parker (Ed.), *Bipolar II Disorder. Modelling, Measuring and Managing* (2nd ed.) (pp. 133-141). Cambridge, UK: Cambridge University Press.

Rhebergen, D., Arts, D. L., Comijs, H., Beekman, A. T. F., Terwee, C. B., **Parker, G.** & Stek, M. L. (2012). Psychometric properties of the Dutch version of the core measure of melancholia. *Journal of Affective Disorders*, 142, pp. 343-346. doi: 10.1016/j.jad.2012.03.043.

Rhebergen, D., **Graham, R., Hadzi-Pavlovic, D., Stek, M., Friend, P., Barrett, M. & Parker, G.** (2012). The categorisation of dysthymia: Can its constituents be meaningfully apportioned? *Journal of Affective Disorders*, 143, pp. 179-186. doi: 10.1016/j.jad.2012.05.061.

Shifu, X., Haibo, X., Guanjuan, L., Chengmei, Y., Xia, L., Chao, C., Wu, H. Z. Y., **Mitchell, P.** & Mingyuan, Z. (2012). Therapeutic effects of cerebrolysin added to risperidone in patients with schizophrenia dominated by negative symptoms. *Australian and New Zealand Journal of Psychiatry*, 46, pp. 153-160. doi: 10.1177/0004867411433213.

Smith, D., Schweitzer, I., Ingram, N. & **Loo, C.** (2012). Successful ultrabrief ECT for a mixed episode of bipolar disorder. *Australian and New Zealand Journal of Psychiatry*, 46, p. 388. doi: 10.1177/0004867411433954.

Tait, R. J., McKetin, R., Kay-Lambkin, F., Bennett, K., Tam, A., Bennett, A., Geddes, J., Garrick, A., **Christensen, H.** & Griffiths, K. M. (2012, June 25). Breaking the Ice: A protocol for a randomised controlled trial of an internet-based intervention addressing amphetamine-type stimulant use. *BMC Psychiatry*, 12, 67. E-pub ahead of print. doi: 10.1186/1471-244X-12-67.

van den Berg, D., Gong, P., **Breakspear, M.** & van Leeuwen, C. (2012). Fragmentation: Loss of global coherence or breakdown of modularity in functional brain architecture? *Frontiers in Systems Neuroscience*, 6, article 20. doi: 10.3389/fnsys.2012.00020.

Vos, T., Flaxman, A. D., Naghavi, M., Lozano, R., Michaud, C., Ezzati, M., et al. (Black Dog Institute co-author: **Mitchell, P. B.**) (2012). Years lived with disability (YLDs) for 1160 sequelae of 289 diseases and injuries 1990-2010: A systematic analysis for the Global Burden of Disease Study 2010. *Lancet*, 380, pp. 2163-2196. doi: 10.1016/S0140-6736(12)61729-2.

Walker, J. G., **Batterham, P. J.**, Mackinnon, A. J., Jorm, A. F., Hickie, I., Fenech, M., Kljakovic, M., Crisp, D. & **Christensen, H.** (2012). Oral folic acid and vitamin B-12 supplementation to prevent cognitive decline in community-dwelling older adults with depressive symptoms – The Beyond Ageing Project: A randomized controlled trial. *American Journal of Clinical Nutrition*, 95 (1), 194-203. doi: 10.3945/ajcn.110.007799.

Wilhelm, K., Gillis, I., Reddy, J., Mitchell, P. B., Campbell, L., Dobson-Stone, C., Pierce, K. & Schofield, P. R. (2012). Association between serotonin transporter promoter polymorphisms and psychological distress in a diabetic population. *Psychiatry Research*, 200, pp. 343-348. doi: 10.1016/j.psychres.2012.07.008.

Xu, F., **Austin, M-P., Reilly, N., Hilder, L. & Sullivan, E.** (2012). Major depressive disorder in the perinatal period: Using data linkage to inform perinatal mental health policy. *Archives of Women's Mental Health*, 15, pp. 333-341. doi: 10.1007/s00737-012-0289-8.

Xu, F., Hilder, L., **Austin, M-P.** & Sullivan, E. A. (2012). Data preparation techniques for a perinatal psychiatric study based on linked data. *BMC Medical Research Methodology*, 12, pp. 71. doi: 10.1186/1471-2288-12-71.

In Press:

Austin, M-P. V., Middleton, P., **Reilly, N. M.** & Highet, N. J. (In press). Detection and management of mood disorders in the maternity setting: The Australian Clinical Practice Guidelines. *Women and Birth: Journal of the Australian College of Midwives*. E-pub ahead of print. doi: 10.1016/j.wombi.2011.12.001.

Batterham, P., Glozier, N. & **Christensen, H.** (In press). Sleep disturbance, personality and the onset of depression and anxiety: Prospective cohort study. *Australian and New Zealand Journal of Psychiatry*. E-pub ahead of print. doi: 10.1177/0004867412457997.

Batterham, P. J., Bunce, D., Cherbuin, N. & **Christensen, H.** (In press). Apolipoprotein E ε4 and later life decline in cognitive function and grip strength. *American Journal of Geriatric Psychiatry*. E-pub ahead of print. doi: 10.1097/JGP0b013e318266b1ee.

Breakspear, M. (In press). Dynamic and stochastic models of neuroimaging data: A comment on Lohmann et al. *NeuroImage*. E-pub ahead of print. doi: 10.1016/j.neuroimage.2012.02.047.

Caldieraro, M. A. K., Baeza, F. L. C., Pinheiro, D. O., Ribeiro, M. R., **Parker, G.** & Fleck, M. P. (In press). Clinical differences between melancholic and non-melancholic depression as defined by the CORE system. *Comprehensive Psychiatry*. E-pub ahead of print. doi: 10.1016/j.comppsych.2012.05.012.

Christensen, H., Batterham, P. J. & Mackinnon, A. J. (In press). The getting of wisdom: Fluid intelligence does not drive knowledge acquisition. *Journal of Cognition and Development*. E-pub ahead of print. doi: 10.1080/15248372.2012.664590.

Christensen, H. M., Cleave, A. L., Bennett, K., Bennett, A. & Griffiths, K. (in press; accepted Jan 2013). A compendium of high quality mental health websites for use by clinicians, primary care practitioners, doctors and the general public. *Medical Journal of Australia*.

Fletcher, K., Parker, G. & Manicavasagar, V. (In press). Cognitive style in bipolar subtypes. *Psychiatry Research*. E-pub ahead of print. doi: 10.1016/j.psychres.2012.11.036.

Galvez, V., **Alonzo, A., Martin, D. & Loo, C.** (In press). Transcranial direct current stimulation (tDCS) treatment protocols: Should stimulus intensity be constant or incremental over multiple sessions? *International Journal of Neuropsychopharmacology*. E-pub ahead of print. doi: 10.1017/S1461145712000041.

Hegarty, B. & Parker, G. (In press). Fish oil as a management component for mood disorders – An evolving signal. *Current Opinion in Psychiatry*. E-pub ahead of print. doi: 10.1097/YCO.0b013e32835ab4a7.

Knudsen, A. K., **Harvey, S. B.**, Mykletun, A. & Øverland, S. (In press). Common mental disorders and long-term sickness absence in a general working population: The Hordaland health study. *Acta Psychiatrica Scandinavica*. E-pub ahead of print. doi: 10.1111/j.1600-0447.2012.01902.x.

Martin, D. M., Alonzo, A., Ho, K. –A., Player, M., Mitchell, P. B., Sachdev, P. & Loo, C. K. (In press). Continuation transcranial direct current stimulation for the prevention of relapse in major depression. *Journal of Affective Disorders*. E-pub ahead of print. doi: 10.1016/j.jad.2012.10.012.

Mitchell, P. B., Johnston, A. K., Frankland, A., Slade, T., **Green, M. J., Roberts, G.**, Wright, A., Corry, J. & Hadzi-Pavlovic, D. (2012). Bipolar disorder in a national survey using the World Mental Health Version of the Composite International Diagnostic Interview: The impact of differing diagnostic algorithms. *Acta Psychiatrica Scandinavica*. E-pub ahead of print. doi: 10.1111/acps.12005.

Parker, G., Blanch, B., Paterson, A., Hadzi-Pavlovic, D., Sheppard, E., Manicavasagar, V., Synnott, H., Graham, R., Friend, P., Gilfillan, D. & Perich, T. (In press). The superiority of antidepressant medication to cognitive behaviour therapy in melancholic depressed patients: A 12-week single-blind randomized study. *Acta Psychiatrica Scandinavica*. E-pub ahead of print. doi: 10.1111/acps.12049.

Parker, G., McCraw, S., Blanch, B., Hadzi-Pavlovic, D., Synnott, H. & Rees, A. –M. (In press). Differentiating melancholic and non-melancholic depression: A prototypic approach and a new measure. *Journal of Affective Disorders*. E-pub ahead of print. doi: 10.1016/j.jad.2012.06.042.

Parker, G., McCraw, S., Hadzi-Pavlovic, D. & Fletcher, K. (In press) Costs of the principal mood disorders: A study of comparative direct and indirect costs incurred by those with bipolar I, bipolar II and unipolar disorders. *Journal of Affective Disorders*. E-pub ahead of print. doi: 10.1016/j.jad.2012.10.002.

Parker, G., McCraw, S., Hadzi-Pavlovic, D., Hong, M. & Barrett, M. (In press). Bipolar depression: Prototypically melancholic in its clinical features. *Journal of Affective Disorders*. E-pub ahead of print. doi: 10.1016/j.jad.2012.11.035.

Parker, G., Paterson, A., McCraw, S., Friend, P. & Hong, M. (In press). Do practitioners managing mood disorders work to a sub-typing or a 'one size fits all' model? *Australasian Psychiatry*. E-pub ahead of print. doi: 10.1177/1039856212465776.

Patel, V., Giesebrecht, S., Burton, A., Cvejic, E., Lemon, J., **Hadzi-Pavlovic, D.**, Dain, S., Lloyd, A. & Vollmer-Conna, U. (In press). Reliability revisited: Autonomic responses in the context of everyday well-being. *International Journal of Cardiology*. E-pub ahead of print. doi: 10.1016/j.ijcard.2012.09.177.

Perich, T., Manicavasagar, V., Ball, J. & Mitchell, P. B. (In press). Mindfulness-based approaches in the treatment of bipolar disorder: Potential mechanisms and effects. *Mindfulness*. E-pub ahead of print. doi: 10.1007/s12671-012-0166-6.

Perich, T., Manicavasagar, V., Mitchell, P., Ball, J. & Hadzi-Pavlovic, D. (In press). A randomized controlled trial of mindfulness-based cognitive therapy for bipolar disorder. *Acta Psychiatrica Scandinavica*. E-pub ahead of print. doi: 10.1111/acps.12033.

Perich, T., Mitchell, P. B., Loo, C., Hadzi-Pavlovic, D., Roberts, G., Lau, P., Wright, A. & Frankland, A. (In press). Clinical and demographic features associated with the detection of early warning signs in bipolar disorder. *Journal of Affective Disorders*. E-pub ahead of print. doi: 10.1016/j.jad.2012.08.014.

Proudfoot, J., Jayawant, A., Whitton, A., Parker, G., Manicavasagar, V., Smith, M. & Nicholas, J. (In press). Mechanisms underpinning effective peer support: A qualitative analysis of interactions between expert peers and patients newly-diagnosed with bipolar disorder. *BMC Psychiatry*, 12, 196. E-pub ahead of print. doi:10.1186/1471-244X-12-196.

Roberts, G., Green, M. J., Breakspear, M., McCormack, C., Frankland, A., Wright, A., Levy, F., Lenroot, R., Chan, H. N. & Mitchell, P. B. (In press). Reduced inferior frontal gyrus activation during emotion inhibition in young people at genetic risk for bipolar disorder. *Biological Psychiatry*. E-pub ahead of print. doi: 10.1016/j.biopsych.2012.11.004.

Steinberg, S., de Jong, S., Mattheisen, M., Costas, J., Demontis, D., Jamain, S., et al. (Black Dog Institute co-authors: **Mitchell, P. B. & Wright, A.**) (In press). Common variant 16p11.2 conferring risk of psychosis. *Molecular Psychiatry*. E-pub ahead of print. doi: 10.1038/mp.2012.157.

Wijeratne, C., Sachdev, S., Wen, W., Piguat, O., Lipnicki, D. M., Malhi, G. S., **Mitchell, P. B. & Sachdev, P. S.** (In press). Hippocampal and amygdale volumes in an older bipolar disorder sample. *International Psychogeriatrics*. E-pub ahead of print. doi: 10.1017/S1041610212001469.

Wilde, A., Mitchell, P. B., Meiser, B. & Schofield, P. R. (In press). Implications of the use of genetic tests in psychiatry, with a focus on major depressive disorder: A review. *Depression and Anxiety*. E-pub head of print. doi: 10.1002/da.22000.

Conference Presentations and Educational Meetings

Month	Event Name	Presentation	Location	Presenter
INTERNATIONAL				
February	16th Congress of the Italian Society of Psychopathology	<i>Is Melancholia a Distinct Disease Entity or Just a More Severe Form of Depression?</i>	Rome, Italy	Parker
March	5th Biennial Conference of the International Society for Bipolar Disorders	<i>Cognitive Style in Bipolar II Disorder</i>	Istanbul, Turkey	Fletcher
March	5th Biennial Conference of the International Society for Bipolar Disorders	<i>The Effect of Emotion Regulation on Cortico-Limbic Coupling in Bipolar Disorder and Schizophrenia</i>	Istanbul, Turkey	Green
March	5th Biennial Conference of the International Society for Bipolar Disorders	<i>Reduced Inferior Frontal Gyrus Activation During Emotion Inhibition in Young People at Increased Genetic Risk for Bipolar Disorder</i>	Istanbul, Turkey	Roberts
April	Workshop on Corticomuscular and Intermuscular Coherence, Donders Institute	<i>EMG Rectification: The Mean and Variance of Neuronal Oscillations</i>	Nijmegen, The Netherlands	Boonstra
May	Society for Biological Psychiatry Annual Meeting	<i>Continua of Function Across Bipolar Mania and Schizophrenia</i>	Philadelphia, USA	Green
May	International Society for ECT and Neurostimulation Annual Meeting	<i>Transcranial Direct Current Stimulation</i>	Philadelphia, USA	Loo
May	Neuroscience Research Unit, University of Manchester	<i>Transcranial Direct Current Stimulation: A New Treatment for Depression?</i>	Manchester, UK	Loo
May	Society for Biological Psychiatry Annual Meeting	<i>Impaired Inferior Frontal Gyrus Response to an Emotional Inhibition Task in Young First-Degree Relatives of Bipolar Disorder Patients Compared to Controls</i>	Philadelphia, USA	Roberts
July	Chinese National Conference on Western and Chinese Medicine	<i>Can We Predict Who Will Develop Bipolar Disorder?</i>	Nan Ning, China	Mitchell
July	1er Simposio Red Internacional de Psicopatología Descriptiva	<i>Bipolar II Disorder: Modelling, Detection and Management</i>	Santiago, Chile	Parker
July	AstraZeneca Meeting	<i>Emerging Bipolar Disorder Spectrum Conditions: Is Bipolar II Increasing?</i>	Santiago, Chile	Parker
July	Department of Psychiatry of the Universidade Federal do Rio Grande do Sul	<i>History and Development of the Black Dog Institute</i>	Porto Alegre, Brazil	Parker
July	1er Simposio Red Internacional de Psicopatología Descriptiva	<i>Melancholia – A Distinct Disease Category or Merely a More Severe Form of Depression?</i>	Santiago, Chile	Parker
July	Department of Psychiatry of the Universidade Federal do Rio Grande do Sul	<i>Modelling the Bipolar Disorders: Diagnosis and Management of BP II</i>	Porto Alegre, Brazil	Parker
July	Department of Psychiatry of the Universidade Federal do Rio Grande do Sul	<i>The Future of Major Depression? Modelling and Measuring Melancholia</i>	Porto Alegre, Brazil	Parker
September	Suicide Prevention Conference 2012: Ideas, Innovation, Implementation - Satellite Meeting of the Safety 2012 World Conference	<i>eHealth & Suicide Prevention: What We Know?</i>	Auckland, New Zealand	Christensen
September	6th International Invitational Seminar on Credit and Counselling, Magdalene College	<i>Using the Internet and Technology to Deliver Self-Help Programs</i>	Cambridge, UK	Christensen
September	RANZCP New Zealand Conference 2012	<i>Modelling, Diagnosing and Managing Bipolar II Disorder</i>	Wellington, New Zealand	Parker
October	International Biennial Congress of The Marcé Society	<i>Australian Clinical Practice Guidelines for Depression and Related Disorders in the Perinatal Period: 2011</i>	Paris, France	Austin
October	International Biennial Congress of The Marcé Society	<i>Psychiatric Admission Across the Perinatal Period – New Findings from Australian Linked Data</i>	Paris, France	Austin
October	International Conference on Early Psychosis	<i>Virtual or e-Therapies as a New Portal and a Cost-Effective Option</i>	San Francisco, USA	Christensen
October	20th World Congress on Psychiatric Genetics	<i>Genetic and Brain Imaging Studies in Young People at High Risk of Bipolar Disorder</i>	Hamburg, Germany	Mitchell
October	International Biennial Congress of The Marcé Society	<i>Perinatal Mental Health in Australia: Outcomes from Epidemiological and Longitudinal Survey Based Studies</i>	Paris, France	Reilly
NATIONAL				
February	In-house presentation at St John of God Hospital	<i>Mood Disorders in Pregnancy: To Medicate or Not – That is the Question</i>	Sydney	Austin
February	NSW Official Visitors Program-Training Day	<i>Electroconvulsive Therapy</i>	Sydney	Loo
February	Bloomfield Hospital In-Service	<i>Can We Predict Who Will Develop Bipolar Disorder?</i>	Orange, NSW	Mitchell
February	Medical Practitioners in Orange Seminar	<i>Can We Predict Who Will Develop Bipolar Disorder?</i>	Orange, NSW	Mitchell
March	NHMRC Council	<i>Overview of New Mood Disorders Program Grant</i>	Canberra	Mitchell
March	Black Dog Institute Developing Countries Program, Black Dog Institute	<i>Psychopharmacology of Mood Disorders</i>	Sydney	Mitchell
March	Improving Identification and Management of Mood Disorders 2012 Training Program, Black Dog Institute	<i>Conceptualising and Managing Bipolar Disorder</i>	Sydney	Parker

Month	Event Name	Presentation	Location	Presenter
March	Improving Identification and Management of Mood Disorders 2012 Training Program, Black Dog Institute	<i>Conceptualising and Managing Depression</i>	Sydney	Parker
March	Happiness & It's Causes	<i>Mood Disorders – Is There a Sunny Side?</i>	Sydney	Parker
March	Mental Health Symposium, The Lawson Clinic	<i>New Perspectives in the Diagnosis and Treatment of Mood Disorders</i>	Sydney	Parker
April	CSGPN Perinatal Inservice	<i>Caring for Mothers and Babies: Challenges in the Postnatal Period</i>	Sydney	Austin
April	NSW Institute of Psychiatry Psychiatric Training Program	<i>Introduction to Bipolar Disorder</i>	Sydney	Mitchell
April	NSW Institute of Psychiatry Psychiatric Training Program	<i>Management of Bipolar Disorder</i>	Sydney	Mitchell
May	Australian Psychological Society	<i>Delivering Depression Prevention via the Internet</i>	Sydney	Christensen
May	HealthEd Integrative Mental Health Seminar	<i>Fish Oils and Mental Health – What Does the Evidence Really Say?</i>	Sydney	Hegarty
May	RANZCP 2012 Congress	<i>ECT</i>	Hobart	Loo
May	RANZCP 2012 Congress	<i>tDCS</i>	Hobart	Loo
May	Clinical and Practice Expo (Pharmacy Guild)	<i>Update on the Therapeutics of Bipolar Disorder</i>	Sydney	Mitchell
May	The Sydney Institute	<i>A Psychiatrist on the Couch – Views from the Other Side</i>	Sydney	Parker
May	NSW Institute of Psychiatry	<i>Modelling and Managing Mood Disorders – The Importance of Classification</i>	Sydney	Parker
May	Nutrition in Medicine, Panelist	<i>Mood & Anxiety Disorders</i>	Melbourne	Parker
May	Nutrition in Medicine	<i>Omega-3 Fatty Acids and Mood Disorders in Pregnancy</i>	Melbourne	Parker
May	Nutrition in Medicine	<i>Paradigm Shifts</i>	Melbourne	Parker
June	Antenatal Shared Care Update	<i>The Management of Perinatal Mental Illness</i>	Sydney	Austin
June	Australian Suicide & Self-harm Prevention Conference	<i>Community-Based Suicide Prevention: Literacy, Campaigns, Messaging and Collective Impact.</i>	Cairns	Christensen
June	Australian Suicide & Self-harm Prevention Conference	<i>How Much Does the Population Know About Suicide? What are Their Attitudes to it?</i>	Cairns	Christensen
June	Specialist Mental Health Services for Older People Benchmarking Forum, NSW Health	<i>ECT</i>	Sydney	Loo
June	UNSW Heads of School Retreat	<i>Can a Head of School be a Productive Researcher?</i>	Sydney	Mitchell
June	Complex Case Review, POW Hospital	<i>Risky Business: Money and Mania</i>	Sydney	Parker
June	National Jansen Newman GP Chronic Disease Workshop	<i>Living Well with Chronic Disease: A Multidisciplinary Approach to Chronic Disease Management</i>	Sydney	Wilhelm
July	Maternity, Mothers and Mental Health 2012 Mothering Conference	<i>Maternal Stress, Anxiety and Depression in Pregnancy: Impact on Obstetric and Infant Outcomes</i>	Sydney	Austin
July	Optimising Women's Perinatal Mental Health	<i>National Perinatal Depression Initiative Update</i>	Melbourne	Austin
July	Depression Across the Lifespan, Inner West Medicare Local Area	<i>Screening, Referral and Management of Perinatal Depression</i>	Sydney	Austin
July	International Motoneuron Meeting	<i>Mechanisms and Dynamics of Oscillatory Input to Motoneurons</i>	Sydney	Boonstra
July	Dialogues in Depression Conference	<i>Internet Interventions for Mood Disorders</i>	Sydney	Christensen
July	44th Annual Conference of the National Association of Australian University Colleges (NAAUC), Panelist	<i>Mental Health Panel</i>	Sydney	Christensen
July	NSW Fire and Rescue Peer Support Conference	<i>Managing Workplace Mental Health</i>	Newcastle, NSW	Harvey
July	St John of God Hospital	<i>Are We Over-Diagnosing Bipolar Disorder?</i>	Sydney	Mitchell
July	Eighth Clinical Controversies	<i>DSM-5 – Nosology or Nonsense?</i>	Melbourne	Parker
July	Eighth Clinical Controversies	<i>Psychostimulant Drugs for Mood Disorders – Dangerous or a Neglected Option?</i>	Melbourne	Parker
August	First National APS e-Psychology Conference	<i>Prevention of Depression and Anxiety Using Technologies: New Directions and Developments</i>	Brisbane	Christensen
August	Ramsay Healthcare Continuing Education Workshop	<i>ECT and TMS</i>	Adelaide	Loo
August	Rural and Remote Area Psychologists' Program Workshop, Black Dog Institute	<i>Practical Resilience Building Strategies for Young People</i>	Sydney	Manicavasagar
August	Black Dog Institute Facilitators for Professional Development Meeting	<i>Are We Over-Diagnosing Bipolar Disorder?</i>	Sydney	Mitchell
August	Master of Genetic Counselling Program, University of Sydney	<i>Genetics of Mental Illness</i>	Sydney	Mitchell
August	St Andrews Cathedral Workshop	<i>Helping Those With Depression</i>	Sydney	Mitchell
August	Clinical Meeting, POW Hospital	<i>A Psychiatrist's Life</i>	Sydney	Parker
August	Servier NSW GP Clinical Meeting	<i>Managing and Understanding Melancholia</i>	Bowral, NSW	Parker
August	Servier: Dialogues in Depression	<i>Modelling and Managing the Depressive Disorders – A 'Horses for Courses' Model</i>	Gold Coast	Parker
August	First National APS e-Psychology Conference	<i>Mobile Phone Interventions for Mental Health: Overview of the Emerging Field</i>	Cairns	Proudfoot

Month	Event Name	Presentation	Location	Presenter
September	7th Annual UNSW Brain Sciences Symposium 2012 - Networks and Neuroscience: The Connected Brain	<i>Oscillatory Networks in Resting-State Brain Activity</i>	Sydney	Boonstra
September	7th Annual UNSW Brain Sciences Symposium 2012 - Networks and Neuroscience: The Connected Brain	<i>Delivering Depression Prevention via the Internet</i>	Sydney	Christensen
September	Comcare National Conference	<i>Mental Health and Wellbeing in Large and Diverse Workplaces</i>	Sydney	Harvey
September	SA Neurostimulation Retreat	<i>ECT and Neurostimulation</i>	Barossa Valley, SA	Loo
September	Children's Hospital Education Research Institute	<i>Building Resilience to Psychological Problems: Improving the Mental Health of Young People</i>	Sydney	Manicavasagar
September	AstraZeneca Meet the Experts	<i>The Science of Happiness and Wellbeing</i>	Hunter Valley, NSW	Parker
October	The Annual National Suicide Prevention Conference – Innovation in Suicide Prevention: Bringing It Together	<i>Predictors of Ideation and Capability</i>	Sydney	Christensen
October	Queensland Neuropsychiatry Interest Group	<i>Neurostimulation Forum</i>	Brisbane	Loo
October	Grand Rounds, Graylands Hospital	<i>Bipolar II Disorder: A Review</i>	Perth	Parker
October	Grand Rounds, Austin Hospital	<i>Bipolar II Disorder: A Review of its Modelling, Detection and Management</i>	Melbourne	Parker
October	Glenside Hospital	<i>Bipolar II: Modelling, Detection and Management</i>	Adelaide	Parker
October	AstraZeneca Lecture	<i>Modelling, Detection and Management: Bipolar II Disorder</i>	Perth	Parker
October	The Royal Brisbane and Women's Hospital Symposium	<i>Sex, Chocolate and Exercise</i>	Brisbane	Parker
November	22nd Australasian Psychophysiology Conference	<i>Effect of Mnemonic Load on Cortical Activity During Visual Working Memory: A Comparison of Event-Related Potentials and Power Changes</i>	Sydney	Boonstra
November	Health Science Alliance Annual Scientific Symposium	<i>Cognitive Impairment in Pregnancy: Myth or Fact?</i>	Sydney	Christensen
November	School of Psychiatry Academic Seminar Series, St George Hospital	<i>Carving Psychoses at its Biological Joints</i>	Sydney	Green
November	HealthEd Integrative Mental Health Seminar	<i>Fish Oils and Mental Health – What Does the Evidence Really Say?</i>	Melbourne	Hegarty
November	Royal Melbourne Hospital	<i>ECT Workshop</i>	Melbourne	Loo
November	Health Service Alliance First Annual Scientific Symposium, Session Chair	<i>Science and Health for Women in 2012</i>	Sydney	Loo
November	NSW Institute of Psychiatry Psychiatric Training Program	<i>An Approach to the Management of Treatment Resistant Depression</i>	Sydney	Mitchell
November	Civil Aviation Safety Authority Medical Advisory Policy Making Panel	<i>Bipolar Disorder – Features Relevant to Pilot Safety</i>	Sydney	Mitchell
November	Psychosis Australia Strategic Planning Meeting	<i>Bipolar Disorder Research Audit and Priorities in Australia</i>	Sydney	Mitchell
November	Civil Aviation Safety Authority Medical Advisory Policy Making Panel	<i>Depression – Features Relevant to Pilot Safety</i>	Sydney	Mitchell
November	AstraZeneca GP Central Coast Meeting	<i>A Piece of My Mind: Pattern Analysis in Clinical Medicine</i>	Gosford, NSW	Parker
November	AstraZeneca Lecture	<i>Bipolar II Disorder: A Review of its Modelling, Detection and Management</i>	Toowong, Queensland	Parker
November	AstraZeneca Lecture	<i>Bipolar II: Modelling, Detection and Management</i>	Sydney	Parker
November	Servier: Dialogues in Depression	<i>The Pursuit Of Happiness</i>	Melbourne	Parker
November	Servier: Dialogues in Depression	<i>The Pursuit Of Happiness</i>	Sydney	Parker
November	Australian Doctor Rural Doctors Seminar	<i>Making Sense of Major Depression</i>	Sydney	Wilhelm
December	Australian Cognitive Neuroscience Meeting	<i>Effective Brain Connectivity</i>	Brisbane	Breakspear
December	Australasian Society for Psychiatric Research (ASPR) 2012 Conference	<i>Prevention of Anxiety Using a Web Intervention</i>	Perth	Christensen
December	Australasian Society for Psychiatric Research (ASPR) 2012 Conference	<i>Working Memory Performance-Elicited Insular Activity as a Shared Neurocognitive Marker of Psychotic Illness.</i>	Perth	Green
December	Australasian Society for Psychiatric Research (ASPR) 2012 Conference	<i>Looking After Our Own: A Qualitative Study of Sick Doctors and the Obstacles that Prevent Them Returning to Work</i>	Perth	Harvey
December	Australasian Society for Psychiatric Research (ASPR) 2012 Conference	<i>The Long Term Consequences of Military Deployment: A Five-Year Cohort Study of UK Reservists Deployed to Iraq in 2003.</i>	Perth	Harvey
December	Australasian Society for Psychiatric Research (ASPR) 2012 Conference	<i>Genetic and Imaging Studies in Young People at High Risk of Bipolar Disorder</i>	Perth	Mitchell
December	MHPN Bega Network Meeting	<i>Bipolar II Disorders</i>	Bega, NSW	Parker
December	International Day of People with Disability, Commonwealth Bank	<i>Panel Discussion</i>	Sydney	Parker
December	Clinical Meeting, Prince of Wales Hospital	<i>Split Decision: Does Borderline Personality Disorder Belong on the Bipolar Spectrum? Arguments For and Against</i>	Sydney	Parker

Donations and Requests For calendar year 2012



Amy Athar (pictured)

The late Albert Hunt provided significant and valued support for the work of the Black Dog Institute. At the Donor Thank You event held at the Institute on 20 November 2012, his daughter, Amy Athar, was there when a commemorative plaque was unveiled in the garden courtyard to honour his contribution.

Our ambitious goal is to make our services and programs available to all Australians and beyond. Building scale and capacity across this big country requires support from many quarters, such as governments, statutory bodies, sponsors and donors, the corporate community, philanthropic individuals and other organisations.

The Institute is most appreciative of this generosity from donors and sponsors. The Donor Board in our reception area acknowledges particularly significant donations, sponsorships and bequests from individuals and organisations.

Following is a list of those people and organisations that have donated \$100 or more in 2012.

\$50,000 and above

Berg Family Foundation Pty Ltd
The Lansdowne Foundation

\$10,000-\$49,999

Chep Australia
Ernst & Young Foundation
Hollie Jackes Foundation
Joseph, Peter
Macquarie Group Foundation
McIntyre, Geoffrey & Ann
Neilson Foundation
Phillips, Bill & Carolyn

\$100-\$9,999

Abbott, Ian & Carolyn
Ablos Pty Ltd
Aecom Australia Pty Ltd
Agnew, Brian & Valerie
Akins, AG & SK
Alerton Australia
Alexander, Mark
Alexander, Ron & Desley
AMP Foundation
Anderson, Ted & Meg
Anderton, Deborah
Ashton, Mel
Athar, Shah-Jushef
Atherton, David
Atlassian Pty Ltd
Australian Institute of Company Directors
Australian Radio Network Pty Ltd
Azab & Shenouda, S & A
Baker, Mike & Dot
Balcomb, H & D
Balint, Andrew
Balint, John & Susan
Bank of Melbourne
Bass, Suzanne
Bates, Richard & Gwenda
Bathurst Christian Life Centre
Beckingham & Elvy, Lynda & Ron
Bedoba Holdings Pty Ltd
Beeline Interior Design
Behr, Peter & Gill
Beissel, Richard
Belgiorno-Zegna, Marco
Bellara Physiotherapy Pty Ltd
Bennett, Mark
Bennett, Phil & Elesia
Benware, Patricia
Betar, Christopher
Blacktown South Public School
Blanch Towers Lawyers
Blewitt, Shane
Blomfield, RH & KA
Bogan Shire Council
Bongaree Pharmacy
Borthwick, Elizabeth
BR Corporation Pty Ltd
Bramley, Renee
BreastScreen, SESIAHS
Bremner, Peter
Bribie Bowls Club Inc.
Bribie Pools & Spa Centre
Bridgestone, Bribie Island
Bright, Ruth & Desmond
Brock, Lynda

Buckley, Jess
Bug Control (Aust) PI
Caltex, Bribie Island
Campbell, Therese
Cannon, Nicola
Cannon, Tom & Carol
Carter, David & Elsie
Casey, Tami
Cashmore, Paul
Catanzariti, RJ & KE
Catford Plumbing
Chambers, Terry & Debbie
Chant, Catherine
Chiem, Chau
Christensen, Helen
Churnin, Wendy
City of Wagga Wagga
Clarke, Ivo & Lindy
Cluff, Tanya & Michael
Coe, Rosalie
Coffs Harbour TAFE
Cole, Gemma
Collins, Ian & Jenny
Collins, Liz
Colquhoun, John & Pat
Cominak, Terry
Conomos, George & Carol
Content Security
Corney, Vickie & Ross
Cowdery, Joy & Nicholas
Cox, Julie
Cranston, Frances
Cunningham & Greenshie, Lindsay & Jemima
Cuthbert, Greg
Daracon Social Club
Dart, Nona
Davenport, Peter & Prue
Davis, Bob & Sue
Dawson, Phil & Bev
Dear, Ian & Ged
Dempsey, Janet
Deutsche Bank
Dewez, RJ & WA
Dimattina, Mark
Drastik, Helen
Drummond, Hamish & Nina
Dunhill, Brenton
Dunmoore Foundation Pty Ltd
Dunmore Lang College
Dunnell, Sharon
E3 International Pty Ltd
Edgeloe, Michael
Edwards, Sarah
Elsom, Ross
Entertainment Publications of Australia Pty Ltd
ESS Board Store
Evans, P & C
Every-Burns, Jacqueline
Eyers, Kerrie & Michael
Faure, Christine
Fenech, Paul
Feron, Edward
Feron, Monica
Field, David & Toni
Files Stibbe Lawyers
Finley, RJ

Fordham, Lorraine
Forrest, Mark
Foster, LG
Frecker, JO
Freeman, Catherine
Fresh Produce Group
Fulcher, Greg & Anne
Fulton, Kirstan
Gallop, Geoff
Gandy, Michael
Gemmell, Beryl
General Reinsurance Life Australia Ltd
Gerber, Ali & Neil
Gibson, Erin, Jess & Gai
Gordon West Public School
Gorman, Anne
Gosford High School
Grayson, Graham
Griffith Classic Motorcycle Club
Groove Lounge
Halligan, Ruth & Howard
Hamild, Tea
Hannan, Lauren
Harcourts, Bribie Island
Hardiman, Ian
Hargreaves, John & Sue
Hassell, Chris J
Hastings, Barrie & Joan
Hay, Louise
Hayward, Joan
Hazelton, K & J
Hebbard, Vince
Heckes, Frank
Hennessy, Michael
Herborn, Will
Herefords WA Inc
Hess Roney, Sara
Hilmer Family Foundation
Hinde, Ron & Pamela
Hindmarsh, Col & Barb
Hodgkinson, James and Cathy
Hof, Kym
Holder, Anne & Gerald
Holland, Jay
Hooke, Neil
Hooper, G & Family
Hughes, Gray & Bev
Hunter Hall International Limited
Hyde, Doug & Sandy
Hyman, Ken
Ingham, Rob & Pam
Ireland, Geoffrey
Irving, Richard
Jaensch, Roger
Jeffrey, Brian & Diane
Jenkins, Jane
JK Group Inc.
Joe & Frances, Margaret & Sylvio, Marion & Damien,
John Delaney & Nette Davenport
Johnson, Greg & Dee
Jones, Pauline
Kambala School
Kamins, Jeffrey
Karori Pastoral Co. Pty Ltd
Kegel, Monika
Kendler, Scott & Di

Kennard, Andy & Prue	Loewenthal, Bill	Pennant Hills High School	Simpson & Neilson, Jeffrey & Beau
Kerr, Miranda	Logan, David & Sue	Penney, CJ & LH	Slayden, Mary Lynn
Kerridge, Keith & Maureen	Lowe, Lee	Performex Studios Pty Ltd	Smith, Kelvin & Annie
Kiama Mens Monthly Mental Health Meal Group	MacNeall, Jane	Perpetual Philanthropy	Smith, Martin
Kimber, Doug & Rosie	Magnus	Perrett, Kate	Smith, Robert
King, Greg	Malcolm, Scott & Jane	Perry, Agnes	Smyth & Grech, Ciara & Simon
Kinghan, Cen	Mallett, Edward	Pettigrew, Keith	St Agatha's Catholic Primary School
Kirby, Tom	Mandystribe	Pharmacy Guild of Australia	St Peters Lutheran College, Year 12
Knight, Frank	Mann, Diane	Pickering, Sarah	Staff of Commonwealth Bank Securities
Kong, Camille	Manser, Megan	Playfair, Matthew	Stephens, Craig
Lahm, June	Maritime Union of Australia, WA Branch	Pollard, Kirsten	Stern, Deanna
Lamphee, Paul	Marsh Australia	Powell, Keith & Jenny	Steve Kelly Plumbing Pty Ltd
Larke, Terry & Sue	Marston, Andrew	Powell, Thomas	Stevenson, Janie
Lata, Sanjeshny	Matthews, Heather	Power Living Australia	Stiles, Peter
Laundy, Margaret	Maynard, Sharon	Prentice, Max	Stretch, Jonathan
Layman, Frances	McBride, Frances & Ross	Price & Ferguson, Simon, Peter & Rachel	Sullivan, BJ
Lear, Wayne	McCabe, Rachelle	Prideaux, Catherine	Sweeney Research Pty Ltd
Leece, RB & CJ	McCarthy, Stephen	Pringle, Lindsay	Sydney Girls High School
Lennox, John & Barbara	McCully, B & J	Professional Counselling Association of ACT & NSW	Sydney Market Foundation
Lever, Matthew	McDermott, Andrew	Pynt, Greg & Renee	Symington, Ian & Marg
Liling, Ron & Patricia	McDougall, Bruce	QBE Foundation	Symons, Jann
Lioness Club of Millicent	McKain, Joan	Queensland Teachers Union	Tamarama Surf Lifesaving Club
Lions Club of Alice Springs	McLeary, Michael	Quin, Darren	Teachers Mutual Bank
Lions Club of Barmera	McMaster, Tim	Quinn, Bron & Nick	The Armchair Collective
Lions Club of Bendigo	McMorrow, Louise	Quinn, Garry	The Deane Family Trust
Lions Club of Boyne Island	McNamara, BM	Recovery Station	The Hills Shire Council
Lions Club of Broken Hill	Meades, Ali & Jerry	Rees, CE & KM	The Melbourne Romance Writers Guild
Lions Club of Busselton	Merewether District Cricket Club	Rees, SM	The Normanhurst Netball Club
Lions Club of Canberra, Belconnen	Minter Ellison	Rees, Warren	The RA Gale Foundation
Lions Club of Charlton	Monte Sant' Angelo Mercy College	Rickert, Clayton	The Rotary Club of Tamworth West Inc
Lions Club of Cowaramup	Moore, Michelle	Riggs, Frances	Thrift, Alex
Lions Club of Darwin, Nightcliff	Moorhen, Sue	Rigney, Chris & Lesley	Tickner, Amy
Lions Club of Esperance	Morgan, Bruce	Riverview, Saint Ignatius College	Tims Tyres & Auto Pty Ltd
Lions Club of Gilgandra	Morgan, Eileen	Roach, Ramona	TLE Menai, Electrical Wholesalers
Lions Club of Goondiwindi	Mudgee Grassroots Rugby Charity Bike Ride	Robb College, UNE	Tong, Alicia
Lions Club of Griffith	Murray, Ken	Robertson, Renee	Toomey, John
Lions Club of Heathcote	Murray, Simon	Robinson, Tim	Town of Cambridge Social Club
Lions Club of Huntly, Epsom	Musial, Kristina	Rodger, Catherine	Trebeck, Jules & Lindy
Lions Club of Inglewood	Myerscough, Matthew	Rotary Club of Frankston, Long Island	Tucker, PC & JM
Lions Club of Kalangadoo and District Inc.	Narraweena Jnr Football Club	Rotary Club of Nowra Inc	Ulysses Club, Bunbury Branch
Lions Club of Mackay North	Narromine Crafting	Rotary Club of Rose Bay Inc.	United Way Australia
Lions Club of Margaret River	National Seniors Australia, Penrith Branch	Rotary Club of West Pennant Hills & Cherrybrook	Urquhart, Kim
Lions Club of Merredin Inc.	Neilson, Michael	Roubicek, John & Helen	Vallis, John & Parea
Lions Club of Montrose	Nell & Herman Slade Trust	Royds, Olive	Vickery, PS & PL
Lions Club of Moree	Newton & Bradstreet, Mark & Carmel	Russell, Steven	Vodafone Foundation
Lions Club of Mount Gambier	Nicholas, GA & TA	Rymer, Julia	Vowell, Charles & Sally
Lions Club of Muswellbrook	Nicholls, Lynne	Salkeld, Bob & Rhonda	Wakehurst Wackers Golf Group
Lions Club of Peterborough	North Sydney Boys High School	Salt, Gregory	Wales, Joan
Lions Club of Pinnaroo	Northash, Michael & Sue	Salter, Philip & Christine	Wallace, Scott
Lions Club of Port Augusta	Nyman, Jeremy	Sanders, Joan	Waller, Jake
Lions Club of Surat	Oatley Leo Club	Sargent, Garry	Walmsley, Matthew
Lions Club of Swan Hill	Oceanic Coal	Sarikas, John	Watkins, William
Lions Club of Tamworth	O'Dea, Michael & Marianne	Schmidhofer, Amanda	Watts, RE & EK
Lions Club of Temora	O'Gorman, Mary	Schmidt, Juliet	Weston, Max & Lyanne
Lions Club of Tennant Creek	Olding, Simon & Anna	Scott, Felicity	Westpac Group
Lions Club of Wagga Wagga South	Oliver, Robert	Seiden Family Trust	Westrac
Lions Club of Warren	ONEill, Paul	Semmler, Peter	Williams, Mark
Lions Club of Western Kangaroo Island	Ord Minnett	Servier Laboratories Australia	Wills, Tom
Living In The Second Half, Thornley Community Baptist Church	Orman, Jan	Shaw, Phil & Fiona	Wilson, PB & SM
Lo Castro, Maria	Ormond College Students Club Inc.	Shearers Bookshop	Wong, Stephanie
Lo, David	Parfett, Bruce	Sheppard, Geoff & Marilyn	Woodside
Lochart, CMC & JL	Parker, Ross & Lorraine	Sheppard, Guy & Eve	Wyong Shire Council,
Lockhart Ex-Servicemens Club Ltd	Peattie, Alistair	Sheppard, John & Barbara	Ys Men's Club of Broken Hill
		Simelius, Josephine	Yuncken, Cathy
			Zenith Sports Services

Bequest Form

A bequest to the Black Dog Institute is a lasting way to assist the Institute to continue its research and other programs, and, in turn, help improve the quality of life of people living with depression. If you would like more information on how to make a bequest, please contact the Institute [blackdog@blackdog.org.au] or phone (02) 9382 9263.

Bequest Form

I (name) _____

of (address) _____

give, devise or bequeath to the Black Dog Institute or its successors, the sum of \$ _____

An official receipt from or on behalf of the Black Dog Institute shall be sufficient discharge to my executors who shall not be bound to see the application thereof.

Postal address for donations:

Black Dog Institute
Hospital Road
Prince of Wales Hospital
Randwick NSW 2031

Please make all cheques payable to **Black Dog Institute**.



BLACK DOG INSTITUTE

www.blackdoginstitute.org.au

www.biteback.org.au