

BLACK DOG INSTITUTE



**HOW BLACK DOG LOWERS  
DEPRESSION PREVALENCE**

**THE BLACK DOG INSTITUTE**

**2013**

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# How Black Dog Lowers Depression Prevalence

## *Black Dog Institute Policy 2013*

The Black Dog Institute is dedicated to lowering the prevalence of depression in Australia through the following key activities:

### **Improving translation of knowledge into practice and policy**

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Black Dog is a translational organisation that generates new research, “translates” it into clinical treatments, provides professional training and promotes knowledge to the public about depression. As the only specialised mood disorder institute in Australia, its programs are delivered nationally and internationally. Its staff of 110 include leading academics in mood disorders, experienced clinical psychiatrists and psychologists, education and professional training experts, and community specialists, delivering programs into schools and workplaces. The two key characteristics of Black Dog are, firstly, a model, consistent with current Federal and NSW policy for science, which recommends a “translation approach”, multidisciplinary engagement, and delivery and interaction with industry and the community. The second key feature is that it provides the best possible specialist care to 1000s of general practitioners, thus promoting “integrative care”. The Australian system of care currently has the GP as the centre of the care system. However, many individuals will not respond to first stage primary care, and require specialist input and advice. The Black Dog model buttresses primary care by providing world-class diagnosis and sophisticated assessment, case formulation and management, and communication directly with the practitioner<sup>1</sup>.

### **Offering expertise in diagnosis and second opinion to improve treatment and avoid hospitalisation**

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#### **Bipolar disorder**

The Black Dog Institute provides an international level of clinical and research expertise in bipolar disorder. There is a specialised bipolar disorders clinic, which has assessed in detail over 400 patients with this condition over the last 10 years, most of whom had previously responded poorly

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<sup>1</sup> Berk, M, Scott, J, Macmillan, I, Callaly, T and Christensen, HM. The need for specialist services for serious and recurrent mood disorders. ANZJP, 47 (9) 815-8188.



to treatment. The clinic provides high-level advice about new management options and is strongly valued by clinicians, patients and families in NSW and across the country. The clinical and research program is led by Professor Philip Mitchell, AM. Professor Mitchell has a high profile for his work in bipolar disorder both nationally and internationally. He is President-Elect of the Australasian Society for Bipolar and Depressive Disorders and has served on a number of major taskforces of the International Society for Bipolar Disorder (on the better recognition of bipolar depression; the role of antidepressants in this condition; and in diagnostic nomenclature).

## Depression

The Black Dog Institute provides an international level of clinical and research expertise in Major Depression. The founding director, Prof Gordon Parker, is an international expert in diagnosis of depression. Through its online MAP project, the depression clinic at the institute has provided diagnostic assistance to almost 20,000 depression patients. The Depression Clinic assesses over 1,000 patients a year, and recommends treatment based on the subtype of depression experienced by the patient. Different treatments are indicated for different diagnosis type. Black Dog researchers have found that most of the people attending the clinic receive new diagnoses after assessment, with a resultant direct follow on to better outcomes.

## Translating proven treatments in current practice

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ECT is the most effective proven treatment for depression requiring biological treatment. It is used to treat the most severely ill patients and is a key and essential therapy in treatment resistant depression. It is often life-saving. For depressed patients who have not responded to ECT, further treatment options are very limited. Many will continue to be chronically depressed and disabled. Some will end their lives by suicide. ECT is stigmatised in our community and often presented as a controversial treatment by the popular media. This is a source of potential reputational damage to health services and the psychiatric profession.

For all the above reasons, it is essential that ECT treatment is given at a high standard of competence across all hospitals in Australia offering ECT, and that the most difficult to treat patients can access expert ECT treatment. Professor Colleen Loo is recognised nationally and internationally as an ECT expert and provides a consultation service to psychiatrists from around NSW and Australia to advise on ECT treatment for their most difficult patients.

## Developing and delivering novel treatments

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### Bipolar disorder

BDI has also had a long-standing track record of internationally highly-regarded research into this condition, with many papers focusing on enhanced recognition of this condition, improved psychological and biological treatments, and better understanding of the underlying biological and



psychological causes. One of the current research areas of focus is the “Bipolar Disorder Kids & Sibs study” which aims to identify those young people who are at particular high risk of developing this condition. Identification of such youth at risk will enable the development of future focused early intervention and preventive programs to improve the future lives of those individuals. The

study currently involves about 150 high-risk subjects, 125 controls and 65 who have already developed this condition. We have already been able to identify distinct differences in the high-risk subjects in terms of both their clinical presentation, molecular genetic risk profile, and brain functioning (particular in terms of functional connectivity between different brain regions).

## Depression

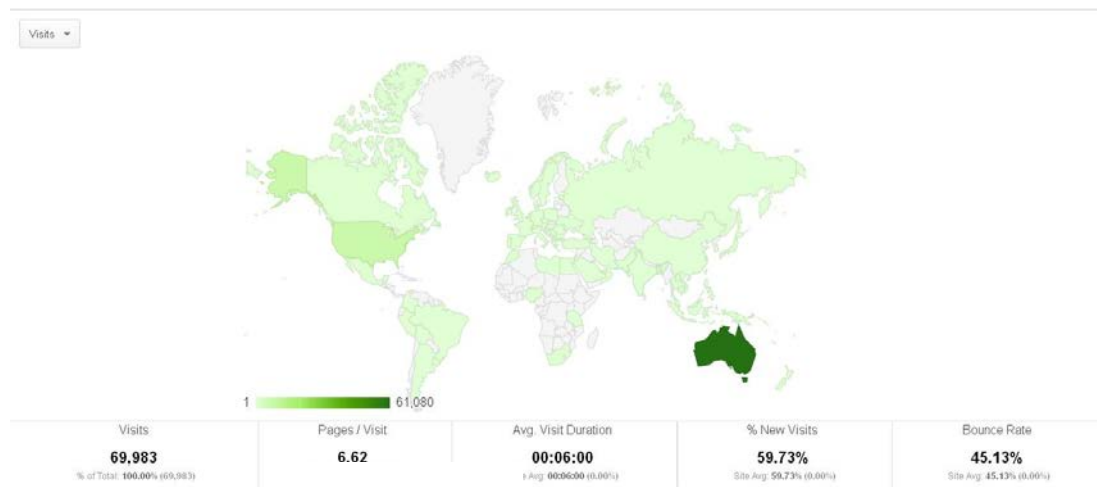
Neurostimulation (including Transcranial Magnetic Stimulation and Transcranial Direct Current Stimulation) is a new and rapidly emerging field of new treatments, particularly for depression, in psychiatry. TMS is currently emerging into clinical practice in Australia. The recently revised RANZCP guidelines recognise rTMS as a clinical treatment for depression. Medicare is assessing a proposal for an item # for TMS for depression (expected decision 2014). Neurostimulation is a treatment directed by Professor Loo at Black Dog Institute. Possibly even more promising is another neurostimulation treatment, transcranial Direct Current Stimulation (tDCS). Trials to date suggest this may have similar efficacy to TMS, carries less risk (no risk of accidental seizures) and has 1/10 the equipment and set up costs. Ketamine is emerging as a powerful antidepressant treatment which has been reported to be effective even in approximately 50% of patients who have failed to respond to ECT. Studies report 70% response rates within 72 hours of a single treatment. This has enormous potential public health implications – e.g. combined with other treatments for rapid alleviation of depression while other, longer-term treatments are initiated. Professor Loo’s trial at Wesley Hospital is the only ketamine depression trial in Australia. tDCS and ketamine treatment are only available through research programs run by Professor Loo.

## Leading e health services and training

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BDI researchers have a long-standing track record in developing e health interventions as a new means of delivering mental health programs to the public. It provides a range of e health programs including MyCompass (mobile phone and web for depression), MAP (assessment of depression typology for general practitioners and psychologists), BiteBack (a positive psychology program for teenagers), with new programs in development for suicide prevention for the public and for indigenous youth. Professor Helen Christensen and Associate Professor Judy Proudfoot are international pioneers and leaders in e health, and have served on the Australian E Health Advisory Committee to steer implementation of e health policy in Australia. The Institute has received DOHA funding to deliver e health training to general practitioners nationally, plus additional funding to deliver MyCompass and Biteback to the community. MyCompass and BiteBack provide coverage across Australia and the world.

**Figure 1. Total number of visits to the myCompass site (26 June- 8 Oct, 2012).**



## Developing and delivering quality workplace programs and policy

The impact of mental health problems in the workplace is enormous and increasing. Mental illness is now the leading cause of long-term sickness absence and disability support pensions in Australia. Depression alone costs Australian industry over \$12 billion each year due to absence, reduced productivity and increased staff turnover. The Black Dog Institute is already well known for the education and training programs it delivers to a wide range of workplaces. However, over recent years the Black Dog Institute has begun building a world-class workplace mental health research program to inform our workplace activities. This program is led by Dr Sam Harvey and is unique in Australia for being a clinical research program solely focused on the impact mental health has in the workplace. Despite the huge cost, both economic and social, of mental illness in the workplace, we still have much to learn about how work and mental health are related. We have recently entered into collaboration with the National Mental Health Commission, the Business Council of Australia and a variety of other stakeholders to form a Mentally Healthy Workplace Alliance. This allows us to work closely with employers to understand how workplaces can be modified to be more mentally healthy and how the occupational opportunities of those with mental health problems can be optimized. We are also working with a number of specific industries where mental health problems are particularly common. We have recently commenced a number of research studies within NSW emergency services in the hope of better understanding how workplace psychological injuries, particularly post-traumatic stress disorder, can be avoided. In the future we are hoping to secure funding to allow us to develop e-health interventions that could be used in the workplace to increase psychological resilience and make it easier for workers to seek help when needed.



## Preventing depression

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Researchers at the Institute are recognised for their research into the prevention of anxiety disorders, with more than six large scale trials evaluating the effectiveness of prevention. Researchers at the institute have demonstrated that universal prevention programs using cognitive behaviour therapy are able to reduce anxiety and depression in young men in Australian schools. The field of positive psychology has been identified as one that holds promise in helping young people develop resilience to a range of mental health problems. The institute is undertaking full evaluations of Positive Psychology as a technique to promote overall well being as well as reduce problem behaviours and improve symptoms of depression, anxiety and hostility in adolescents. The Black Dog Institute is committed to improving the wellbeing of young people by increasing their resilience and reducing their vulnerability to mental health problems. The Institute's online Positive Psychology program, 'BITE BACK', comprising information about improving wellbeing, interactive activities that facilitate experiential learning and an online discussion forum is rolled out across the world.

## Lowering stigma

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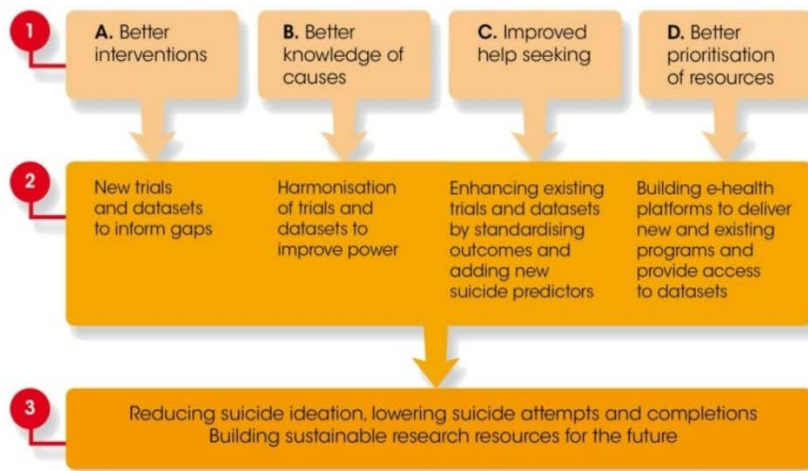
The Institute delivers a stigma reduction and resilience program called "Headstrong" to schools throughout Australia. The community team delivers evidence based awareness programs to the public through forums, schools and workplaces. Volunteers and those with lived experience deliver awareness programs to the community.

## Preventing suicide

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The Institute hosts a NHMRC Centre for Research Excellence in Suicide Prevention (CRESP). This program aims to generate new research to increase the knowledge base regarding effective prevention and treatment in suicide prevention. These aims are achieved via four research streams focusing on better delivery of interventions, better knowledge of causes and risks, improved help-seeking and improved prioritising of suicide funds. Figure 2 below highlights the four streams, the activities that are undertaken and the outcomes achieved. In the last 12 months two new online programs have been developed which aim to lower suicide ideation to those living in the community.

**Figure 2. Summary of CRESP themes, activities and outcomes.**



*Figure 1: Summary of the CRE themes, activities and outcomes*

## Promoting evidence-informed policy

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The Institute analyses research evidence and writes informed commentary on reducing levels of depression and suicide in the community. It promotes policy with focuses on these evidence-informed activities: Monitoring of stigma and mental health outcomes using standardized measures; programs based on contact with those with lived experience to lower stigma; the collection and integration of data sets to enable “big data analysis”; universal depression and anxiety prevention programs in schools and workplaces; universal health checks in schools and anonymous self-screening in workplaces; virtual clinics for physical and mental health in schools for teenagers and workplaces for adults to increase participation, productivity and academic outcomes; e-therapy and online services for mental health and drug and alcohol to increase pathways to care and improve continuity of care and integration; targeted research based on burden of disease impact; the development of a creative and larger researcher workforce; investment in the training of health professionals.

## It also recommends

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The Black Dog Institute also recommends the expansion of specialist centres in the community and across all states to promote accurate diagnosis, development of new treatments and translation of these into the mental health workforce, and to the public.

## Contacts

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