

出國報告（出國類別：開會）

美國精神醫學會年會開會報告

服務機關：衛生福利部草屯療養院

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派赴國家/地區：美國/舊金山

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摘要

本次進修之學術會議為第 172 屆美國精神醫學會年會 (172nd American Psychiatric Association Annual Meeting)，為美國精神醫學會 (American Psychiatric Association, APA) 於 2019 年之年度重要學術會議，於 5 月 18 日至 5 月 22 日在舊金山 George R. Moscone 會議中心舉行。

美國精神醫學會年會學術委員會 (APA Annual Meeting Scientific Program Committee) 於此屆年會規劃了 600 多個學術研討會、8 個海報展示場次及 38 門課程，涵蓋專業演說、先驅研究、最新病人照顧指引等相關研究報告，提供美國本國會員及國際會員多樣的進修及交流機會。

2019 年亦是美國精神醫學會創建 175 周年。年會主題訂為 **Revitalize Psychiatry: Disrupt, Include, Engage & Innovate** (振興精神醫學：擾動、包容、參與、創新)。因此，特別推薦會員參與成癮 (由 National Institute on Drug Abuse, NIDA 主辦)、兒童和青少年、多元化與健康公平、司法、老年醫學等議題，期許會員擁抱變化與機會，將排拒精神醫學之民眾或團體視為需要協助溝通的對象，鼓勵精神科醫師、患者、學員和政策制定者溝通。

參與本次會議，除了進修學習，亦參與 APA 的國際會員歡迎會及於 5 月 19 日發表本院研究結果，收穫良多。

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本文

目的

美國精神醫學會年會(American Psychiatric Association Annual Meeting)為精神醫學領域之重要學術會議。APA Annual Meeting 與 National Institute of Mental Health (NIMH)、World Federation for Mental Health, WFMH)等單位及組織合作，提供傑出的專業課程及研究報告。參與本次會議，可進修學習並發表本院研究結果，期許對臨床服務、教學與研究有所助益。

過程

Revitalize Psychiatry: Disrupt, Include, Engage & Innovate

第 172 屆美國精神醫學會年會 (172nd American Psychiatric Association Annual Meeting) 為美國精神醫學會 (American Psychiatric Association, APA) 之年度重要學術會議，於 5 月 18 日至 5 月 22 日在舊金山 George R. Moscone 會議中心舉行。

2019 年是美國精神醫學會創建第 175 周年。年會主題訂為 **Revitalize Psychiatry: Disrupt, Include, Engage & Innovate**。APA President Dr. Stewart 於會員歡迎詞中指出：**Revitalize** 意指精神科醫師應該擁抱變化、將之視為振興精神醫學的機會。**Disrupt**：意指行動和改變、不怕使用不同的方法擴大精神醫學領域。**Include**：接受多樣性、解決差異、增加所有人獲得精神衛生服務的機會。**Engage**：識別對精神醫學不滿意者並銜接他們與精神科醫師、患者、學員和政策制定者的連結。**Innovate**：有意識地引進研究、教育、照護、政策、技術的新主意。因此，特別安排成癮 (由 National Institute on Drug Abuse, NIDA 主辦)、兒童和青少年、多元化與健康公平、司法、老年醫學等議題，期許會員擁抱變化與機會，將排拒精神醫學之民眾或團體視為需要協助溝通的對象，鼓勵精神科醫師、患者、學員和政策制定者多溝通。

美國精神醫學會年會學術委員會 (APA Annual Meeting Scientific Program Committee) 於此屆年會規劃了 600 多個學術研討會、8 個海報展示場次及 38 門課程，涵蓋專業演說、先驅研究、最新病人照顧指引等相關研究報告，提供美國本國會員及國際會員多樣的進修及交流機會。抱著學習新知及標竿的心情，我特別學習的主題為

Neuromodulation Techniques、Advanced Pharmacological Management for Depression 與 Treatment-Resistant Depression。也特別參與學習 SMI Adviser、Mayo Clinic、American Academy of Child and Adolescent Psychiatry 等單位的展示與活動。

Overview of the History of APA and Psychiatry in America

由於適逢美國精神醫學會創建 175 周年，年會會場特別闢了歷史軌跡專區及安排各項活動及講座，呈現 1844 年由 13 位精神科醫院的院長在費城 (Philadelphia) 創立 Association of Medical Superintendents of American Institutions，以定期討論照顧病人、維護病人權益事宜，直至擴大到今日成為全球最具影響力的精神科醫師專業組織 APA 的歷程。美國精神醫學會歷年的法規推動 (Community Mental Health Centers Act 1963、Mental Health Parity and Equity Addiction Act of 2008)、重要文件、出版品及年會議題，也是現代精神醫學發展的縮影。

International Member Welcome and Conference report

年會舉辦地點舊金山，是開放、包容、支持創新及打破常規的都市；會議所在地點 Moscone center 以支持同志平權運動的舊金山前市長 George Moscone 命名，是加州最大的會議和展覽中心。開幕當天上午，APA 執行長 Dr. Levin 為國際會員舉辦了歡迎會及國際會員會務報告。歡迎會及會務報告以早餐會的方式舉行，與各國會員交換自己國家的精神醫學制度與即將發表的主題，是難得的經驗。由於 5 月 17 日台灣通過同婚專法，成亞洲首個同婚合法化國家，歡迎會的主辦單位之一 California Psychiatric Association (CPA)前主席 Dr. Arroyo 特別向會員們介紹來自台灣的我及蔡醫師，意外的

增加一些台灣的國際能見度。

Poster Presentation

於 5 月 19 日, Poster Session 3, 我很榮幸代表本院發表研究 13-Year National Trends of Annual Rates and Primary Diagnosis in First-Time Psychiatric Hospitalization Among Different Age Groups in Taiwan。駐足於此海報的各國會員們，對於台灣的健保制度特別有興趣，我們並就自己國家的住院趨勢交換意見。

Neuromodulation Techniques

Dr. Richard Calvin Holbert 等專家介紹神經調節技術(Neuromodulation techniques)，包含美國已核准及研究中之技術，如 repetitive Transcranial Magnetic Stimulation (rTMS)、Deep Brain Stimulation (DBS)、transcranial Direct Current Stimulation (tDCS)及 Cranial Electrotherapy Stimulation (CES)。Dr. Richard Calvin Holbert 等專家指出，Neuromodulation techniques 於精神科領域方興未艾，儀器的發展使得技術門檻降低，但醫師們對於 neurobiology 的理解、病患禁忌症的評估與副作用的處理（例如認知功能相關副作用），需更加注意。

Advanced Pharmacological Management for Depression 與 Treatment-Resistant Depression

在美國，約有 2 百萬病人使用 2 種以上抗憂鬱劑治療仍成效不彰，屬於難治型憂鬱症 (Treatment-Resistant Depression)。難治型憂鬱症病患的生理共病比率、住院次數及住院天數均高於一般憂鬱症患者，而且病程反覆發作、自殺風險為一般憂鬱症患者

的 7 倍。因此，難治型憂鬱症的治療，一直是重要的研究及臨床議題。甫於今年 5 月正式通過美國 FDA 核准於成人難治型憂鬱症的 Esketamine，其自 2001 年進入 phase II study 到獲得核准的發展歷程，於會中引起廣泛的討論。Dr. James W. Murrough 等專家帶領與會者回顧與探討 glutamate NMDA Receptor 理論、神經生理及發炎機轉與 Treatment-Resistant Depression 致病機轉之連結、以及難治型憂鬱症的各项治療模式 (如 deep brain stimulation 及 electroconvulsive therapy)。

SMI Adviser: Find answers that help people with serious mental illness

由於對 Severe Mental illness 的醫病溝通資源十分有興趣，會場中由 Substance Abuse and Mental Health Services Administration (SAMHSA，藥物濫用和精神衛生服務管理局)贊助，委託 APA 管理的 SMI Adviser，每天都有專人講座並搭配錄製教育資料，讓我深感興趣。例如 **SMI Adviser** 建議專業人員如何就思覺失調症患者的合併症狀，如憂鬱症和物質使用障礙，設計評估和治療計畫，並達到良好的醫病溝通。APA 與 30 多個精神衛生組織的團隊合作，發展了實用的線上諮詢系統，協助重症患者、家庭、朋友方便找到所需的治療和支持資源；也提供一般科醫師與精神科醫師實用的繼續教育，以做出基於證據的治療決策。線上教育與諮詢資源，台灣其實已很普及，但是回國後，我仍持續追蹤 **SMI Adviser**，發現每周均有新的主題可供學習、或是同一主題會更新資料，以確保提供最新的知識。能做到上述，除了經費支援，管理團隊與抱著提供使用者最新訊息的決心，值得學習。

心得及建議

感謝醫院提供此一難得的機會。參與本次會議，除了進修學習，亦參與 APA 的國際會員歡迎會及於 5 月 19 日發表本院研究結果，收穫良多。

回顧 APA 或是台灣精神醫學會創立的歷史，均提醒我們莫忘初衷，改善精神病患的治療與生活品質，才是創始學會及學術研究的動力。出國進修所學，當用於發展提升病患、家屬、社區所需之業務發展，例如思覺失調症個案的全人治療及嚴重憂鬱症的多元治療。

憂鬱症新治療機轉藥物、Neuromodulation Techniques 已獲認可。然而，尚有許多發展空間，難治型憂鬱症仍是精神科未來重要課題。運用平台，將重大精神疾病治療資訊、教育、醫病共享決策整合已是各國趨勢，但 APA 做到資訊即時更新，且增進運用的可近性，值得我們學習。建議未來，持續鼓勵有研究潛能的醫師參與國際學術活動。

附錄：論文報告、學分證明及與會照片

selected electives in the past 5 years. A total of 87% of respondents indicated that no residents had pursued a career in pain management. Only 29% of programs were involved in multidisciplinary pain management initiatives at their institutions. Almost half (56%) of the programs planned to increase their educational offerings within the next two years. Lack of trained faculty (73%) and lack of time (37%) were the most cited barrier to increasing education and training. **Conclusions**: There is currently minimal didactic and clinical exposure to pain management across all residency years. Furthermore, few psychiatry residents pursue careers in pain management.

No. 147

13-Year National Trends of Annual Rates and Primary Diagnosis in First-Time Psychiatric Hospitalization Among Different Age Groups in Taiwan

Poster Presenter: Chun-Yuan Lin, M.D.

Co-Authors: Ya-Cheng Wang, Shuoyen Ting, Po-Han Chou, I-Chia Chien

SUMMARY:

Background First-time psychiatric hospitalization provides important information in public health because it reflects both exacerbation of psychiatric symptoms and the consequences of functional impairment of patients. The National Health Insurance Research Database (NHIRD) contains comprehensive healthcare data of 99% of the entire Taiwan population and has been successfully used to evaluate the protective or risk factors of a variety of diseases in the population. The study aimed to analyze the national trends of annual rates and primary diagnosis in first-time psychiatric hospitalization by age groups between 2000 and 2012 in Taiwan based on NHIRD. **Methods** The cases in this study were derived from the NHIRD which enrolled 266,328 patients who ever received inpatient psychiatric treatment in Taiwan. We examined the trends of first-time psychiatric hospitalization utilization among adolescents (12-18 years), adults (19-64 years) and the elderly (more than or equal to 65 years). Patients' age at first-time psychiatric hospitalization, primary diagnosis, geometric mean length of hospitalization and rate of the first-time hospitalization per 100,000 were

estimated annually. A linear regression analysis was performed to assess the changes in rate and length of first-time psychiatric hospitalization over time. **Results** The rate of the first-time psychiatric hospitalization showed significantly declined trends for adults and the elderly, from 75.36 per 100,000 in 2000 to 66.32 in 2012 ($p=0.003$) and from 94.36 per 100,000 in 2000 to 70.53 in 2012 ($p<0.0001$), respectively. The length of stay in first-time hospitalization declined in adult male group, from mean 24.08 days in 2000 to mean 18.41 in 2012 ($p=0.002$). For all groups, the proportion of schizophrenia as primary diagnosis also showed declined trends ($p=0.003$). Notably, among adolescent groups, rate and length of first-time psychiatric hospitalization remained steady while affective disorders have replaced schizophrenia as the primary diagnosis during the 13-year study period. **Conclusions** Factors contributed to the reduced rate of first-time psychiatric hospitalization in adults and elderly deserve further study. The impact after first-time psychiatric hospitalization for adolescent patients warrants further investigation.

No. 148

A Curious Case of Visual and Somatic Hallucinations in a 16-Year-Old Japanese-American Female

Poster Presenter: Clayton Barnes, M.D.

Co-Author: Juan David Lopez, M.D., M.S.

SUMMARY:

Carla is a 16 year old Japanese-American developmentally normal female, currently engaged in outpatient individual and group therapy who initially presented for medication management in 12/2016. Her initial visit was prompted by her posting suicidal statements on her Instagram account. She was subsequently diagnosed with MDD and unspecified anxiety disorder, started on escitalopram, and titrated to 20mg QD without relief of her symptoms. She was cross titrated to fluoxetine in 09/2017 to 40mg QD with no side effects. In 04/2018 the patient began describing visual and tactile hallucinations, irritability, anger and increased energy alternating with days of fatigue and sadness. She was then cross titrated to aripiprazole 10mg QD with no side effects. Since 04/2018 Carla has consistently reported seeing insects such as bees and ants, a "blue thing with all

