INTRODUCTION

In response to the growing need for quality geriatric healthcare associated with the "graying of America," UCLA has emerged as a leader in education and training in geriatric psychiatry and medicine. The Geriatric Psychiatry Training Program is a major component of the UCLA's nationally acclaimed geriatrics program, ranked #1 in America for ten years in a row by U.S. News and World Report.

With increased longevity, risk for many neuropsychiatric illnesses increases, generating a growing need for specialists with expertise in diagnosis and treatment of geriatric mental illness. Trainees are exposed to the full range of geriatric psychiatric disorders in a variety of clinical settings and receive close supervision from experienced faculty. Advances in research on aging and geriatric mental health by our renowned faculty informs clinical care and equips fellows with the most innovative approaches to depression, psychosis, age-related memory loss, Alzheimer’s disease and other dementias, and other geriatric mental health issues. Training at UCLA includes instruction in the most recent technologies, treatments, legal and ethical issues, and psychosocial aspects of geriatric psychopathology. UCLA faculty are involved nationally in geriatric psychiatry training curriculum development, and the program fosters training for future education leaders. Many opportunities for research training are also available to fellows interested in leadership roles in academic psychiatry.

TRAINING PROGRAMS

UCLA offers a one-year program for psychiatrists at the PGY V level, which is accredited by the American Council on Graduate Medical Education (ACGME). Graduates are eligible to sit for the examination to receive Subspecialty Certification in Geriatric Psychiatry. For psychiatrists with interest in academic career paths, an additional fellowship year is available with training enhanced by individual research projects, collaboration with faculty in ongoing investigations, and supervised teaching and administrative experience.
A two-year post-doctoral fellowship for psychologists provides specialized clinical and research training. Clinical assessment and treatment, case management, and research activities are emphasized. Specialty training in neuropsychological assessment of the older adult is also available. The program provides trainees with clinical experience that can be counted toward the hours required for California licensure as well as research training in preparation for an academic career.

Areas of training in both programs include:

- phenomenology of mental health in older adults
- psychiatric syndromes in older adults: cognitive disorders, psychosis, mood syndromes, anxiety, and others
- age-related physiological changes affecting clinical phenomenology and pharmacotherapy
- age-related psychosocial changes
- neuropsychology and the healthy psychology of aging
- community health issues and health service delivery research and administration

THE APPLICATION PROCESS

Applications consist of a letter that outlines specific interests in geriatric psychiatry or psychology and a curriculum vitae. Three letters of recommendation are also required, including one from a previous training director. Psychiatry candidates must have completed a full general psychiatry residency. Psychiatry candidates who are International Medical Graduates must have the “California Status Letter” in order to apply, and a California medical license prior to April 1 before training starts in order to be admitted. Psychology candidates must have completed graduate training in clinical psychology and an internship approved by the American Psychological Association. Applications from women and minorities are encouraged. The Department of Veteran Affairs, UCLA and other granting agencies (e.g. the National Institute on Aging) provide stipends, health care benefits, and other program support.

For information and application materials for the geriatric psychiatry fellowship, please go online to: http://www.psychiatry.ucla.edu/training/gp

For application materials and information on the geropsychology fellowship, please go to the following site: http://www.psychiatry.ucla.edu/training/neuropsychfellow.html.

CLINICAL TRAINING

Geriatric psychiatry and psychology trainees will assess and treat elderly patients in various inpatient, outpatient, partial hospitalization, long term care and community settings. During most clinical rotations, fellows are given administrative and teaching duties (e.g., leading treatment teams, supervising junior trainees). Clinical schedules are designed to allow time for research, course work, teaching and other training activities.
Clinical rotations occur at two major Los Angeles area medical centers: UCLA Medical Center and Neuropsychiatric Hospital and the VA Greater Los Angeles Healthcare System, which includes the West LA and the Sepulveda/San Fernando Valley campuses. In addition, fellows may arrange for elective clinical experiences at other local treatment facilities.

**UCLA NEUROPSYCHIATRIC INSTITUTE AND HOSPITAL (NPI&H)**
The clinical components of NPI&H include a 20-bed Inpatient Geropsychiatry Unit; an Outpatient Geriatric Psychiatry Service; an ECT Service; a Geriatric Day Treatment Service; and a Geriatric Assessment Program that evaluates elderly outpatients suffering from a variety of psychiatric disorders. In addition, the Geriatric Psychiatry Consultation/Liaison (C/L) Service provides both inpatient and outpatient consultations for medically ill elderly patients at the UCLA Center for the Health Sciences. Geropsychological services are integrated within each of these sites. An Integrated Geriatric Service optimizes the delivery of care by enhancing continuity and facilitating movement of patients among component activities. This in turn facilitates clinical research and teaching.

**DEPARTMENT OF VETERANS AFFAIRS (VA) TRAINING SITES**
At the VA Greater Los Angeles Healthcare System (West Los Angeles campus), trainees are exposed to a full range of clinical settings: the Geriatric Psychiatry Consultation Service; the Geriatric Psychiatry Inpatient Unit; the Electroconvulsive Therapy (ECT) Service, Neuropsychology Assessment Laboratory; the Geriatric Psychiatry and Dementia Outpatient Clinics; GRECC (Geriatric Research Education and Clinical Center); UPBEAT (Unified Psychogeriatric Biopsychosocial Evaluation and Treatment); the Nursing Home Care Unit; and the Neurobehavior Unit. The Sepulveda VA rotation provides trainees with additional experience in geriatric psychiatry C/L, nursing home care, rehabilitation, geriatric medicine, and care of patients with dementia. Trainees also participate in VA-sponsored regional conferences designed to facilitate collaboration and information exchange in research and education.

**AFFILIATED FACILITIES AND PROGRAMS**
Community rotations are available at Los Angeles County Department of Mental Health outpatient clinic sites, the Didi Hirsch Community Mental Health Center and the Jewish Home for the Aging, where trainees provide direct patient care and serve as consultants and lecturers to community groups. The Los Angeles area has one of the most culturally and ethnically diverse populations in the United States, as well as the second largest concentration of elderly persons. Trainees thus have the opportunity to care for patients from diverse backgrounds.

**CLINICAL ROTATION SCHEDULE:**
The schedule for rotation on the various clinical services and subspecialties varies somewhat from year to year depending on the number of fellows selected, and evolving training goals. A sample rotation schedule below illustrates the distribution of time spent on the different clinical services in recent years.
Tuesday seminars and conferences (all year):

11 - 12 pm: NPI Department of Psychiatry Grand Rounds
12 - 1 pm: Seminar
12 – 1 pm: Geriatric Psychiatry Grand Rounds (1x/month, lunch provided)
6:30 – 8:00pm: Geriatric Psychiatry Journal Club (1x/month)
5 - 7 pm: 8 weeks in the Spring: Biostatistics Seminar with Geriatric Medicine Fellows

RESEARCH OPPORTUNITIES

The faculty at UCLA and VA Greater Los Angeles Healthcare System are actively working on research into diagnostic tools and clinical interventions for older patients with neuropsychiatric illness. Areas of study include epidemiology, neuroimaging, genetics, neuropsychology, the phenomenology of late-life psychiatric disorders, outcomes studies, and clinical trials. Basic and clinical research programs in geriatric psychiatry at UCLA address the spectrum of geriatric mental health syndromes, including Alzheimer’s disease and related dementias; clinical and neurobiological aspects of geriatric depression; age-related cognitive changes; molecular biology and genetics of age-related mental disorders; late-onset bipolar and psychotic disorders; substance abuse and medication misuse in elderly patients; geriatric mental health services; and the relationship between physical and mental impairment in old age.

Research time may be built into the schedule of each trainee, who is assigned a primary preceptor (a member of the Fellowship Training Committee). The faculty preceptor assists the
fellow in developing and revising protocols, choosing and working with research preceptors, and carrying out administrative activities. Research preceptors provide guidance and consultation on the fellow's research project(s) and opportunities for collaboration on existing studies.

DIDACTIC CURRICULUM

The program's didactic curriculum includes:

- Advanced Geriatric Psychiatry Seminar, held weekly. Seminar topics are organized into modules on the aging process; ethical, legal and public policy issues; evaluation and diagnosis of the geriatric patient; psychiatric disorders in later life; treatment of psychiatric disorders in later life.

- Geriatric Psychiatry Journal Club, held monthly. This seminar addresses current “hot topics” in geriatric psychiatry, and includes a recent research article in the literature. Clinical research design, statistics, medical research ethics, and research funding are included in the discussion.

In addition to the core curriculum, individual seminars are held within each clinical rotation. Courses, seminars, conferences, and lectures devoted to aspects of aging are held throughout the year by various departments and clinical units within the University community.

UNIVERSITY RESOURCES

The UCLA NPI&H adjoins the UCLA Center for the Health Sciences, the UCLA School of Medicine (which includes one of the nation's largest medical libraries) and the University campus. This resource-rich environment encourages interdisciplinary research with various departments such as Psychology, Biology, Philosophy, and Economics, as well as the Schools of Public Health, Dentistry, Social Welfare, Law, Nursing, and Business. Subspecialty education flourishes in the well-established UCLA community, offering unparalleled opportunities to train academic leaders in geriatric mental health. Fellows are provided computer support, and research is supported through available grant mechanisms.

FACULTY

The interdisciplinary faculty includes experts from Psychiatry, Psychology, Neurobehavior, Geriatric Medicine, Neuropsychology, and Nursing, and faculty from other departments are involved in collaborative research projects. Faculty members provide clinical supervision, lectures, and serve as research preceptors. Brief biosketches for several contributing faculty members are included in the following section.
NAME: Jeffrey L. Cummings, M.D.
POSITION: Professor of Neurology and Psychiatry

RESEARCH/SCHOLARLY INTERESTS:
Alzheimer’s disease, vascular dementias, and neuropsychiatry

RELEVANT PUBLICATIONS:
Aarsland, Dag; Cummings, Jeffrey L.; Yenner, Gersev; Miller, Bruce  Relationship of aggressive behavior to other neuropsychiatric symptoms in patients with Alzheimer's disease. American Journal of Psychiatry v153, n2 (Feb, 1996):243
Cummings, Jeffrey L.  Dementia: the failing brain. Lancet v345, n8963 (June 10, 1995):1481
NAME: Jennifer J. Dunkin, Ph.D.

POSITION: Associate Clinical Professor
Director, Geriatric Psychology Postdoctoral Fellowship Program

RESEARCH/SCHOLARLY INTERESTS: Postdoctoral training in geriatrics for clinical psychologists, neuropsychology of aging and dementias, late-life depression, effects of hormones on mood and cognition

RELEVANT PUBLICATIONS:


Reproductive events modify the effects of estrogen replacement therapy on cognition in healthy postmenopausal women. Psychoneuroendocrinology.

**BOOKS UNDER CONTRACT**


**NAME: Randall Espinoza, MD, MPH**

**POSITION:** Associate Clinical Professor, Department of Psychiatry and Biobehavioral Sciences, Geffen School of Medicine at UCLA, and Director, Clinical Geriatric Psychiatry Initiative and ECT Program, UCLA Neuropsychiatric Institute and Hospital

**RESEARCH/SCHOLARLY INTERESTS:** Medical student and psychiatry and primary care (internal medicine, family practice and geriatric medicine) resident education in clinical geriatric psychiatry; augmentation strategies in ECT for treatment-resistant and late-life depression; mental health services and health policy for the elderly population.

**RELEVANT PUBLICATIONS:**


NAME: L. Jaime Fitten, M.D.

POSITION: Assoc. Prof./Chief, Section on Geriatric Psychiatry DVAMC Sepulveda

RESEARCH/SCHOLARLY INTERESTS:
Central cholinergic modulation of attentional processes
Therapeutic interventions in Alzheimer’s disease
Assessment methodologies in decisional capacity

RELEVANT PUBLICATIONS:
Mattes, Jeffrey A.; Weintraub, Michael I.; Fitten, L. Jaime  Driving and Alzheimer disease. (includes reply)(Letter to the Editor) JAMA, The Journal of the American Medical Association v275, n3 (Jan 17, 1996):182
Fitten, L. Jaime; Perryman, Kent M.; Wilkinson, Candace J.; Little, Roderick J.; Burns, Marcelline M.; Pachana, Nancy; Mervis, J. Randolph; Malmgren, Roberta; Siembieda, Douglas W.; Ganzell, Steven Alzheimer and vascular dementias and driving: a prospective road and laboratory study. JAMA, The Journal of the American Medical Association v273, n17 (May 3, 1995):1360
Fitten, L. Jaime Impact of attentional deficits on driving performance of the elderly and individuals with Alzheimer’s disease. Facts and Research in Gerontology

NAME: Lissy F. Jarvik, M.D., Ph.D.

POSITION: Professor, Psychiatry & Biobehavioral Sciences
Distinguished Physician, U.S. Department of Veterans Affairs

RESEARCH/SCHOLARLY INTERESTS:
Dr. Jarvik’s major research interest has been aging, and particular the mental changes occurring in health and disease. She has investigated the biological underpinnings of mental functioning as determined by genetic influences. She has also served on either the Medical and Scientific Advisory Board, or the Board of Directors of the Alzheimer’s Association for many years. Dr. Jarvik is presently Senior Geriatric Psychiatry Consultant to the new Western Region Geriatric Psychiatry Fellowship Training Project and Co-Chair of the Department of Veterans Affairs Psychogeriatric Advisor Committee.
RELEVANT PUBLICATIONS: (Selected):
Jarvik, Lissy F. Aging of the brain: how can we prevent it? Gerontologist v28, n6 (Dec, 1988):739
Liston, E.H. and Jarvik, L.F.: Psychotherapy and pharmacotherapy in primary degenerative dementia. In: Mental Health Aspects of Physical Disease in Late Life (Miller & Cohen, eds). NY:

NAME: Harish Kavirajan, M.D.

POSITION: Assistant Professor of Clinical Psychiatry
Course Director, Geropsychiatry Journal Club
Private practice psychiatrist (Costa Mesa, CA)

RESEARCH/SCHOLARLY INTERESTS:
Psychiatric education and training, evidence-based medicine, diagnosis and treatment of dementias, mood and anxiety disorders

RELEVANT PUBLICATIONS:
NAME: Dr. Helen Lavretsky is an at UCLA, a geriatric psychiatrist with the research interest in geriatric depression.

POSITION: Associate Professor-in-Residence, Department of Psychiatry

RESEARCH/SCHOLARLY INTERESTS: Dr. Lavretsky is the recipient of the Career Development award from NIMH and other prestigious research awards. Her current research studies include investigations of psychopharmacological treatment of geriatric depression, the impact of the MRI brain structural changes on outcomes of geriatric depression and normal aging, the interaction of co-existing medical and psychiatric disorders in relation to health and functional outcomes in the elderly.

NAME: Andrew F. Leuchter, M.D.

POSITION: Professor of Psychiatry
Vice Chair for Education, Dept of Psychiatry

RESEARCH/SCHOLARLY INTERESTS:
1) non-invasive assessment of brain function. We have developed a QEEG measure called “cordance,” that has strong associations with measures of perfusion and/or metabolism. We are applying cordance to the study of psychiatric illnesses, particularly depression; 2) differential therapeutic responses in depression. We are conducting controlled studies utilizing antidepressants with different mechanisms of action, to determine if pretreatment brain function can predict medication response; and, 3) study of white-matter disease. We are reexamining elderly subjects with vascular risk factors, as well as young subjects with multiple sclerosis, to study the effects of white-matter disease on functional connections in the brain.

RELEVANT PUBLICATIONS:


NAME: Mario Mendez Ashla, M.D., Ph.D.

POSITION: Professor of Neurology; Director, Neurobehavior Service, VAMC

RESEARCH/SCHOLARLY INTERESTS: Neurobehavior/Behavioral Neurology

RELEVANT PUBLICATIONS:


NAME: James R. Mervis, M.D.

POSITION: Associate Professor of Psychiatry

RESEARCH/SCHOLARLY INTERESTS:
Management of agitation in patients with dementia.
Depression in the elderly.

RELEVANT PUBLICATIONS:

Fitten, LJ; Perryman, KM; Wilkinson, CJ; Little, RJ; Burns, MM; Pachana, N; Mervis, JR; Malmgren, R; Siembieda, DW; Ganzell, S. Alzheimer and vascular dementias and driving. A prospective road and laboratory study. JAMA, 1995 May 3, 273(17):1360-5.
NAME: Stephen Read, MD

POSITION: Associate Clinical Professor, UCLA
Attending Physician, Geriatric Psychiatry Clinic, VA
Private Practice—Geriatric & Forensic Psychiatry

RESEARCH/SCHOLARLY INTERESTS:
2. Diagnosis of Alzheimer’s and other dementias via functional brain imaging
3. Psychiatry in the spectrum of long term care.

RELEVANT PUBLICATIONS (full CV available @ www.geriatricpsychiatrist.com):

Read SL, Frazee J, Smith CS, Shapira J, Cummings JL, Tomiyasu U.
Intra-cerebroventricular bethanechol in Alzheimer's Disease: Variable
Dose-related Responses. Arch Neurol 1990;47:1025-1030

Read SL, Miller B, Mena I, Kim R, Itabashi H. SPECT in Dementia:

Shoghi-Jadid K, Small GW, Agdeppa ED, Kepe V, Ercoli LM, Siddarth P,
Read S, Satyamurthy N, Petric A, Huang S-C, Barrio J. Localization of
Neurofibrillary Tangles (NFTs) and Beta-Amyloid Plaques (APs) in the
Brains of Living Patients with Alzheimer's Disease. Am J Geriatric

Stein W, Read SL. Chronic pain in the setting of Parkinson's disease

Di Patre PL, Read SL, Cummings JL, Tomiyasu U, Vartavarian L, Secor
DL Vinters HV. Progression of clinical deterioration and pathologic changes
in patients with Alzheimer Disease evaluated at biopsy and autopsy. Arch
Neurol 1999;56:1254-1261

Cummings JL, Benson DF, Hill MA, Read SL. Aphasia in dementia of the

LF, Meyers BS (Eds). Comprehensive Review of Geriatric Psychiatry—III
Washington, DC, American Psychiatric Press, 2004

Read, S. Geriatric Psychiatry: Ethical Issues. In Sadock BJ and Sadock

Read SL. Depression is uncommon in Alzheimer Disease: Another aspect of

Hankin M, Read S. Mental incapacity to marry. Estate Planning, Trust
NAME: Gary W. Small, M.D.

POSITION: Professor of Psychiatry
           Director, UCLA Center on Aging

RESEARCH/SCHOLARLY INTERESTS:
Neuroimaging and genetic studies of age-associated memory loss and Alzheimer’s disease Diagnosis and treatment of late-life depression

RELEVANT PUBLICATIONS:
3. Small, GW; Noble, EP; Matsuyama, SS; Jarvik, LF; Komo, S; Kaplan, A; Ritchie, T; Pritchard, ML; Saunders, AM; Conneally, PM; Roses, AD; Haines, JL; Pericak-Vance, MA. D2 dopamine receptor A1 allele in Alzheimer disease and aging. Archives of Neurology, 1997 Mar, 54(3):281-5.
5. Haines, JL; Pritchard, ML; Saunders, AM; Schildkraut, JM; Growdon, JH; Gaskell, PC; Farrer, LA; Auerbach, SA; Gusella, JF; Locke, PA; Rosi, BL; Yamaoka, L; Small, GW; Conneally, PM; Roses, AD; Pericak-Vance, M. No association between alpha 1-antichymotrypsin and familial Alzheimer's disease. Annals of the New York Academy of Sciences, 1996 Dec 16, 802:35-41.
7. Small, GW; Birkett, M; Meyers, BS; Koran, LM; Bystritsky, A; Nemeroff, CB. Impact of physical illness on quality of life and antidepressant response in geriatric major depression. Fluoxetine Collaborative Study Group. Journal of the American Geriatrics Society, 1996 Oct, 44(10):1220-5.
8. Pritchard, ML; Saunders, AM; Gaskell, PC; Small, GW; Conneally, PM; Rosi, B; Yamaoka, LH; Roses, AD; Haines, JL; Pericak-Vance, MA. No association between very low density lipoprotein receptor (VLDL-R) and Alzheimer disease in American Caucasians. Neuroscience Letters, 1996 May 10, 209(2):105-8.
NAME: James Edward Spar, M.D.

POSITION: Professor, Department of Psychiatry and Biobehavioral Sciences  
Director of Training, General Psychiatry Residency

RESEARCH/SCHOLARLY INTERESTS:
Forensic Psychiatry - Competency and Undue Influence

RELEVANT PUBLICATIONS:


NAME: David L. Sultzer, MD

POSITION:
Professor, UCLA Department of Psychiatry and Biobehavioral Sciences  
Director, UCLA Geriatric Psychiatry Fellowship Training Program  
Director, Gero/Neuropsychiatry Division, VA Greater Los Angeles Healthcare System

RESEARCH/SCHOLARLY INTERESTS:
- Psychiatric and behavioral symptoms in Alzheimer’s disease and other dementias: phenomenology and neurobiology
- PET imaging in Alzheimer’s disease and vascular dementia
- Alzheimer’s disease treatment
- Treatment of psychosis and agitation in patients with dementia
- Planning and sequencing skills in dementia
- Geriatric psychopharmacology
- Medical education

RELEVANT PUBLICATIONS:


Sultzer DL. Psychosis and antipsychotic medications in Alzheimer’s disease: clinical management and research perspectives. Dement Geriatr Cogn Disord 2004; 17:78-90