April 26, 2012

Research 2012:

We're Not in Kansas Anymore

From Bench to Bedside

Sponsored by the Office for Clinical and Translational Research

Follow the Yellow Brick Road

Cincinnati Children's Research Foundation

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Opening Remarks

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Every Child Succeeds

- Community-based home visitation
- New time mothers w/demographic risks, enrolled prenatal through 3 months Ohio & Kentucky, 7 counties
- 2 national models: Healthy Families America® & Nurse-Family Partnership®, 2 ½-3 years

OPTIMIZE DEVELOPMENT
PREVENT ABUSE
PROMOTE ATTACHMENT
NURTURING ENVIRONMENT
STIMULATING HOME
MEDICAL HOME
IMMUNIZATIONS
EMERGING LITERACY
SMOKING CESSATION
SUBSTANCE ABUSE
EDUCATION & EMPLOYMENT
HEALTHY RELATIONSHIPS

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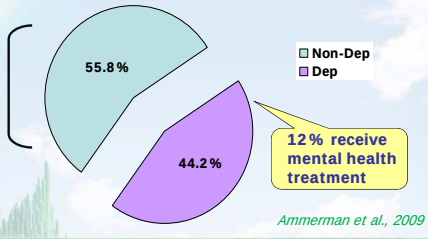
Course of Depression (BDI > 13 @ enrollment and/or 9 months) in home visitation (N = 806)



74.8% with trauma history

12% receive mental health treatment

Ammerman et al., 2009

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MIDIS2 Design

Inclusion:
ECS participant
≥16 years old
Baby 2<10 months
EPDS ≥11
MDD using SCID

Exclusion:
Substance depend.
Psychosis
Current suicidality
Meds or therapy

Screening: EPDS ≥11

Eligibility/Pre-treatment Assessment
SCID Diagnosis of MDD

randomization

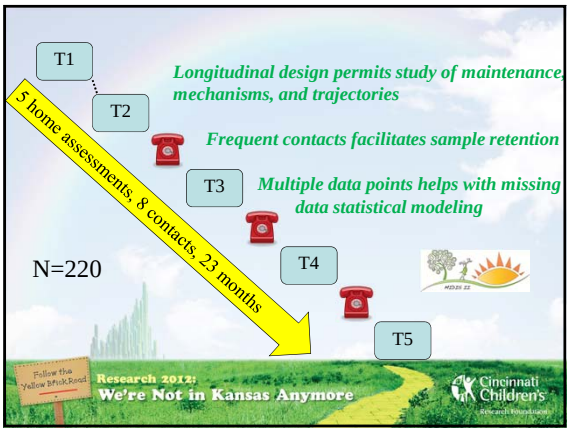
ongoing home visiting

IH-CBT | PCT

15 sessions plus 2 monthly boosters

Post-treatment Assessment

6, 12, &18 Month Follow-Ups


T1
T2
T3
T4
T5
5 home assessments, 8 contacts, 23 months
Longitudinal design permits study of maintenance mechanisms, and trajectories
Frequent contacts facilitates sample retention
Multiple data points helps with missing data statistical modeling
N=220
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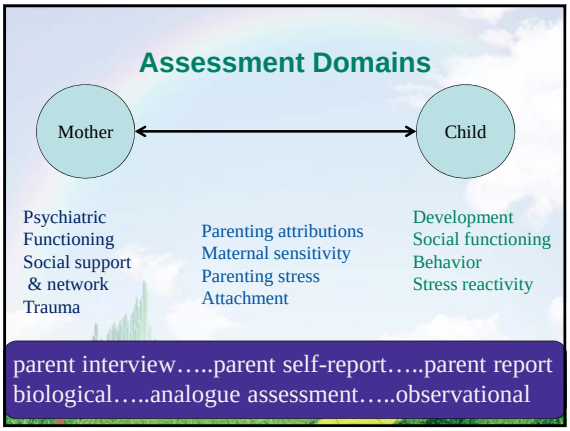
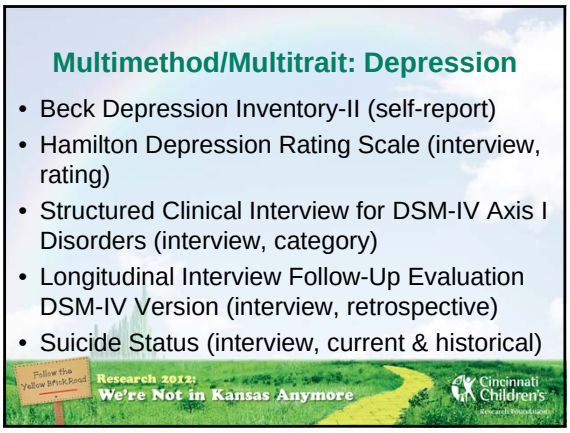

Assessment Domains
Mother
Child
Psychiatric
Functioning
Social support
& network
Trauma
Parenting attributions
Maternal sensitivity
Parenting stress
Attachment
Development
Social functioning
Behavior
Stress reactivity
parent interview…..parent self-report…..parent report
biological…..analogue assessment…..observational


Multimethod/Multitrait: Depression
• Beck Depression Inventory-II (self-report)
• Hamilton Depression Rating Scale (interview, rating)
• Structured Clinical Interview for DSM-IV Axis I Disorders (interview, category)
• Longitudinal Interview Follow-Up Evaluation DSM-IV Version (interview, retrospective)
• Suicide Status (interview, current & historical)
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Mother-child relationship: Still Face Paradigm

Play—2 min
Still face—2min
Reunion-2 min

SFP Coding System—infants

- Negative engagement
- Protest
- Withdrawn
- Object/environment engagement
- Social monitor
- Social positive engagement
- Self-comforting
- Distancing
- Autonomic distress

SFP Coding System—caregiver

- Negative engagement
- Hostile/intrusive
- Withdrawn
- Non-infant focused engagement
- Social monitor with/without vocalizations
- Social positive engagement
- Exaggerated positive
- Rough touches

SFP Example

MIDIS II

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Sampling

New mothers
2-10 months postpartum
Participating in a home visiting program
Identified by screen
Low income, unmarried, trauma

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Home Setting

Not conducive to standardization
Distractions
Unkempt environments
Professional cues absent
Other family and friends
Inadequate lighting
Difficult situations

Advantages: natural setting, memory cues

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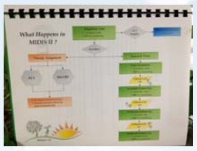
Sample Retention

- Interpersonal skills
- Study branding & reminders
- Frequent contact
- Newsletters
- Personalized notebook
- Birthdays, other events



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Sample Retention

- Contact information
- Emergency contacts
- COA cards
- Newsletters
- Scrapbook
- Documentation & tracking
- Traveling to see subjects

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