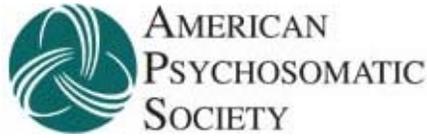


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Christoph Herrmann-Lingen, MD, APS President

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APS Anniversaries

It is now twenty years ago that I first attended an APS Annual Meeting and I haven't missed a single meeting since then. So Denver was my very personal 20th anniversary. Like many of you I see APS as my scientific home, and this for very good reasons. As the premier scientific society integrating mind, brain, body and social context in medicine since 1942, APS has enriched my academic life over two decades. Like in all previous years I returned quite inspired from this year's meeting in Denver. Yes, I feel proud and honored to have the

privilege of serving as your President over the next year and I want to extend my wholehearted thanks in particular to our Past Presidents Karen Weihs MD and Mustafa al'Absi PhD for handing over our Society in very good shape. However, it is mainly the meetings themselves that have inspired me this year and all the years before. Going to APS always feels like coming to see old friends and making new friends who help me continue and improve my scientific and clinical work.

One of our APS goals is **Scientific Excellence** and this goal was once more reflected in the meeting program that Lorenzo Cohen PhD and the Program Committee put together. It was really hard to pick from numerous great presentations. However, I want to highlight two examples of why I love attending APS:

Kevin Tracey's talk about "Bioelectronic Medicine" was a fantastic example of scientific excellence, offering a potential new paradigm for treating inflammatory diseases and probably even inflammation occurring in the context of multiple other diseases. This approach may complement or to some degree even replace molecular treatments in the future. The idea that each neuron is unique and that targeted stimulation of a small number of rather specific (eg, vagal) neurons may serve very specific therapeutic targets sounds compelling. It offers a substantial progress over relatively crude and simplistic concepts of global sympathetic or vagal "tone". Possibly, electrical stimulation of small groups of autonomic nerve fibers may in the future help in treating a variety of diseases, thereby improving health without the high costs and sometimes severe side effects of modern biological drugs. This sounds exciting. However, I was even more excited by the discussion of the talk, which I found so typical of APS. A discussant raised the question whether it necessarily needed to be electrical stimulation or if it might be possible to develop psychosocial interventions (such as imagination techniques or meditation) that lead to stimulation of those autonomic fibers via the brain itself. Dr. Tracey responded this would be a testable hypothesis. Although I think testing it will be quite a challenge, I feel confident that such hypotheses will be tested in the not too far future and that APS members will play a key

role in this endeavor.

Turning to our second strategic goal to increase **Clinical Relevance** of our research I was particularly impressed by Dean Ornish's talk about the "Transformative Power of Lifestyle Medicine". As at my very first APS meeting in Williamsburg VA and so often since I once more had the opportunity to meet in person the outstanding colleagues whose work I had always admired from the literature. Although I wouldn't agree with all conclusions Dr. Ornish drew from the empirical data he presented, I learned a lot from his success in implementing his lifestyle program. This is putting our research into practice. A lot of this success obviously has to do with the power of harnessing positive affect for facilitating lifestyle change in individual patients and for marketing psychosocial interventions to politicians and health care payers.

After returning from Denver I had to give an introductory lecture for my medical students who - as everywhere in Germany - all have to go through mandatory courses in Psychosomatic Medicine and I found that most of the really innovative content I was presenting came from APS meetings. So APS also helps me in improving student teaching and thereby in educating future physicians, which will also increase our clinical impact.

Our third strategic goal is to have a **Vibrant and Diverse Membership** and this was definitely what I found in Denver. APS has launched a variety of successful initiatives to support diversity among our members. One specific focus is on our young members who are the future of the Society. I am happy to report that the Denver meeting was the first one to have more trainee participants than non-trainees. This year's Young Investigator's Colloquium organized by Oliver Cameron MD PhD and others was again overbooked and very well received. The Emerging Leaders Initiative has done a great job in activating young members of our society to get prepared for future leadership. As an additional initiative for fostering young members' scientific impact and careers, a Meet the Editor workshop is currently being planned for the 2017 Annual Meeting. Council member Mary-Frances O'Connor PhD has launched an international Lab to Lab Exchange Initiative to broaden research and training in psychosomatic medicine, taking advantage of the strong existing international connections in APS. The initiative aims at supporting trainees (graduate students, medical students, post-docs, etc.) going to and from the US and Europe by identifying possible sources of funding. Both potential mentors and mentees are also invited to join an information network of existing and planned exchange projects. Pertinent information is now available at <http://www.psychosomatic.org/jobs/index.cfm>.

During the strategic planning process we have been thinking about projects to support our strategic goals in the near future and several great ideas arose from that discussion.

I am happy to announce some of these exciting new initiatives. Some of them will cluster around **APS's 75th anniversary** which we will celebrate over one whole year, starting at the **75th Annual Meeting on March 15-17, 2017** in Sevilla ("Seville"), Spain, extending over the special topic meeting to be held in the fall of 2017 and ending with the 2018 Annual Meeting. A task force of APS leaders and representatives of senior and young members at large has been created to coordinate all anniversary-related programming and additional activities. The group will be happy to receive your suggestions for any aspects of the jubilee celebration.

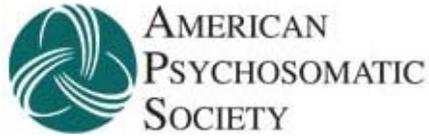
When APS was founded in 1942, its identity was to a large degree defined by Helen Flanders Dunbar's book "Emotions and Bodily Changes". Also today, one of APS' core competencies is on linking affective processes to health and disease. Council therefore launched an initiative on **Affect Science in Medicine** to revisit the relevance and mechanisms of emotional processes in health and disease. As part of this overarching initiative, we are liaising with the European Association of Psychosomatic Medicine (EAPM) to conduct a joint preconference workshop on Affect and Somatization at the 2017 Annual Meeting. The 2017

(mid-year) special topic meeting will focus on "**Emotions in Social Relationships: Implications for Health and Disease**". We are in negotiations with other societies active in this area who might be interested in co-sponsoring this event. In celebration of APS's 75th anniversary we will announce an **APS anniversary award** related to the theme of the 2017 special topic meeting. Our idea is to increase our visibility by this award and to give up to three (possibly mid-career) researchers an opportunity to present their best research at that meeting, together with outstanding senior researchers in the field who will be invited by the steering committee chaired by Richard Lane MD PhD. Keep your eyes open for the call for nominations which will come out within the next weeks! From the special topic meeting we expect a series of potential high-impact publications for our Journal *Psychosomatic Medicine*.

But why wait for 2017? This current year also offers another top-quality scientific APS event. A number of outstanding researchers have agreed to speak at this year's special topic meeting on "**Neuroscience of Pain: Early Life Adversity, Mechanisms and Treatment**". This one-day event will be held on **October 15, 2016** in the New York Marriott Downtown Hotel in New York, NY. For the first time we now offer the opportunity to submit abstracts for poster presentations related to the theme of a special topic meeting to complement the invited lectures. We expect the posters to enrich the scientific content of the meeting and to help presenters getting their travel costs covered by their institutions. We see this as an experiment and are interested in learning your response. **Abstract submissions and registrations for the meeting are now open**. Please see [here](#) for further details. Since space is limited and we are partnering with the International Association for the Study of Pain (IASP) in advertising the event, please be sure to register early in order to secure your admission. Registrations are accepted on a first come first served basis.

There are a couple of other important activities going on. Here I don't have the space to mention all of them but I am extremely grateful for seeing so many APS members, officers and our national office dedicating their time and effort to keeping the "elderly lady" APS vital and thriving. So I am sure APS will still dance next year at her 75th birthday and you are all invited to join us.

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From the Editor's Desk

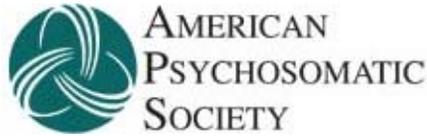
Aric A. Prather, PhD, APS Newsletter Editor

What can I say? It was another amazing conference this past March in Denver. Another big thanks to Dr. Lorenzo Cohen and the program committee for filling the scientific program with a diverse line-up of presentations from APS regulars and all-stars from outside our membership. Personally, I was blown away by Dr. Kevin Tracey's presentation on his seminal research around the inflammatory reflex and all of the innovations that have developed since its discovery. Drs. Dean Ornish and Lisa Marsch also contributed engaging plenary talks that reverberated throughout the course of the meeting. And of course while in Denver, why not have a discussion about the benefits and consequences of cannabis use. Some of you out there carried out some research on the topic (you know who you are). Ok, and the banquet was awesome, with what I think was one of the best bands in many years. It was a wonderful event to bring together old friends and new. With that I want to provide one more note of congratulations to our award winners, namely Dr. Redford Williams who received the Distinguished Scientist Award, Dr. Emeran Mayer who was awarded the Paul D. McLean Award, Dr. Elizabeth Brondolo who received the Patricia R. Barchas Award in Sociophysiology, and Dr. George Slavich who received the Herbert Weiner Early Career Award. A photo recap of the annual meeting can be found later in this issue.

With roughly 10 months until our next meeting in Seville, Spain there is quite a bit on the APS horizon, as is highlighted by a message from our new APS president Dr. Christoph Herrmann-Lingen. For example, the mid-year meeting in New York on the Neuroscience of Pain is October 15th and poster submissions will be accepted until July 1st. In this newsletter we continue with our series of "Getting to know..." a member of our Society, this time focusing our attention on Dr. Elizabeth Brondolo. We also have a great "Meet the Lab" entry from our first but certainly not last international laboratory. Our Editor-in-Chief of our Journal, Dr. Wijo Kop, provides us with his favorite articles and "must reads" available in *Psychosomatic Medicine* over the last several months. Finally, we have an engaging commentary from Emily Hooker, a doctoral student from the University of California, Irvine, on the topic of replication in psychosomatic medicine. Emily spearheaded a roundtable on this very topic at the annual meeting, and given the rising interest in replicability across scientific disciplines, I sincerely appreciate her contribution. If you have any other topics you feel worthy of a commentary, please contact me directly.

Questions or comments? Please email me at (aric.prather@ucsf.edu).

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Meet the Lab

This edition of the Meet the Lab section takes us to our friends to the North, and our first of many International labs to be highlighted here. With no further delay, let's meet the...

[Pediatric Public Health Psychology \(PPHP\) Lab at Concordia University, Montreal, Quebec](#)

Lab Director: Jennifer J. McGrath, PhD, MPH

APS: Who are you and what do you study in the PPHP Lab?

JMcG: I am an Associate Professor at Concordia University, in Montreal, and the PERFORM Chair in Childhood Preventive Health and Data Science. I am excited to have an academic position that brings together my education and training in psychophysiology & child clinical psychology (MA & PhD, Bowling Green State University), cardiovascular behavioral medicine (Post-Doc, Pittsburgh Mind-Body Center), epidemiology (MPH, University of Pittsburgh), and data science (Visiting Scholar, Harvard University, Institute for Quantitative Social Science).



The PPHP Lab is at the intersection of Pediatrics + Public Health + Health Psychology. We strive to "think outside of the box" in our interdisciplinary approach to untangling psychosocial determinants of child health inequalities. Our research projects span pathways-to-policy: we investigate underlying cardiometabolic disease mechanisms, their socioeconomic gradient, and public policy strategies to promote child health. Currently, we have three research projects underway. (Yes, some days it feels like a three-ring circus.) The **Healthy Heart Project** is a longitudinal study investigating pathways linking poor sleep and childhood obesity. We are curious about autonomic and endocrine changes (heart rate variability & cortisol) in response to the stress of sleep disruption, and how neighborhood characteristics exacerbate this relation. **AdoQuest** examines the role of airborne nicotine, and other environmental exposures, in increasing risk for adolescents' smoking uptake. We are excited to have a statistical geneticist join us this Fall to navigate GWAS data and SNP-trait associations. **EPOCH** is an international comparison study of eight population-representative birth cohorts across countries with diverse social policies. We are comparing child health outcomes across societal context and income inequality to better understand trajectories of socioeconomic inequalities. Our research projects are funded by the Canadian Institutes of Health Research (CIHR).

APS: How is the PPHP Lab structured?

JMcG: The PPHP Lab consists of 3 graduate students, 2 post-docs, 3 undergraduate thesis

students, 6 full-time research staff, and 20 research assistants. Despite having 35 members, the lab maintains the intimate feel of a "boutique" research team. Bi-weekly **lab meetings** challenge our big-picture thinking and the larger research context. We use this forum to discuss recent findings and to share constructive feedback about presentations and manuscripts. **Working groups** are targeted meetings that set out to accomplish a specific task in a single day. Structured similarly to hack-a-thons, the research team collaborates intensively with iterative brainstorming, breakout, and implementation sessions until the task is completed. Lab members still tell stories about the working group when we wore 15 different brands of electrodes over 48 hours to identify which one best measured continuous ECG. Weekly **individual meetings** are optimized with goal setting and the use of productivity software (BaseCamp) to track our progress. Greater structure and guidance is provided to undergraduate and master's students; autonomy, independence, and grant writing is fostered in doctoral and post-doc students.

APS: Are there any unique aspects of this lab?

JMcG: There are two signature features of the culture of our lab, which reflect my values as an academic and an individual. **Be interesting.** I encourage students to actively engage in pursuits outside of research and coursework. Cultivating a skill or hobby or sport or travel adventure reaps immeasurable return on investment. There are many smart people, but the ones we want to spend time with are ideal colleagues. **Challenge yourself.** I want students to put themselves in unfamiliar and unknown situations and learn. New perspectives and innovative thinking emerge from uncomfortable and unusual places. Lab activities center around these values. We also have a lab activity at every APS Conference, from cooking classes to boat rides. The all-time favorite was our amazing race through the streets of San Francisco where teams trekked across the city with maps and cryptic clues, taking them to Grace Cathedral and the Bourbon & Branch speakeasy, to win the coveted prize of a trolley-car pencil sharpener. This winter, the PPHP Lab took curling lessons (with rocks, not irons). I try to lead by example: I can usually be found rowing in the middle of Lac St. Louis at sunrise. Next year in Seville, ask me how I mistakenly attended a Medical Geology conference, and learned how the height of the water table can be protective against depression.

APS: During your academic journey you've lived in both the U.S. and in Canada. Can you shed light on some of the similarities and differences when it comes to academia?

JMcG: Aside from the obvious differences of Canadians' love of hockey, poutine, saying "sorry", and Prime Minister Justin Trudeau's mad yoga skills, there are three distinctions between academia in the U.S. and Canada that have become increasingly perceptible with time. First, Canada's health research funding climate has generally been kinder and gentler than the U.S. While the declining trends in research funding have largely paralleled one another, Canada's federal (CIHR) and provincial (Quebec FRQS) funding agencies typically have higher success rates compared to the NIH, albeit with smaller funding amounts. Second, within this funding climate, Canadian researchers eagerly share resources and readily collaborate in a common pursuit to advance knowledge. Across U.S. institutions, the level of competitiveness among colleagues has felt more palpable. Third, work-life balance has a more pronounced European style, at least within Quebec. This translates into relaxed luncheons with colleagues to discuss existential issues, as well as work slow-down strikes during the week grant applications are due. Recall bias, cognitive dissonance, and the confounding of trainee/professor status have informed this answer.

APS: Now let's meet some members of the PPHP Lab.

Jinshia Ly, M.A.

I am a third year doctoral student in the Clinical

Psychology program at Concordia University. For my master's thesis, I found that poor sleep quality, but not short sleep duration, mediated the adverse effects of stress on cortisol levels in youth. For my dissertation, I am revisiting how stress is conceptualized and measured among children and adolescents. Refining how stress and adversity is assessed early in the lifecourse may elucidate links between stress and health outcomes. Next year, I will complete my predoctoral clinical internship at CUPIP in Montreal. My graduate training is supported by funding from Fonds de Recherche Québec - Santé, and Concordia University's David J. Azrieli Graduate Fellowship and Entrance Scholarship.



Leah Wright

I am a second year master's student in Concordia University's Clinical Psychology program. I earned my first B.A. in International Development Studies and History from McGill University, and my second B.A. in Psychology (Honours) from York University. Stemming from my previous work in developing countries, I have a strong interest in the health consequences of stress exposure during childhood. My primary research interest is the biological embedding of stress: how does stress "get under the skin?" For my master's thesis, I am conducting a meta-analysis of the association between childhood stress exposure and diurnal cortisol. For my doctoral studies, I plan to examine how timing of stress exposure impacts developmental trajectories of cortisol. My graduate training is supported by funding from the Canadian Institutes of Health Research, Fonds de Recherche Quebec Sante, and Concordia University.

Amyna Kanji

I am a first year master's student in Concordia's Clinical Psychology training program. I earned my joint Bachelor of Arts and Science in Psychology from McGill University, with minor concentrations in Sociology and Social Studies of Medicine. My primary research involves teasing apart the interrelationship between circadian timing and the emergence of depressive symptomatology among adolescents. I am interested in understanding the complex roles of light exposure, Vitamin D deficiency, and phase-delays. My graduate training is supported by funding from the Canadian Institutes of Health Research.



Muhammed Idris, Ph.D.

I am the PERFORM Postdoctoral Fellow in Data Science, Preventative Health, and Health Policy at Concordia University. Trained as a comparative political economist, my work spans a variety of substantive areas ranging from poverty and child health to the establishment of accountable institutions and equitable markets. The common thread throughout my program of research is the application of computer-aided statistical analysis of open-source, socially-generated, "big data" to better



identify and evaluate effective policy interventions by developing new and better measures of social phenomena. I also teach advanced undergraduate courses in applied statistics and maintain a research appointment at Harvard University, where I held a predoctoral fellowship while completing my dissertation.

Research Coordinator All-Stars

The Research

Coordinators oversee the daily functioning of research projects and ensure everything runs smoothly in the PPHP Lab; they are the real wizards behind the curtain. Natasha Hunt

is the Senior Research Coordinator of the Healthy Heart Project; she has been with the PPHP Lab for 8 years. In her spare time, she is

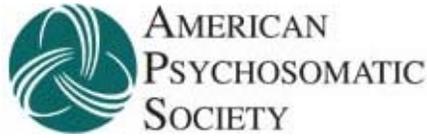
completing a graduate diploma in Human Resource Management. Sabrina Giovanniello is the Senior Data Coordinator and Senior Research Coordinator of the EPOCH project; she too has been with the PPHP lab for 8 years. Sabrina is an algorithm sleuth and takes great pride in identifying errors in physiological software scoring programs. She is currently completing her Master's degree in Teaching Mathematics. Neressa Noel is the Senior Coordinator of Physiological Signals Processing and a Registered Polysomnographic Technologist (RPSGT). When she is not busy scoring sleep studies or sifting through reams of HRV data, she is completing a second B.Sc. in Exercise Science with plans to pursue sleep medicine. Leanne Langer is the Senior Coordinator of the AdoQuest Project. Her training in Public Health, Health Policy and Promotion has sharpened how we consider research evidence about airborne nicotine and e-cigarettes to inform and shape public health policy. Layébé Caroline Ignegongba is the Knowledge Mobilization Coordinator. She holds a Master's of Public Health in global health and infectious disease. Caroline develops strategies to facilitate knowledge transfer and exchange about our research findings with policy makers, school boards, parents, and the general public.

Want to know more about the PPHP Lab?

Check out the website: www.pphplab.org



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Getting to Know You...**Brondolo**



Elizabeth Brondolo, PhD is a clinical psychologist and Professor in the Department of Psychology, in St. John's College of Liberal Arts and Sciences at St. John's University. She is a nationally known researcher studying the effects of stress and interpersonal conflict on health, and directs the Collaborative Health Integration Research Program (CHIRP), a research and training collaborative. Since 1991 Dr. Brondolo and her students have conducted extensive research on the psychophysiology of interpersonal conflict, with several studies being funded by the NIH and the American Heart Association. In addition, she has an active research program on racism/ethnic discrimination, specifically examining

interpersonal racism. Dr. Brondolo was the 2016 recipient of the Patricia R. Barchas Award in Sociophysiology from APS.

APS: Thank you for taking time out of your schedule to contribute to our newsletter, and congratulations on your recent APS award. Can you give us some insight into your background and how your progression as a research brought you to where you are now?

EB: Most of my research career has been focused on psychosocial factors that influence the development of cardiovascular disease. My masters and dissertation research involved field studies of Type A behavior in children. We built a portable psychophysiology lab in a bakery van and then another in a camp trunk. My research assistants and I went out to schools to interview kids and conduct studies of Type A and cardiovascular reactivity.

But I really wanted to test people under real life conditions. When I came to St. John's University, I wanted to use ambulatory blood pressure (ABP) monitoring to understand the ways real-life interpersonal conflict affected cardiovascular responses. The first challenge was to find reasonable models of interpersonal conflict. The solution was to work with New York City Traffic Agents.

The traffic agents were exposed to motorists who were angry about getting parking tickets. The conflicts are real and serious, but they happen under consistent circumstances – when the traffic agents are out on patrol standing or walking. The conditions aren't as controlled as they are in a lab setting, but they are very good for testing hypotheses about real-life conflict and ABP.

The government agencies responsible for the traffic agents (first the Department of Transportation and then New York City Police Department) asked me to run stress management groups for the agents. The agents were being targeted for a lot of harassment

during their work day. The agents, my students and I collaborated to develop an exposure-based intervention to enhance the agents' ability to manage interactions with the public. The agents appreciated the intervention, and it was successful in decreasing complaints about the agents reported to the NYPD civilian complaint review board.

But during the group exercises, the agents talked at length about the problem of racial slurs. At the time of the study, the majority of the agents were Black or Hispanic individuals. The racist remarks from motorists and pedestrians were deeply painful and frustrating to these agents. And the intervention methods we developed were not appropriate for handling racial slurs. It's one thing to work through the emotions when a motorist angrily demands that you "take back that ticket"; it's a different - and much more disturbing - situation when the motorist accompanies that demand with vicious racial slurs.

We talked with the agents about these episodes, and their pain was palpable. But none of the strategies they used to handle these situations were fully effective. It was hard to stop motorists from making these discriminatory remarks, and it was hard to recover from episodes in which they were exposed to discrimination. My students and I knew many agents well. Their concerns became our concerns. And we decided that we needed to understand the ways in which discrimination affected health, so we could make some contribution to help the process of recovery.

APS: For anyone who was in the audience at this past year's APS during your award address, it is clear that you are passionate about racial discrimination, stigma, and health disparities. Where does that passion come from?

EB: Over the years, I have talked to many, many people about their experiences of discrimination and stigmatization. Their stories stick with me. It is actually very sad and uncomfortable to study discrimination and its effects on health. But it is also an incredibly rich experience.

The passion I have for this work comes from the sense that I am always learning. Before I started this research, I had not really recognized how much my perspective was shaped by my experiences as a White professional woman. But as my students and the research participants shared their experiences with me, I began to see that my point of view was limited. Their stories helped me understand other perspectives, particularly those of individuals who have experienced discrimination in day-to-day life. Now, I am learning to hear and see in a much more complex story. And this experience is very valuable.

APS: Sadly, we live in a world where racial tensions are high, particularly in parts of the country where racism has historically been more prevalent. How does the current climate inform your work?

EB: Many of the discriminatory events we see covered in the news are very disturbing. But these events are also allowing a broader discourse about discrimination on every level. The national discussions about the display of the Confederate flag and the lack of diversity in the Oscars helped clarify the nature of cultural discrimination; the public discussion of racial disparities in law enforcement has illuminated the processes associated with institutional discrimination. The new evidence on the role of slavery in the development of Georgetown University brought historical trauma to the front pages. All these discussions are helping us to develop a shared reality – a common understanding of the role of discrimination in national life. Not everyone agrees, not everyone sees it the same way. But more people are engaging in discussions about discrimination and learning to think about these issues from the perspective of individuals targeted for discrimination.

APS: One of the things that I think sets you apart from some of the other esteemed APS members is the fact that you are an active clinician. How has your clinical work informed

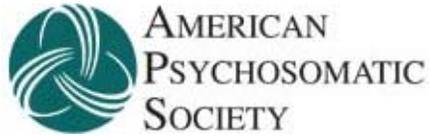
your research and your conceptualizations about stress, discrimination, and health?

EB: Clinical work allows me to test out ideas in real time, in conversation with another person. I work primarily with patients with bipolar and schizoaffective disorder. These are disorders whose onset and course are strongly affected by stress. The clinical work in collaboration with my patients allows me to see the effects of stress on mood, cognition, behavior and physiology up close.

APS: Having known you over the past few years, it is clear that you care a great deal about mentorship. What advice do you have for students as they embark upon their careers and what advice to you have for would-be mentors so that they can be more effective?

EB: I have had (and still have) incredibly wonderful mentors, so I really appreciate the value of time spent learning together with students. All my mentors worked on very interesting research problems, and they were so thoughtful about answering questions, that I never felt self-conscious. I didn't worry about how I was doing - I just focused on what we were learning. I hope I can create the same environment for my students.

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Highlights from **Psychosomatic Medicine** **Willem (Wijo) Kop, PhD** Editor-in-Chief

Psychosomatic Medicine is continuing to do very well, and the quality of the recent manuscripts we have received is superb. We are happy to inform you that the acceptance rate increased from 16% for articles submitted in 2013 to 21% in 2014. The average time from submitting an article to a decision was 32 days in 2015. We continue to work hard to further reduce the turnaround time and expedite the review process, while at the same time keeping the quality of the review process at the highest standards so that we publish the best science possible.



I would like to welcome Dr. Jonathan Shaffer as Statistical Editor of *Psychosomatic Medicine*. Dr. Shaffer is Assistant Professor at the University of Colorado, Denver. He brings a wealth of experience in statistical modeling of complex designs. I would also like to take this opportunity to thank Dr. Ying Guo (Emory University) for her services as Statistical Editor over the past two years.

The following articles are just a selection our recent publications:

1. Utility of a Virtual Trier Social Stress Test: Initial Findings and Benchmarking Comparisons.
Fallon MA, Careaga JS, Sbarra DA, O'Connor MF. *Psychosom Med*. 2016 Apr 29.
[10.1097/PSY.0000000000000338](https://doi.org/10.1097/PSY.0000000000000338)
2. Sleep and Inflammation During Adolescence.
Park H, Tsai KM, Dahl RE, Irwin MR, McCreath H, Seeman TE, Fuligni AJ. *Psychosom Med*. 2016 Apr 29.
[10.1097/PSY.0000000000000340](https://doi.org/10.1097/PSY.0000000000000340)
3. Multiplexing and Beyond in Biobehavioral Research.
Mills PJ, Peterson CT. *Psychosom Med*. 2016 Apr 7. [Epub ahead of print], commenting on a paper and colleagues examining cytokine patterns in healthy female adolescents
[10.1097/PSY.0000000000000329](https://doi.org/10.1097/PSY.0000000000000329)
4. Short-Term Public Health Impact of the July 22, 2011, Terrorist Attacks in Norway: A Nationwide Register-Based Study.
Strand LB, Mukamal KJ, Halasz J, Vatten LJ, Janszky I. *Psychosom Med*. 2016 Apr 29 with an accompanying editorial by Drs. Gradus, Marx and Sloan,

[10.1097/PSY.0000000000000323](https://doi.org/10.1097/PSY.0000000000000323)

5. Development and Validation of the Somatic Symptom Disorder-B Criteria Scale (SSD-12). Toussaint A, Murray AM, Voigt K, Herzog A, Gierk B, Kroenke K, Rief W, Henningsen P, Lowe B. *Psychosom Med*. 2016 Jan;78(1):5-12 with an accompanying editorial by Dr. Barsky.

[10.1097/PSY.0000000000000240](https://doi.org/10.1097/PSY.0000000000000240)

6. A Biobehavioral Framework to Address the Emerging Challenge of Multimorbidity. Suls J, Green PA, Davidson KW. *Psychosom Med*. 2016 Apr;78(3):281-9.

[10.1097/PSY.0000000000000294](https://doi.org/10.1097/PSY.0000000000000294)

7. Biobehavioral Prognostic Factors in Chronic Obstructive Pulmonary Disease: Results From the INSPIRE-II Trial.

Blumenthal JA, Smith PJ, Durham M, Mabe S, Emery CF, Martinu T, Diaz PT, Babyak M, Welty-Wolf K, Palmer S. *Psychosom Med*. 2016 Feb-Mar;78(2):153-62.

[10.1097/PSY.0000000000000260](https://doi.org/10.1097/PSY.0000000000000260)

8. The Neurobiology of Giving Versus Receiving Support: The Role of Stress-Related and Social Reward-Related Neural Activity.

Inagaki TK, Bryne Haltom KE, Suzuki S, Jevtic I, Hornstein E, Bower JE, Eisenberger NI. *Psychosom Med*. 2016 May;78(4):443-53.

[10.1097/PSY.0000000000000302](https://doi.org/10.1097/PSY.0000000000000302)

9. The Role of Brain Structure and Function in the Association Between Inflammation and Depressive Symptoms: A Systematic Review.

Byrne ML, Whittle S, Allen NB. *Psychosom Med*. 2016 May;78(4):389-400, with an accompanying editorial by Drs. Krishnadas and Harrison.

[10.1097/PSY.0000000000000311](https://doi.org/10.1097/PSY.0000000000000311)

These are just a few of the many excellent articles that recently came out; the open access “article summaries” at the beginning of each issue provide a very efficient overview of the recent developments in our field.

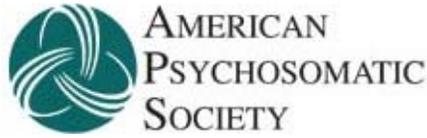
After the [successful special issue on “Diabetes, Obesity and the Brain”](#) (published in July 2015), we are now close to completing a new special issue on mechanisms linking early adversity with physical health, guest-edited by Drs. Katie McLaughlin (University of Washington), Nicole Bush (University of California San Francisco), and Richard Lane (University of Arizona). In addition, the review process of the subsequent upcoming themed issue on the microbiome as related to brain-gut interactions is well underway; Dr. Emeran A. Mayer and Dr. Elaine Y. Hsiao, both at UCLA, are guest editors of this issue.

In conclusion, publishing cutting-edge research on the biobehavioral mechanisms of health and disease is at the core of *Psychosomatic Medicine* and we are looking forward to receiving your new manuscripts.

With very best wishes,

Willem J. Kop
Editor-in-Chief

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Scientific Integrity and Replication in **Psychosomatic Medicine**

Emily Hooker



Emily Hooker is a doctoral candidate in psychology and social behavior at the University of California, Irvine. Her work examines cultural variation in close relationship processes and concomitant physiological and psychological outcomes.

Concerns over the replicability of scientific findings have been brewing for more than ten years. To highlight some prominent examples, in 2005, physician John Ioannidis published an article arguing that most scientific research is false (Ioannidis, 2005). Some years later, it came to light that a former, prominent social psychologist Diederik Stapel had falsified data in tens of publications. Around the same time, Dr. Daryl Bem published work in the *Journal of Personality and Social Psychology* providing evidence for precognition and premonition (Bem, 2011). As a result of these and other events, there has been growing interest by scientists across fields in the integrity of research.

In psychology and medicine, this concern has developed into a controversy over the replicability of research findings, which have the potential to influence health care and policy outcomes. Namely, a large-scale effort by the Open Science Collaboration to replicate psychological findings concluded that fewer studies replicated the original findings than was expected (Open Science Collaboration, 2015). A sub-set of published studies was selected for replication, and similar experimental designs and measures were used in an attempt to test the exact same research questions in a new sample. Many of these secondary studies did not replicate significant results that were originally reported. Others have found that areas of medicine may also suffer from poor replicability (Begley & Ellis, 2012). While the results of the Open Science project have been critiqued (Gilbert, King, Pettigrew, & Wilson, 2016), there is no doubt that this work has generated a discussion about how we do science.

Many believe the rate of replication for psychological science, in particular, is low, and this has generated substantial discussion about the integrity of our methods. There are a number of methodological norms that have been challenged (e.g., Cumming, 2014). For example, these norms include studies with small sample sizes, papers with only one study/test of a given hypothesis, studies conducted without a priori sample size determination based on estimated power, studies that have not pre-registered their designs or hypotheses, and studies that report on only some of the dependent variables.

Those questioning the integrity of psychological science have called for a number of changes in the way researchers conduct their work. For example, one proposal is that study designs and hypotheses are detailed and "registered" on the Center for Open Science website prior to the collection of any data. Others have suggested that researchers provide details on all measures and conditions included in a given study. Where these adjustments are not

possible, it is recommended that researchers conduct the same study a second time. These solutions may be appropriate for many areas of research, but may be difficult or impossible for others.

At the 74th annual meeting of the American Psychosomatic Society (APS), a roundtable of scholars and trainees, as well as Editor-in-Chief of *Psychosomatic Medicine*, Dr. Willem Kop, discussed the challenge of replication and scientific integrity generally, as well as how these issues apply to research by APS members. This discussion highlighted the diverse array of opinions on this topic and raised important questions. Is there an issue of replication in psychosomatic medicine? If so, why? Are there areas where our science could be more rigorous? If we implement changes to our research methods, how might academic incentive structures need to change? How will students and junior scholars be affected by changing standards? What kinds of research and/or populations will be given preference if the demands for higher sample sizes increase? How should journals judge the credibility of researchers? How does the for-profit aspect of publishing influence which findings are published?

Journals and funders alike are attending to this larger discussion in science and are implementing policy changes as a result (e.g., Eich, 2014). Moreover, the integrity of science in the public, especially the behavioral sciences, has been seriously questioned. This may in the future influence the ability for researchers to convey to policy makers the potential value for the public of their findings. APS members conduct work with important implications for the well-being of individuals, but if findings are not trusted by the public, their utility may diminish. Five years ago, Stapel's high-profile instance of fraud, and other precipitating events, propelled science into a discussion with the potential to dramatically change the way we conduct research. Going forward, I hope APS members continue to discuss the challenges facing our science and potential solutions to ensure our work is rigorous and trusted.

Begley, C. G., & Ellis, L. M. (2012). Drug development: Raise standards for preclinical cancer research. *Nature*, *483*(7391), 531-533.

Bem, D. J. (2011). Feeling the future: Experimental evidence for anomalous retroactive influences on human cognition and affect. *Journal of Personality and Social Psychology*, *100*(3), 407-425.

Open Science Collaboration (2015). Estimating the reproducibility of psychological science. *Science*, *349*(6251), aac4716.

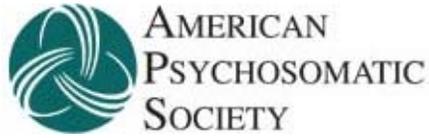
Cumming, G. (2014). The new statistics: Why and how. *Psychological Science*, *25*(1), 7-29.

Eich, E. (2014). Business not as usual. *Psychological Science*, *25*(1), 3-6.
doi:10.1177/0956797613512465

Gilbert, D. T., King, G., Pettigrew, S., & Wilson, T. D. (2016). Comment on "Estimating the reproducibility of psychological science." *Science*, *351*(6277), 1037.

Ioannidis, J. P. A. (2005). Why most published research findings are false. *PLoS Medicine*, *2*(8), 0696-0701.

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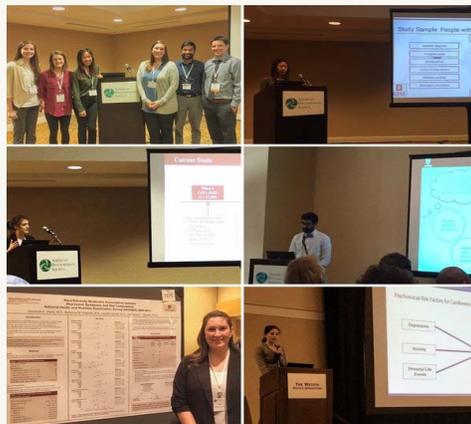
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APS AM 2016- DENVER, CO

[#APS2016DEN](#) via [@APsycStudent](#)



Denver, Colorado via [@NinaKupper](#)



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Mike Antoni nails it at the [#APS2016DEN](#) conference dinner via [@healthpsycleeds](#)



Socializing is essential at [#APS2016DEN](#) via [@AricPrather](#)

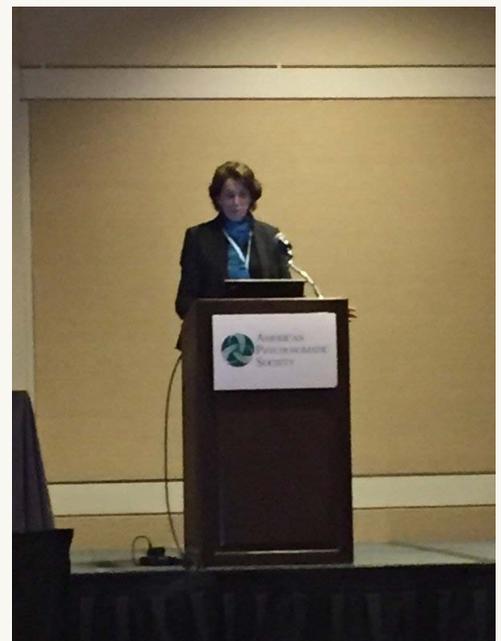


APS Grad student Naoyuki Sunami presenting at [#APS2016DEN](#) via [@LisaJaremka](#)



Healthy breakfast to enjoy mindfully at [#APS2016DEN](#) via [@mindfulnesslab](#)

Elizabeth Brondolo receiving the Patricia R Barchas Award at [#APS2016DEN](#) via [@healthpsycleeds](#)





Dr. Arigo presenting on [#prediabetes](#) and [#exercise](#), with BCMB coauthor Max Cornell via [UofSHealthPsych](#)

Downtown Denver via [@UofSHealthPsych](#)



Immediate Past-President Mustafa al'Absi and President Christoph Herrmann-Lingen



Dean Ornish

2016 Distinguished Scientist recipient
Redford Williams



One of our APS 2016 Speakers Kevin Tracey





Some of our 2016 APS Scholar Award winners



A few of our Medical Students picking up their awards



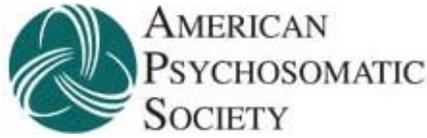
Several of the 2016 Minority Initiative Travel Award winners



Several participants from the 2016 Young Investigator Colloquium



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Neuroscience of Pain: Early Life Adversity,
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New York, NY - October 15, 2016