



MARCH 2018

PRCP: Pacific Rim College of Psychiatrists

President: Prof Pichet Udomratn, Thailand
Secretary General: Prof Tsuyoshi Akiyama, Japan
Newsletter Editor: Prof Philip Morris, Australia.

PRCP Overview

The PRCP was established in 1980. The College aims to foster greater national development of mental health services, and to support the improvement of education and research in psychiatry through greater professional collaboration in the Asia-Pacific region. The College also provides a formal setting for communication among our members through a biennial conference held in one of our member countries. The conferences provide an opportunity for the presentations of scientific papers, discussions on important issues in psychiatry, and consideration of the variety of clinical, social, political and ethical issues that concern psychiatrists in clinical practice, administration, and teaching and research in the Asia-Pacific. Members of the College also conduct seminars and support collaborative research and education projects in various areas of psychiatry. PRCP members are active in other professional organizations and provide a variety of informal linkages to foster greater inter-organizational collaboration for the advancement of psychiatry among our members' home countries.

The 18th International Congress of PRCP
Save the Date 26th -28th October 2018
Sedona Hotel, Yangon, Myanmar <http://www.prcp2018.org/>

Welcome from the Newsletter Editor



Dear PRCP Colleague,

I am very pleased to present to you the first newsletter for 2018. This year brings many opportunities for growth of the PRCP. From Friday October 26 to Sunday October 28 in Yangon, Myanmar we will have the biennial PRCP Conference, this year convened by Dr Tin Oo and Dr Kyi Min and our PRCP colleagues in Myanmar and co-sponsored by the Myanmar Mental Health Society. In the period leading up to this important meeting the PRCP newsletter will be published regularly.

Our last very successful biennial meeting was held in Kaohsiung, Taiwan in November 2016. A follow-up report of that meeting by Prof Mian-Yoon Chong is provided in this newsletter. Since then the PRCP has been active in education and professional development in mental health and psychiatry in the Asia-Pacific.

In September 2017 the PRCP made a substantial contribution to the 5th Asian Conference of Schizophrenia Research Bangkok. A report on this meeting is included in this newsletter. Throughout this time our College has continued to auspice the highly

regarded Asia-Pacific Psychiatry (APPY) Journal. This journal is provided at no cost to PRCP members.

2018 will mark the beginning of Special Interest Groups (SIG) in our College. College members with interests in specific areas of psychiatry are encouraged to collaborate and put together symposium sessions at the biennial meeting. To 'start the ball rolling', so to speak, two articles on psychopharmacology are included in this newsletter. Prof Edmond Hsin-tung Pi writes on cross-cultural psychopharmacology and Prof Mian-Yoon Chong provides guidance on antipsychotic prescribing. An article by Prof Youn Chong Park on depressive illness in Asian settings is also included. Articles highlighting other SIG areas will be published in following newsletters.

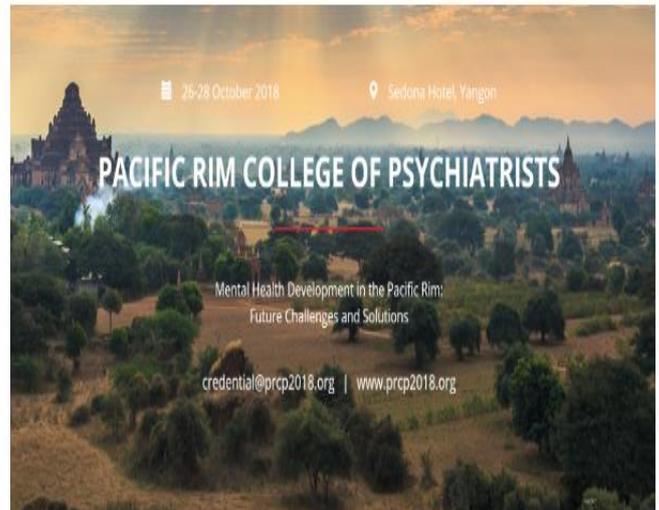
PRCP President Prof Pichet Udomratn capably leads the College. His President's Report is included in this newsletter. A list of the College Office Bearers and Board Directors is provided for you information. We recently have been made aware of the death of one of our esteemed members, Prof Chien CP. Prof Mian-Yoon Chon provides a thoughtful obituary on our former colleague's life and career.

I hope you, like me, are excited about our PRCP activities in 2018! I look forward to meeting you in Yangon in late October. Please encourage colleagues to become a member of the PRCP and join us at the biennial meeting - a new member application form is located at the end of the newsletter. All PRCP Board Directors are happy to support new applications for membership

Yours sincerely,

Prof Philip Morris.

IMPORTANT NOTICE



The 18th International Congress of PRCP
Save the Date 26th -28th October 2018
Sedona Hotel, Yangon, Myanmar

<http://www.prcp2018.org/>

Invitation to attend conference

Dear Colleagues and Guests,

The Pacific Rim College of Psychiatrists (PRCP) was founded in 1980 with the intended motto to be the voice of Asia Pacific Psychiatry. PRCP aims to support the improvement of education, research in psychiatry and mental health through greater professional collaboration in the Asia Pacific Region as well as to become the platform for meeting in the biennial conference, which from now on, will be so named as; The International Congress of PRCP (formerly called the Scientific Meeting of PRCP).

The Pacific Rim is a region of great diversity, it contains several of the largest and most populous countries in the world as well as some of the smallest.

In recent years, the rapid mental health developments, in the countries of this dynamic region, have faced many challenges and has the need for some complex solutions. It seems very appropriate for us to discuss and share experiences on this topic. So, the theme of the 18th International Congress of PRCP will be: "Mental Health Development in the Pacific Rim: Future Challenges and Solutions". We hope that this meeting will stimulate great interest in mental health services, education as well as research. This congress will be a good opportunity for all professionals involved in the care of mental illnesses such as; psychiatrists, psychologists, mental health nurses, social workers, academics, researchers, and also for care givers, social agents and policy makers, to join, share and elaborate on the current state of the art and future directions of services and research for mental health developments. Lastly, it is my great honour to invite all of you to participate in the 18th International Congress of PRCP, which will be held over; 26th -28th October 2018 at the Sedona Hotel, Yangon, Myanmar. I am looking forward to seeing you all in Yangon in 2018.

Yours sincerely,

Prof. Pichet Udomratn, M.D.
President of Pacific Rim College of Psychiatrists (PRCP)
PRCP 2018 Congress President

A Message from the New President



It is a great honor and pleasure to serve you as the new president of PRCP after the two successful years of Prof. Helen Herrman's tenure.

As you are aware, PRCP was founded in 1980 with the motto to be the voice of Asia-Pacific Psychiatry. PRCP aims to support the improvement of education and research in psychiatry through greater professional collaboration in the Asia-Pacific Region.

To achieve this goal, PRCP will provide more channels for communication among its members by setting up special-interest groups (SIG), which will be accessible through our website in the near future. For each SIG, you will be able to contact our officers, board members and colleagues who share common interests directly. This way, many networks of Asia-Pacific researchers from various areas will be created. Therefore, our members will more concrete benefits than only a hard copy of the Asia-Pacific Psychiatry Journal and a platform to meet in the next biennial conference.

Additionally, PRCP will strive to expand beyond our geographical borders by trying to persuade more psychiatrists from Latin and South America to join our organization.



In a nutshell, our strategy for the next 2 years we will follow the acronym, PRCP:

P is for Participation

R is for Responsibility

C is for Collaboration

P is for Pacific Rim countries

So we will focus on participation and collaboration among psychiatrists from Pacific Rim countries, and we hope each of us will take wholeheartedly to the task they have been assigned.

Lastly, I would like to thank you all again for your kind support and invite you to work together over the next two years to make the voice of Asia-Pacific Psychiatry heard around this world.

With my best wishes and personal regards,

Pichet

Prof. Pichet Udomratn, M.D.

President, PRCP

Professor of Psychiatry
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Thailand

November 2016

PRCP Officers and Board of Directors

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Report of the 17th Scientific Meeting of Pacific Rim College of Psychiatrists (PRCP):

Nov 3-5, 2016, Kaohsiung, Taiwan

The 17th Scientific Meeting of PRCP was successfully held in Kaohsiung, Taiwan from 3-5 November, 2016 at the Kaohsiung Exhibition Center. The meeting received endorsements and support from the local and central government, academic societies of psychiatry and mental health, and local cultural organizations. The last day of the PRCP meeting was overlapping the first day of

the two-day 55th annual meeting of the Taiwanese Society of Psychiatry, an arrangement to draw more local participants.

There were 753 delegates from 26 countries. Among them, one third (248) were from the international countries such as Australia (10), Belize (1), Cambodia (1), Canada (12), China (45), Fiji (1), Finland (1), Hong Kong (9), India (6), Indonesia (19), Japan (50), Korea (21), Malaysia (4), Mongolia (1), Myanmar (1), Nepal (1), Nigeria (1), the Philippines (4), Singapore (11), Swaziland (1), Switzerland (1), Thailand (33), Tuvalu (1), USA (8), and Vietnam (4).

The theme of the meeting is “**Mental Health in a Dynamic Region: Creating Changes through Partnership**”, and it had indeed demonstrated a strong partnership among the colleagues of Asia Pacific region and presented a total of 194 posters and 226 oral presentations. Many were the results of their long-term collaborative work, like the Research on Asia Prescription Pattern (REAP) consortium with centers from 15 Asian countries, the Teachers of Psychiatry (TOP) education and training program led by Professor EH Kua (Singapore), the South East Asian community mental health and rehabilitation programs coordinated by Professor Du-Jian Tsai (Taiwan), the East Asian research on addiction and substance use disorders, and the disaster relief program etc.



It was however difficult to accommodate such a substantial amount of presentations in just less than 3 days of the conference as a half day was allocated for a cultural event at the Buddha Memorial Center. The program was certainly tight and only a very short time was given for each presenter in most parallel sessions and leaving no extra time for discussion. It could have been much better if the meeting was held for 3.5 than just 3 days.

The social events were equally fruitful. The reception dinner was held on the first evening at the Banana Pier, beginning with the ceremony of traditional welcome lion dance and dances of “the God of Third Prince”. The dinner was served at a warehouse-turned water-front restaurant hosted by the deputy mayor of Kaohsiung, followed by an introduction of the Kaohsiung city presented by the deputy chief of Kaohsiung Bureau of Tourism. After the dinner, participants were arranged for an exceptional 70-minute cruising tour in the harbor on a luxurious cruise ship serving on board with wine, cheese and home-brew beer while enjoying a beautiful night scenery of the city.



In the afternoon of the second day, all participants were transferred by buses to the Buddha Memorial Center, a tourist spot that is located at about 40-minute driving distance from the city center of Kaohsiung. Guided tour was provided and participants took the opportunity to visit this magnificent center of

Eastern culture after the plenary speech given by Professor Mitchell Weiss (Switzerland) on cultural epidemiology and a forum on disaster management and recovery. In the evening, a blessing ceremony for peace was arranged and delivered by the Abbot of Fo Guang Shang Monastery in front of the 108-meter tall Buddha statue. With an LED lamp on their hands, participants lined up and joined the ceremony that lasted for about 20 minutes. Before leaving the Center, a group photo was taken under the foot of the great statue of Buddha with all lamps laid on the floor aligning with the word “PRCP 2016” (see companion picture).



The General Assembly took place on the last day (5 November, 2016) and the new President, Executive Committee and President-elect were introduced. Travel awards were also presented at the general assembly to five young psychiatrists from the developing countries. During the farewell dinner, participants enjoyed the Chinese food and good wine at the prestige Palace Club on the 77th floor of the iconic building (85-Skytower Hotel) with a panoramic view of the city and harbor of Kaohsiung. The mood was high as singing and dances were going on

even without a karaoke or any background music.

The conference was one of the most successful and it could not have been happened without the enthusiastic support and active participation of the Board and PRCP members. We had adopted several approaches that were different from the previous meetings:

- **A cost-down strategy:** We did not employ any conference company to run for the meeting, but we made partnership with the local government and organizations and utilized whatever available resources that we can get.
- **Full support from the local government:** As financial support from the industry is drying out, it is vital to have the assistance and support from the local government specifically in cutting rates of conference rooms which takes away a huge proportion of the expenses.
- **To make the meeting affordable:** High rate of registration fees are seen in most conferences, but a significant lower rate of registration fees endorsed in this meeting was certainly attractive and drawn wider participation from trainees and those from the low-income countries.
- **To combine academic activities and tourism:** The design was to use this meeting as a platform to promote local tourism. On the other hand, it also utilized resources of other agencies like the local board of tourism to balance the cost.
- **Employing medical students as volunteers:** We trained local and foreign undergraduate medical students as volunteers at the meeting. Other than running down the cost of manpower, it is also a good opportunity for these medical

students to have an early exposure to international academic conference and hoping that some of them will choose psychiatry as their future career.

- **To organize a green conference:** It is vital and we can also save any unnecessary printing and costs, like providing electronic than printed abstracts via the conference web and APP (www.prcp2016.org).

Prof Mian-Yoon Chong

President-Elect, PRCP Vice-Superintendent, Chang Gung Memorial Hospital, Chiayi and Professor of Psychiatry, Chang Gung University School of Medicine, Taiwan
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PRCP Supported The Asian College of Schizophrenia Research to Organize Its Congress in September 2017

The organizing committee of the 5th Asian Congress of Schizophrenia Research, would like to thank PRCP and all of the 5th ACSR participants, not only those from Asian region but also those who traveled a long distance from Europe, Africa and USA. The conference was held last September at Asia Hotel, Bangkok, Thailand with great success. We were granted an honored opportunity to welcome more than 300 delegates from 23 countries. I greatly appreciate their interest and participation in the congress. Without their attendance and without the support from PRCP, the congress would not have been as successful.

At the congress, three pre-congress workshops, four plenary lectures, two plenary symposiums, and 18 regular symposiums were successfully carried out. There were in total 72 guest speakers from 19 countries (46 overseas speakers and 26 local [Thai] speakers), making this congress full with diverse and interesting psychiatric topics. The congress also held the poster presentation contest that consisted of 51 contestants. The first prizes were granted to In Won Chung (Republic of Korea) and Taekwan Kim (Republic of Korea). The second and the third prizes went to Tak Hyung Lee (Republic of Korea) and Sohei Kimoto (Japan); and Chun-Hung Chang (Taiwan) and Huai-Hsuan Tseng (Taiwan), respectively.

In addition to the registrants' participation, we would not have achieved our goal without the contribution from key current and past board members of PRCP. I, as the 5th ACSR president and also as the president of PRCP would like to take this opportunity to express my gratitude for the collaboration from the PRCP representatives. Professor Mian Yoon Chong, the president elect of PRCP, gave us such a great honor by hosting a pre-congress workshop entitled 'Psycho-pharmaco-epidemiology Research'. Also, Professor Helen Chiu, the past president of PRCP, updated us on the topic of 'Psychotic Symptoms in the Elderly'. In addition, Professor Hai Gwo Hwu, a member of the PRCP board of directors and immediate past president of ACSR, set aside his valued time to arrange the ACSR presidential lecture entitled 'The Psychopathology and the Proposed Optimal Care for Cases of Prodromal Schizophrenia in the Future'. Not to mention another great support from one of the PRCP vice presidents, Professor Edmond Pi successfully presented his talk on the topic of 'Cross-cultural Psychopharmacology: An Asian Perspective'. The congress would not

have reached its objective without the kind involvement from these notable professors.



(right) Prof Helen Chiu, Prof Hai-Gwo Hwu
(center) Prof Pichet Udomratn
(left) Dr Afzal Javed (the President Elect of the WPA)

I deeply wish that ACSR will still receive kind support from PRCP for the 6th ACSR which will take place in Guangzhou, China during 18-20 September 2019, and look forward to meeting many participants especially from the Asia-Pacific region at the upcoming congress.

Prof.Pichet Udomratn,M.D.

1. SIG on Cross-Cultural Psychopharmacology: Viewpoint from Asia-Pacific



Cross-cultural psychopharmacology seeks to determine whether there are differences in responses to psychopharmacologic agents

among various ethnic groups and the reason for such variations. During the past four decades numerous clinical reports have addressed potential differences in therapeutic dosages and side effects of psychotropic medications between various ethnic groups. In addition, several rigorously designed studies have focused on ethnic differences in pharmacokinetics (including absorption, metabolism, distribution and excretion) and pharmacodynamics (including receptor-coupling activity). These ethnic variations are mainly influenced by genetic predisposition but are also influenced by other factors such as culture, environment, psychosocial supports, and attitudes towards pharmacotherapy.

An overview of the existing information in regard to Asian perspectives of ethnopsychopharmacology dealing with neuroleptics, mood stabilizers, antidepressants, and benzodiazepines should be discussed. Also included will be data on neuroleptic-induced movement disorders and genetic polymorphism of cytochrome P-450 isoenzymes. Clinical implications for the reported differences and the needs regarding how to select the most appropriate psychotropic medications considering target symptoms and side effects for different ethnic groups, particularly Asians should be addressed. Also, recent advances including pharmacogenomics and future directions with respect to cross-cultural issues of psychopharmacology will be discussed among PRCP members who are interested in this topic..

Prof Edmond H. Pi, M.D.

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Special Interest Group on Cross-Cultural Psychopharmacology.

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2. SIG on Psychopharmacology and Pharmaco-epidemiological Research: Use of Antipsychotics: Three Principles of Fives

When prescribing a drug, psychiatrists nowadays are facing a wide variety of psychotropic medications to choose from. For good prescribing practice of antipsychotics, three principles of fives are recommended, emphasizing 5-must not, 5-no and 5-must conditions.

The **5 'MUST NOT'** are the unacceptable adverse effects of a drug that are life threatening: neuroleptic malignant syndrome, neutropenia, myocarditis, arrhythmia and impaired glucose tolerance. The **5 'NOs'** are the harmful adverse events that can be

preventable: extra-pyramidal syndrome, hyperlipidemia, weight gain, the use of anti-cholinergic drugs, and poly-pharmacy. The **5 'MUST'** or essential principles for prescribing an antipsychotic are as follows: it should be safe, effective, less costly, in a simple regime, and with a prescribing order starting from a 'clean (pure dopamine agent) to a 'dirty' (multi-acting target receptor agents) drug.

The prescribing order is especially important in a drug-naive patient. A 'dirty' drug like clozapine that binds too many different receptors other than dopamine may have some immediate advantages, but could highly increase risks in the immediate withdrawal syndrome and other serious events. It is commonly easier to switch from a simple or 'clean' drug to a 'dirty' drug, but not the reverse. Likewise, the likelihood of problematic side effects tends to increase in polypharmacy or drugs used in combination because of possible harmful pharmacokinetic interactions. Most importantly, an effective drug does not necessary have to be expensive

and patients are generally more adherent to simple medical regime than the complex one.

The above simple guidelines were laid forward by the late Prof Wen-He Chang (1934-2008), a pioneer researcher in psychopharmacology and the founder of the Taiwanese Society of Biological Psychiatry and Psychopharmacology.



**Prof Mian-Yoon Chong, MD., PhD.,
FRCPsych**

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Special Interest Group on Psychopharmacology and Pharmaco-epidemiological Research .
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3. SIG on Depression: Message from Seoul, Korea

Korea has been on the top of the list for suicide rate among OECD countries over the past ten years. As we all know, depression is one of the major causes of suicide; the Korean Ministry of Health and Welfare has launched ambitious project to find, prevent, and overcome the depression and established Clinical Research Center for Depression (CRESCEND).

However, depression is not homogenous so



studies on depression should also be multi-dimensional. Among many studies from basic science to clinical reports, I would like to introduce an interesting finding of cohort study from CRESCEND. Prof. Min-Soo Lee led the group and my colleague Prof. Seon-Cheol Park elaborated the findings with following paper.

Below are the comments of Prof. Seon-Cheol Park:

“The clinical research for depressive disorders in South Korea has been led by the psychiatrists of the Clinical Research Center for Depression (CRESCEND) for the past ten years. Most of all, harmonization of the evidence-based, non-pharmacological and pharmacological treatment guidelines have been suggested by the CRESCEND study (Park et al. 2014; Won et al. 2014). The treatment guidelines have presented widely clinically available therapeutic approaches for depressive disorders in South Korea. In addition, the epidemiological research of the CRESCEND study, which has been the first prospective, observational and nationwide clinical study in South Korea, has recruited 1,183 depressed patients in 16 university-affiliated hospitals and two general hospitals from 2006 to 2008. Hence, co-morbid insomnia (Park et al. 2013), co-morbid hazardous drinking (Park et al. 2015), age-at-onset-related clinical features (Park et al. 2014), age-related clinical features (Park et al. 2017), season-of-birth-related clinical features (Park et al. 2016), heterogeneity of the diagnostic criteria (Park et al. 2017), clinical validation of the Psychotic Depression Assessment Scale (PDAS) (Park et al. 2014; Park et al. 2015; Park et al. 2017), and other diverse clinical features of depressive disorders in South Korea have been presented.”

To encourage (and also challenge) our colleagues, I would like to share my

experience ambitiously attempted to investigate the new acculturation process of illness behavior of depression, an effort that ended up facing challenges and limitations. Traditionally Asians, especially Koreans, were known to complain physical discomforts instead of the emotions of depression during the initial interview. Starting a few years ago, patients started telling me that they came to the hospital because of depression. I was puzzled and assumed that “Now, this could be the beginning of the change and Koreans are under new acculturation process”. So, I started investigating how many patients are changing types of complaints from somatic to psychological ones. However, after several months this new trend (or my assumption) of changing complaint type returned to previous pattern, that is, back to physical complaints. My investigation could not go further. I have then found out that their comments “I have depression” was influenced by media. “I have depression” did not necessarily mean “I am depressed”, but rather meant “I have the symptom so called depression which I heard from media frequently.” Back then, there were multiple suicides of celebrities who suffered depression and media frequently quoted ‘depression’ as the cause. “Depression” in patients’ words were more close to physical complaints than emotional ones. Finally, I have come to re-confirm the fact that “acculturation process is very slow in illness behavior” is really true.

This brief article may cover only a portion of depression. Nonetheless, I hope that this letter provides one interesting aspect of various approaches towards the depression to PRCP community.

Prof Yong Chon Park,
Special Interest Group on *Depression*

References available on request from the author at
[contact email: hypyc@hanyang.ac.kr](mailto:hypyc@hanyang.ac.kr)

Obituary: Professor Ching-Piao Chien (1933-2017)



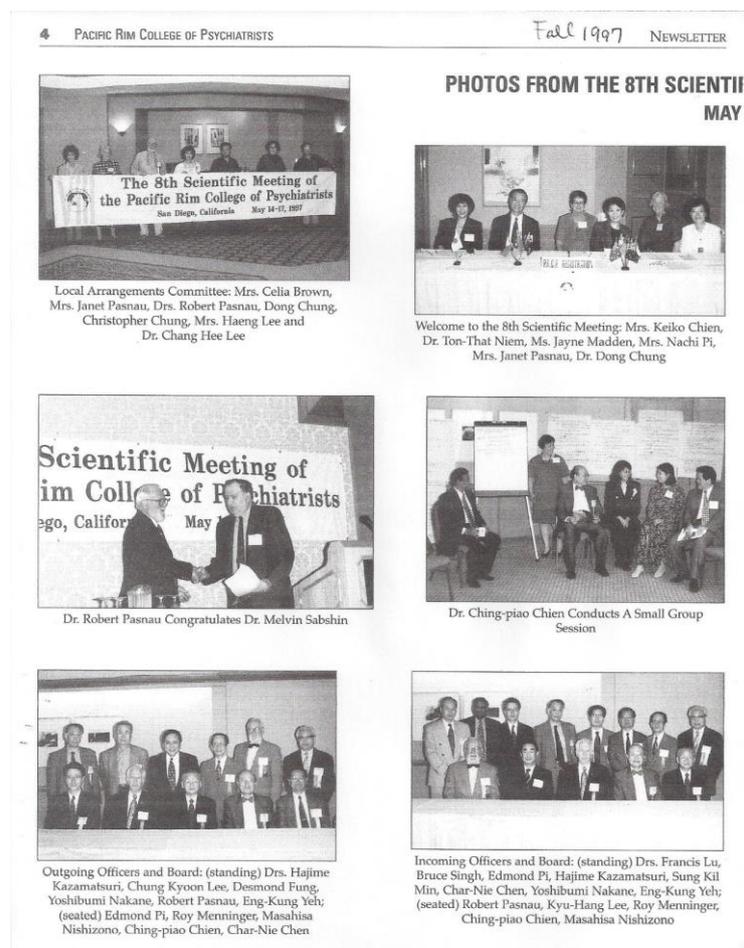
Professor Ching-Piao Chien (1933-2017), a distinguished psychiatrist and one of the founding members of PRCP, died of cancer on the 21st Nov, 2017. He was born in Taiwan, but after completed his residency training in Taiwan under the supervision of the late Professor Tsung-Yi Lin, he received advanced psychiatric training in US at the Harvard University and resided in the US. He was being appointed as the professor of psychiatry first at Albany University and then UCLA. At 1977 WPA meeting in Hawaii, Professor Chien along with Professor Joe Yamamoto and a group of psychiatrists from Asia Pacific brought up the idea of establishing a psychiatric society for the region-the PRCP.

After the successful inauguration of PRCP in 1980, he served as the first secretary general and assumed the position until 1999. Prof Chien returned to Taiwan in 1991 to resume his duty as the superintendent of the Taipei Psychiatric Institute. Under his leadership, he extended mental health services into the community and also built a strong foundation for the research of biological psychiatry in Taiwan. Even after his retirement, he was still actively engaged in various community program for the promotion of health and well-being of cancer and

psychiatric patients. He received numerous honors for his dedication in mental health service and education in the Asian Pacific region including the APA Kung Po Su Memorial Asian American Psychiatry Award, Benjamin Rush Silver Metal Award, Distinguished Service Award of PRCP, and others. His outstanding contributions to the College will be long remembered.

Prof Mian-Yoon Chong

President-elect, PRCP



(courtesy from Edmond Pi)



New members

We welcome new members. To join the PRCP please complete the following application form and return with your **CV** and **one passport photo** to the **PRCP Secretariat** located at:

Department of Neuropsychiatry, NTT MEDICAL CENTER TOKYO
5-9-22 Higashi-godanda, Shinagawa-ku Tokyo 141-8625 JAPAN

Phone: + 81 3 3448 6508 | Facsimile: + 81 3 3448 6507 | E mail: info@prcp.org

Membership costs between USD\$15 and USD150 depending on region (see <http://www.prcp.org/members.html>)

APPLICATION FORM FOR MEMBERSHIP DATE: _____
OF THE PACIFIC RIM COLLEGE OF PSYCHIATRISTS

TITLE: _____ FIRST NAME: _____ LAST NAME: _____

DATE OF BIRTH: _____ GENDER: _____ COUNTRY: _____

CURRENT POSITION: _____

MAILING ADDRESS: _____

HOME PHONE: _____ OFFICE PHONE: _____ FAX: _____

EMAIL: _____

SPECIALIST BOARD: DATE RECEIVED:

PSYCHIATRY: _____

NEUROLOGY: _____

OTHERS (PLEASE SPECIFY): _____

SPECIALIST TRAINING: _____

QUALIFICATIONS: _____

YEARS WORKED AS PSYCHIATRISTS: _____

MEMBERSHIP OF NATIONAL ASSOCIATIONS: _____

INTERNATIONAL ACTIVITIES: _____
