

Poster Application for the 2025 Harvard Psychiatry Research Day

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The 2025 Harvard Psychiatry Research Day will take place **in person** at the Martin Conference Center (77 Avenue Louis Pasteur, Boston) on Wednesday, February 26, 2025.

PROGRAM

The poster session will take place from 1:30-3:30pm in the balconies and rotunda of the conference center. The ceremony for the Hauser, Mysell and Solomon Awards will take place from 3:45-4:00pm in the Amphitheatre of the conference center, and will be immediately followed by the Mysell Lecture from 4:00-5:15pm in the same room. The 2025 Mysell Lecture will be given by [Lisa Dixon, MD, MPH](#).

Since this is an in-person event, only the abstract for the poster needs to be submitted by the application deadline of Monday, January 13, 2025 at 9am.

(For future reference, please note that when the time comes to print your actual poster for the event, you should print the poster to be able to fit completely within a 4x4 foot display board, and be sure to bring your own thumbtacks to hang it. Posters that exceed these dimensions will need to be folded or covered.)

INSTRUCTIONS

Acceptance of submissions is determined by the Mysell Committee of the Department of Psychiatry.

There is a limit of one-first authored presentation per person.

Abstracts are limited to 2,200 characters (INCLUDING spaces, but EXCLUDING title and authors in the character count).

The Abstract Body must include the following headings: Title, Authors, Background, Methods, Results, Conclusions

Sample Abstract Format

The impact of patients' expectations on clinical response: Re-analysis of data from the Hypericum Depression Trial Study Group

J. Chen J, G.I. Papakostas, S.J. Youn, L. Baer, A.J. Clain, M. Fava, D. Mischoulon
Depression Clinical and Research Program, Dept. of Psychiatry, Massachusetts General

Hospital, Harvard Medical School

Background: Patient belief about assigned double-blind treatment may influence outcome. We reanalyzed data from the Hypericum Depression Trial Study Group's placebo-controlled trial of St. John's wort (SJW) versus sertraline for major depressive disorder (MDD) to determine whether patients who believed they were receiving active therapy rather than placebo obtained greater improvement, independent of assigned treatment.

Methods: 340 adults with MDD and baseline HAM-D-17 scores of ≥ 20 were randomized to either SJW 900-1500 mg/d, sertraline 50-100 mg/d, or placebo for 8 weeks. At week 8, patients were asked to guess their assigned treatment. 243 subjects met intent-to-treat criteria. Univariate ANOVA was used to determine whether treatment assignment moderated the effect of belief on clinical improvement. Logistic regression examined whether treatment assignment moderated the effect of belief on response ($\geq 50\%$ decrease in HAM-D-17 score) and remission (final HAM-D-17 score < 8).

Results: Significant differences in improvement were found for belief in SJW ($p < 0.001$) or sertraline ($p = 0.001$) versus placebo, with strongest improvement in the SJW-believing group. Response rates were significantly stronger for subjects guessing active treatments ($p < 0.001$ for SJW and sertraline) versus placebo, and for subjects guessing SJW versus sertraline (Fisher's $p = 0.049$). Association between belief and improvement remained significant when controlling for assigned treatment ($p < 0.001$). A significant association with response was seen only for treatment guess ($p = 0.003$, 95% CI=0.588), but not for assigned treatment. No significant associations were found for remission rates.

Conclusions: Patient expectations regarding treatment may exert a greater influence on clinical outcome than the actual medication received.

If you need to modify your submission after submitting this form, AND it is still before the submission deadline, you may submit a revised application form with the modifications included. We will use only the latest submission that is received prior to the deadline. Once the deadline has passed, no additional modifications can be made to your submission. Also, please note that if you mistype your email address, you will not receive an email summary of your submission. Please contact Heather Adams at heather_adams@hms.harvard.edu if you encounter any difficulties submitting this form.

Please respond to the questions below to submit all your information.



First Name:



Last Name

Degree (check all that you want to appear on your virtual poster page next to your name):

- MD (1)
- MBBS (25)
- DO (23)
- PhD (2)
- PsyD (16)
- DrPH (26)
- MPH (4)
- LCSW (5)
- MSW (17)
- MEd (22)
- MA (6)
- MS (7)
- MPS (19)
- MPA (20)
- NP (24)
- RN (3)

- BA (11)
- BS (12)
- BA Candidate (14)
- BS Candidate (15)
- HSD (21)
- High School Student (18)
- Other (13) _____



Please enter your email address:



Please confirm your email address:



What type of application is this?

- My one allowed first-authored presentation (1)
 - A presentation for which I am NOT listed as the first-author (2)
 - A revision of a previously submitted application (revisions are only accepted until the deadline); I acknowledge that my original submission will be deleted and only the latest version that is submitted prior to the deadline will be used. (3)
 - Other (4) _____
-

Are you a:

- Medical Student (8)
- Resident (MD only) (3)
- Fellow (MD or PhD already earned) (2)
- Clinical Psychology Intern (pre-PhD) (7)
- PhD Student (NOT in Clinical Psychology) (15)
- Visiting PhD Student (16)
- Faculty Member (1)
- Research Scientist (19)
- Research Associate (14)
- Sponsored Collaborator (13)
- Research Project Director (9)
- Program Manager (17)
- Lab Manager (10)
- Research Assistant (5)
- Clinical Research Intern (11)
- Medical Assistant (18)

High School Student (12)

Other (please specify) (4)

Page Break

Display This Question:

If Are you a: = Resident (MD only)

Name of Residency Training Program:

- BCH Fellowship in Child and Adolescent Psychiatry (10)
- BCH-Tufts Medical Center Triple Board Residency Program (11)
- BIDMC Harvard Psychiatry Residency Training Program (4)
- BWH/HMS Psychiatry Residency Training Program (7)
- CHA Adult Psychiatry Residency Training Program (2)
- CHA Fellowship in Child and Adolescent Psychiatry (9)
- HSS Adult Psychiatry Residency Training Program (5)
- MGH/McLean Adult Psychiatry Residency Training Program (6)
- MGH/McLean Child and Adolescent Psychiatry Residency (8)
- Other (12) _____

Display This Question:

If Are you a: = Resident (MD only)

Please indicate your program year status:

PGYI (1)

PGYII (2)

PGYIII (3)

PGYIV (4)

PGYV (5)

PGYVI (6)

Other (7) _____

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Display This Question:

If Are you a: = Fellow (MD or PhD already earned)

Or Are you a: = Resident (MD only)

The selection of abstracts eligible for a Solomon or Mysell Award is based on abstracts showing a completed set of data and its analysis. Abstracts describing projects planned or begun without available results can be presented at the poster session, but will not be considered for an award.

Display This Question:

If Are you a: = Fellow (MD or PhD already earned)

Or Are you a: = Resident (MD only)

Please indicate whether you would like your abstract considered for the Mysell/Solomon Award. (Please note, previous Mysell/Solomon awardees are NOT eligible for the same award again. Also, abstracts that have no data are NOT eligible for an award; in such cases, please select "no" below so that abstracts without any data are not sent to judges for consideration for an award.)

Yes (1)

No (2)

Display This Question:

If Please indicate whether you would like your abstract considered for the Mysell/Solomon Award. (Pl... = Yes

Please confirm that BOTH components of the following statement are true: "At least fifty percent of my time devoted to working on this project was spent while I have been participating in a Harvard-affiliated residency or fellowship training program (this affiliation need NOT be in the Department of Psychiatry)"

This statement is true (1)

Other, please explain (2)

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Display This Question:

If Are you a: = Fellow (MD or PhD already earned)

*And Please indicate whether you would like your abstract considered for the Mysell/Solomon Award.
(Pl... = Yes*

Are you in an HMS affiliated fellowship?

Yes (1)

No (2)

Display This Question:

If Are you a: != Resident (MD only)

Affiliated Hospital/Institution:

Beth Israel Deaconess Medical Center (1)

Boston Children's Hospital (2)

Brigham and Women's Hospital (3)

Cambridge Health Alliance (4)

Dana-Farber Cancer Institute (9)

Massachusetts General Hospital (5)

McLean Hospital (6)

Veterans Administration Boston Healthcare System (7)

Other (Please specify) (8)

Display This Question:

If Are you a: = Fellow (MD or PhD already earned)

And Please indicate whether you would like your abstract considered for the Mysell/Solomon Award.
(Pl... = Yes

In what year of post-doctoral fellowship are you?

▼ 1 (1) ... 6 (6)

Display This Question:

If Are you a: = Fellow (MD or PhD already earned)

And Please indicate whether you would like your abstract considered for the Mysell/Solomon Award.
(Pl... = Yes

Or Are you a: = Resident (MD only)

And Please indicate whether you would like your abstract considered for the Mysell/Solomon Award.
(Pl... = Yes

Please indicate the role(s) you had in the project:

	1- None (1)	2- Small (2)	3- Moderate (3)	4- Major (4)
Conception and design (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Acquisition of data (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Statistical analysis of data (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpretation of the data (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drafting of the abstract and poster (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Please enter the title of your poster. **Do NOT use any quotation marks.** Only capitalize relevant words in the title.



Abstract Body

Please upload your abstract as a PDF.

The file should be labeled LastnameFirstname, so if your name were Sarah Smith, the file would be saved as "SmithSarah.PDF"

Abstracts are limited to 2,200 characters (including spaces, but excluding title and authors in the character count). Abstracts exceeding this length, or those that do not follow the mandatory format below will not be considered.

Mandatory Abstract Format:

Poster Title

Authors, Institutional Affiliations

Background: briefly describe the experimental question and context here

Methods: briefly describe how the study was conducted here

Results: describe the outcome, including statistical support where appropriate here

Conclusions: briefly summarize the results, place the study in the broader context of previous research, and describe the clinical relevance of the findings here

Clicking the arrow below will submit your application.

End of Block: Default Question Block

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