

Liaison Psychiatry and Palliative Medicine

1. Staffs and Students (April, 2009)

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Research Student	Okihiko AIHARA,	Ryuhō IBARAKI.

2. Purpose of Education

The purpose of the section is to help understanding characteristics of psychosocial distress in patients with physical and mental disorders from a comprehensive viewpoint. Objects are mainly physical patients accompanied with pain, anxiety, depressive mood and so on. Students study these patients' symptoms, how to diagnose, practice of treatment and methods of preventive measures.

3. Research Subjects

- 1) Assessment of mental state in cancer and other physical patients using written questionnaire
- 2) Research on quality of life (QOL) in cancer patients and their families
- 3) Investigation cognitive function of patients with organic disorders (SLE, diabetics, and so on) undergoing a battery of psychometry tests and neuroimaging examinations
- 4) Explanation for the relationship between physical symptoms and mental states in patients with psychosomatic diseases including chronic pain and irritable bowel syndrome (IBS)
- 5) Examination for physiological phenomenon of psychiatric patients using eye mark recorder, electroencephalogram (EEG) and functional MRI (fMRI)

4. Clinical Services

Psychosomatic clinic provides consultation-liaison psychiatry services at the request of the treating medical or surgical staffs. Patients accompanied with insomnia, anxiety, depressive mood and delirium are treated with psychotherapy and prescription medicines.

5. Publications

Original Article

1. Mochizuki Y, Matsushima E, Omura K: Perioperative assessment of psychological state and quality of life of head and neck cancer patients undergoing surgery. *Int J Oral Maxillofac Surg* 38: 151-159, 2009.
2. Kohno Y, Maruyama M, Matsuoka Y, Matsushita T, Koeda M, Matsushima E: Relationship of psychological characteristics and self-efficacy in gastrointestinal cancer survivors. *Psycho-oncology* 19: 71-76, 2009.
3. Cui J, Matsushima E, Aso K, Masuda A, Makita K: Psychological features and coping styles in patients with chronic pain. *Psychiat Clin Neurosci* 63: 147-152, 2009.
4. Fukumoto-Motoshita M, Matsuura M, Ohkubo T, Ohkubo H, Kanaka N, Matsushima E, Taira M, Kojima T, Matsuda T: Hyperfrontality in patients with schizophrenia during saccade and antisaccade tasks: A study with fMRI.

Psychiat Clin Neurosci 63: 209-217, 2009.

5. Kobayashi M, Ohno T, Noguchi W, Matsuda A, Matsushima E, Kato S, Tsujii H: Psychological distress and quality of life in cervical cancer survivors after radiotherapy. *Int J Gynecol Cancer* 19: 00-00, 2009.
6. Suzuki M, Takahashi S, Matsushima E, Tsunoda M, Kurachi M, Okada T, Hayashi T, Ishii Y, Morita K, Maeda H, Katayama S, Kawahara R, Otsuka T, Hirayasu Y, Sekine M, Okubo Y, Motoshita M, Ohta K, Uchiyama M, Kojima T. Exploratory eye movement dysfunction as a discriminator for schizophrenia. A large sample study using a newly developed digital computerized system. *Eur Arch Psychiatry Clin Neurosci* 259: 186-194, 2009.
7. Sasai T, Inoue Y, Komada Y, Sugiura T, Matsushima E. Comparison of clinical characteristics among narcolepsy with and without cataplexy and idiopathic hypersomnia without long sleep time, focusing on HLA-DRB1*1501/DQB1*0602 finding. *Sleep Medicine* 10:961-966, 2009.
8. Sasai T, Inoue Y, Komada Y, Nomura T, Matsuura M, Matsushima M. Effects of Insomnia and Sleep Medication on Health-Related Quality of Life. *Sleep Med*.2009 (in press)