

## RESEARCH INSTITUTIONS

# Psychiatry Chair Ousted Amidst Schism at UCSF

Last month Sam Barondes should have been riding high. The chairman of psychiatry at the University of California, San Francisco (UCSF) was about to head east to attend the annual Society for Neuroscience meeting, where he was to present the society's prestigious Young Investigator award to one of his hand-picked hires at UCSF, psychiatrist Rob Malenka. The award was but one sign of the renaissance of psychiatry at UCSF, which had been, in the judgment of many prominent psychiatrists around the country, a moribund department until Barondes took over in 1986. Barondes had outbid rival departments to hire a new group of top young clinician-researchers and was reshaping UCSF as a hotbed of cutting-edge research on the biological underpinnings of psychiatric disorders.

On the eve of his departure for the neuroscience meeting, however, Barondes was asked by UCSF chancellor Joe Martin to resign as chairman, following a routine performance review. Neither the university nor Barondes will discuss details of the review, but interviews with department members reveal widespread resentment among the more traditional faculty, who felt Barondes ignored their needs and openly disdained their science. To make way for basic neuroscience, Barondes had shifted resources and positions away from the social scientists, psychologists, and psychotherapists who make up the bulk of the department's 200 paid faculty. UCSF dean of medicine Haile Debas says the review concluded these people "were not dealt with in a supportive manner."

And if those frictions weren't bad enough, adding to the tension was a pair of lawsuits claiming that Barondes was unfair to women in both his hiring practices and handling of sexual harassment claims. In September, the Equal Employment Opportunity Commission (EEOC) ruled that the department had discriminated against women in hiring and promotion.

The troubles in San Francisco are part of a larger story that resonates through academia: the clashes that occur when an outsider is brought in to restructure an ailing department. That, at any rate, is how Barondes sees it. "There are different ideologies and they all want the lion's share of the resources because they believe they are the most important," he says. "I think that ultimately, more than the women's issue, my review was influenced by these issues."

Outside observers also see the turmoil at UCSF as symptomatic of a disciplinary

schism in psychiatry that goes beyond the university. "What we are seeing is a natural shift in psychiatry" toward the molecular biology of mental illness, says psychiatrist and neuroscientist Eric Kandel of Columbia University's College of Physicians and Surgeons. "Part of what [Barondes] ran into was...the department's reluctance to see the future in the way he saw it." Adds Lewis Judd, chairman of psychiatry at Barondes' old department at UC San Diego and former director of the National Institute of Mental Health: "UCSF was behind [the times].... Virtually every superior academic department in psychiatry has absolutely fundamentally made this change." But, he adds, "change like this creates anxiety; it creates bitter feelings."

But while psychiatrist-neuroscientists such as Judd and Kandel see those bitter feelings as an unavoidable by-product of necessary change, psychoanalyst Glen Gabbard, medical director of the prestigious C.F. Menninger Hospital in Topeka, Kansas, says Barondes represents a pendulum that has swung too far. "One of the problems with the trend [toward biological psychiatry] is that the subjective psychological realm of psychiatric disorders has been neglected, with an overemphasis on neuroscience, often construed in a narrow, reductionistic way," he says.

When Barondes arrived in San Francisco, bringing with him a national reputation as a neuroscience researcher from his previous position at UC San Diego, the department was already in turmoil over such issues, and at odds with the university administration. The previous chairman, psychoanalyst Robert Wallerstein, had been removed in 1983 after a performance review concluded he had moved the department too far in the direction of his own interests. "It was probably recognized in psychoanalytical circles as an outstanding department, but it was at the cost of all other significant aspects of psychiatry," says the dean of medicine at that time, Rudi Schmid. Most notably, says Schmid, the department sorely lacked expertise in the biological approach to psychiatric illnesses, and he felt that had to change.

Not all department members agreed, however. "There was a feeling that a man-

date from the university was being imposed against our will," says psychologist Christine McGill, who joined the department as an assistant clinical professor in 1984.

Against this backdrop, Barondes arrived and set to work. His appointments—all board-qualified psychiatrists, who also conduct research in such areas as human genetics, brain development, and mechanisms of learning—drew high praise from colleagues around the country. "Before this, San Francisco was not even on the map," says Judd, who turned down the UCSF chairmanship before it was offered to Barondes. "With the people Sam brought in, it was on the way to becoming a very good department."

To make way for his new neuroscience hires, Barondes shifted things around. He moved some clinical researchers from the Langley-Porter Psychiatric Institute on UCSF's main campus to other sites, such as the Veteran's Administration hospital. He closed or combined several in-patient services that were losing money. And he took positions away from the social and behavioral science divisions, which he says had grown too large under Wallerstein.



**The face of change.** Sam Barondes brought neuroscience and turmoil to the UC San Francisco psychiatry department.

Although there was some growth on the clinical side to balance these losses—the department created several new clinical centers, including a nationally recognized center for the study of post-traumatic stress disorder—the perception was that Barondes cared little for clinical or social science research. "He thinks molecular approaches are the only way to solve the important questions," says one faculty member who asked for anonymity, as did most of Barondes' opponents. And Barondes doesn't hide those views, telling *Science* in a recent interview: "The future of psychiatry lies in harnessing the enormous potential of molecular and cellular biology." Many in the department say it was his blunt sentiments, more than any specific actions, that made Barondes his most bitter enemies. "He made it very clear on many occasions that he felt that the rest of the work going on

in the department was of no value," says another critic.

Aggravating this rift were the legal problems. Adolescent psychiatrist Lynn Ponton sued the department after Barondes terminated her year-to-year position in 1990, following closure of the in-patient unit she had directed and selection of a male psychiatrist to head the child psychiatry in-patient service. Ponton won her case—on which the EEOC finding was partly based—in superior court and received a financial settlement. Two other women, clinical psychologists Christine McGill and Burnet Sumner, have lawsuits pending against the department over alleged sexual harassment by a co-worker. And more female faculty are said to be joining a class-action lawsuit against the department.

In his defense on the sex bias charges, Barondes points out that 45% of the positions he has filled, including three of 12 tenure-track slots, have gone to women. Ponton's case, he adds, "had nothing to do with sex." She was let go because her unit was closed, he says, and she was passed over for directorship of the child psychiatry service because the man who was hired, Graeme Hanson, had superior administrative skills. As for the harassment cases, he says he followed standard procedure, turning them over to the chancellor's office as soon as he found out about them.

Barondes' supporters in the department say the sex bias charges are being used by his opponents to get him out. "He is as close to gender-blind as any male I have seen," says Glen Elliott, who was appointed by Barondes as head of child psychiatry in 1989. Even some of Barondes' detractors agree that bias against women wasn't the problem here; the real bias, they say, was Barondes' opinion about research, which colored his handling of these situations. "With each of the women involved [all of whom were clinicians] he had so much contempt for their science that he couldn't get beyond that and recognize that there is still a need to support individuals," says one critic.

It isn't clear how much weight the legal troubles carried in Barondes' review, but the result was unambiguous: On 4 November Barondes received the request for his resignation, and he chose not to fight the decision. On 15 November it was announced at an emergency faculty meeting that Barondes would step down in January, and that the new chairman would be Craig Van Dyke, a biological psychiatrist who was previously director of UCSF's clinical programs at San Francisco's

### Reshaping UCSF Psychiatry Sam Barondes' Psychiatrist/Neuroscientist Hires

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| <b>Rob Malenka, MD Ph.D.</b>      | <b>Research:</b> synaptic changes associated with learning<br><b>Clinical:</b> pathophysiology of schizophrenia |
| <b>John Rubenstein MD Ph.D.</b>   | <b>Research:</b> genes that control forebrain development<br><b>Clinical:</b> autism                            |
| <b>Allison Doupe MD Ph.D.</b>     | <b>Research:</b> the neural basis of vocal learning<br><b>Clinical:</b> general adult psychiatry                |
| <b>Nelson Freimer, MD</b>         | <b>Research:</b> genetics of manic depression<br><b>Clinical:</b> mood disorders                                |
| <b>Paul Berger, MD</b>            | <b>Research:</b> pharmacology of cocaine addiction<br><b>Clinical:</b> drug abuse                               |
| <b>Mark von Zastrow, MD Ph.D.</b> | <b>Research:</b> G-protein coupled receptors<br><b>Clinical:</b> drug addiction and mood disorders              |
| <b>Larry Tecott, MD Ph.D.</b>     | <b>Research:</b> molecular biology of serotonin receptors<br><b>Clinical:</b> anxiety disorders and depression  |

Veteran's Administration hospital.

One reason Barondes decided not to fight the ouster was that he already had hatched other plans that will keep him in a prominent role at the medical school. With the administration's support, he and dean Debas created the Center for Biology and Psychiatry, which Barondes will head. The center will be part of the psychiatry department, and its mission, Barondes says, will be to bring modern biology to bear on the clinical problems of psychiatry by providing an intellectual focus for residents interested in biological psychiatry. He adds that the center will

include not only psychiatrists oriented toward neuroscience, but also other more clinically oriented biological psychiatrists.

If Barondes sees the center as a chance for a fresh start, so do some of his detractors. "At this point I'm willing to start over again with Sam," says one of his most vocal opponents. "I do think he missed the boat as chairman, but looking toward the future, I think he could do an excellent job as head of the center. It's being conceived as an inclusionary, not an exclusionary, thing."

The extent of reconciliation remains to be seen, however. The center has apparently only stoked the ire of some other Barondes opponents, who worry that it will pull resources from other ventures that might be undertaken by Van Dyke, the new chairman. At least one faculty member claims the dean violated appropriate procedure by not putting the formation of the center to a faculty vote. It appears that the gulf of technique and vocabulary that now keeps psychiatrists apart will test the new chairman's abilities not just as an administrator, but as a healer as well.

—Marcia Barinaga

### AIDS IN EUROPE

## German Blood Contamination Found Low

Germany may have dodged a viral bullet. Two German blood-collecting companies were recently charged with conducting inadequate HIV tests on donated plasma that was later sold to hospitals (*Science*, 19 November, p. 1205). The companies were closed down, but last month the public prosecutor's office in Koblenz revealed that only two out of some 5000 donors used by one of the companies, UB-Plasma of Koblenz, were HIV positive.

The finding is based on new HIV tests on samples from 25,018 donations collected by UB-Plasma over the past 2 years. It supports the view of leading German AIDS experts that the scandal—despite its disturbing implications and the panic that followed initial reports of the problem—has not led to many cases of HIV infection. The second company, Haemoplas of Osterode, near Göttingen, apparently did not keep a complete set of samples of the plasma it collected. But German experts see no reason why the company should have a markedly higher rate of HIV-positive donors.

At UB-Plasma, only one HIV-positive donor was identified in addition to the one whose blood—which led to three known

cases of infection—triggered the original investigation. The second donor was a Romanian who gave plasma that was imported by the company. But that plasma is not thought to have been used in transfusions or to make blood products, says Walter Hitzler of the University of Mainz, where the UB-Plasma samples were screened.

In addition to the two HIV-positive donors, there were nine whose samples gave "doubtful" test results: Antibody tests were mildly positive, but HIV infection could not be confirmed by a Western blot test to detect viral proteins. Some of these donors may have been in the early stages of seroconversion, and German health officials are currently trying to track them down. But Hitzler expects most, if not all, will turn out to be uninfected false positives. So does virologist Reinhard Kurth, president of the Paul Ehrlich Institute in Langen, near Frankfurt, who notes that the samples were not frozen, which means that bacteria could have proliferated in them, causing the formation of molecules that cross-react with the HIV test.

—Peter Aldhous