State of Connecticut
GENERAL ASSEMBLY

Co-Chairs
Senator Danté Bartolomeo
Representative Diana Urban

State Capitol, Room 011
Hartford, Connecticut 06106-1591
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COMMITTEE ON CHILDREN

Children's Mental Health Task Force

MINUTES
December 11, 2013

Co-Chairs: Sen. Dante Bartolomeo and Rep. Diana Urban

Attendance: Sen. Dante Bartolomeo, Rep. Diana Urban, Rep. Whit Betts, Dr. Irvin R. Jennings, Dr. Charles Newfield, Gracelyn Guyol, Dr. Myron Genel, Dr. Charles F. Caley, Tina Fox Dugdale, Chandra K. Cooper, Dr. Nicole A. Zuber

The meeting convened at 11:17 AM.

Rep. Urban called the meeting to order and welcomed everyone. She stated that the last two appointments to the task force have been made and asked the new members to introduce themselves.

Chandra K. Cooper stated that she is a Clinical Specialist in Psychiatry in the Department of Pharmacology at Yale New Haven Hospital.

Dr. Zuber is currently in Manhattan but also works in Waterbury in an alternative adolescent program. She is interested in integrating mental health treatment in schools.

Rep. Urban introduced Charles A. Fisher as the presenter invited by the Complementary & Alternative Treatments focus group to discuss Cranial Electrotherapy Stimulation (CES).

Charles "Chip" Fisher stated that CES is a non-pharmacological treatment. The device has been on the market since 1991 and is becoming better known recently. The product was cleared by the FDA in 1976. It has been used to treat depression, anxiety and insomnia, along with addiction problems. One study coming out in the spring is on bi-polar treatment. There are ADD/ADHD- related studies and this is a growing area for use. There have been many studies conducted on the treatment and he stated he would share them with anyone interested in more detailed information. The device is portable and works on alternating currency (3 frequencies) using two batteries. The biggest market use is for insomnia. It is beginning to be used in the treatment of Post-Traumatic Stress Disorder (PTSD). The device can be used at home. Ideally,

would be used 2 times per day (for 20 minutes) for 30-45 days. Treatment can be used with or without medication. It does not trigger euphoria and is non-addictive.

Members of the task force asked a number of questions and there was discussion on the information presented.

- Sen. Bartolomeo asked if the device is approved for children and if there was any home use monitoring
- Mr. Fisher stated that they don't have pediatric clearance but many physicians have used it with success. They do not market for pediatric use and the only thing they check for is that person purchasing is of adult age. Cannot monitor home use
- Rep. Urban asked if there were any side effects
- Mr. Fisher stated there were two minor ones – 1. If used near bedtime, it may trigger insomnia in 1 out of 250 patients; 2. 1 out of 500 patients reported a mild headache
- Dr. Genel asked if any of the studies used a mock device
- Mr. Fisher said they all have shame device except in drug addiction
- Dr. Jennings asked if there was a control study with children
- Mr. Fisher stated not by his company. No pediatric use at this point
- Gracelyn Guyol asked if the FDA could be asked to apply use of the device to children in Connecticut
- Mr. Fisher stated that if the state wanted to use it with children they could apply for that purpose
- Dr. Newfield asked if there was an underlying mechanism that improves so many different diagnoses
- Mr. Fisher stated they have found a frequency that helps in those diagnoses
- Rep. Betts inquired if the long-term goal in using this device is no longer needing medications
- Mr. Fisher stated this is a non-drug option that can be used alone or with medications
- Dr. Jennings asked if the trials were randomized
- Mr. Fisher said yes. However, addiction study was on a voluntary basis without placebo
- Dr. Genel noted that Mr. Fisher was before the FDA to reclassify device and the FDA declined to declassify
- Mr. Fisher stated this was in February 2012. The device was originally a Class 2, then made a Class 3 in 1977. They are trying to have the device reclassified to Class 1 (highest level of safety) or, at least, Class 2. Efforts to reclassify continue
- Sen. Bartolomeo asked if a person needs a prescription or a neurology consultation
- Mr. Fisher said a letter of referral is needed from a licensed health care practitioner in the state they are licensed to practice in - such as a doctor, nurse or physician assistant
- Tina Fox Dugdale asked if this is coded for insurance
- Mr. Fisher said that, if device is reclassified, they might try and get an insurance code

Rep. Urban thanked Mr. Fisher and asked for reports from other focus groups.

Dr. Caley gave an update for the Psychotropic Drugs group. He stated he is looking into what other states have done; what treatment guidelines are available and getting information from the Drug Utilization Review Board. The aim is to culminate into a comprehensive and useful report.

Dr. Newfield asked what the end product is for the task force.

Sen. Bartolomeo stated that this is an organic process. We need to see what we have once focus groups finish their work and that will inform us as to next steps and recommendations.

Dr. Newfield suggested the task force may want to set up some criteria as we move forward.

Tina Fox Dugdale stated that the Nutrition focus group is compiling information related to eating well and disorders

Dr. Genel stated the Genetics group has had electronic meetings. Also, he has met with several experts at Yale and will likely invite one of them present to the task force.

Gracelyn Guyol stated she has complied information on Complimentary & Alternative treatments for task force members.

Sen. Bartolomeo stated the next meeting would be on **Wednesday, January 15, 2014 at 11:00 AM in Room 2A**. Chairs would welcome a suggestion for a presenter at the next meeting.

The meeting adjourned at 12:32 PM.