

## Psychiatrist and Trauma Researcher Calls on NYC to Recover a Sense of Place

By JO KADLECEK

On a crisp November Saturday, Mindy Thompson Fullilove buttoned her coat and headed to Washington Square Park, a woman on a mission. As a professor of Clinical Psychiatry and Public Health, and co-director of the Mailman School of Public Health's Community Research Group, Fullilove was intent on helping New Yorkers begin the recovery process since the Sept. 11 attacks. She had helped organize the rally, and despite the cold weather, was ready to hear the children's choirs, poets, and speakers who had been invited to participate.

She was not disappointed. Almost 500 people from a variety of organizations and neighborhoods gathered at Washington Square Teen Plaza to collectively usher in the healing process. They listened intently to music and to speakers such as Allan Rosenfield, dean of the Mailman School of Public Health, Rev. Alfonso Wyatt of the Fund for the City of New York, Emira Habiby Browne, director of the Arab-American Family Support Center, and Fullilove herself.

The Rally for Recovery was the first event planned by NYC Recovers, a collaborative response to the Sept. 11 disaster spearheaded by Fullilove. NYC Recovers was formed to partner with health agencies, community organizations, corporations and small businesses, and individuals to "help New York City heal after the massive trauma our community

has suffered."

The alliance ([www.nyrecovers.org](http://www.nyrecovers.org)) has planned a year of activities that include workshops on stress prevention, seminars on current issues and conflicts, conferences to support the work of community leaders, and a Walk for Recovery. The goal? "To get each and every organization thinking about what their contribution can be to the recovery process," Fullilove said.

Fullilove identifies four parts to the process: remembering, or mourning the lost; respecting, or working for social justice; learning, or growing from the inevitable new situations, and connecting, or forming bonds across groups. Each element helps rebuild in people a sense of place, something that the disaster radically altered, Fullilove says, and something that is further complicated because jobs, relationships, and routines have had to be reconfigured since.

"Everyone has a relation with place—it's universal. But violent displacement is a shocking rupture to the person-place connection," she says. "The trauma of the Twin Towers is a spatial event that has such magnitude and disruption on the socio- and economic landscapes of the Metro region, that to repair it, everyone will have to be conscious of the healing."

A long-time believer in what she calls the "psychology of place," Fullilove has studied communities for almost 20 years and trauma's impact on them for the past seven. Particularly interested in the effects of place on residents of inner city communi-



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*Mindy Thompson Fullilove, professor of Clinical Psychiatry and Public Health, and co-director of the Mailman School of Public Health's Community Research Group*

ties, Fullilove and her husband Robert, an associate professor in the Mailman School of Public Health, were among the first public health researchers to link Post Traumatic Stress Disorder (PTSD) with urban life in general and crack users in particular. PTSD is usually diagnosed in war veterans but the Fulliloves identified its symptoms when they began studying the effects of decaying urban neighborhoods in the early 1990s.

"There was an escalation of diseases of all kinds including trauma as a result of the

collapse of inner city communities," Fullilove says. "There were epidemics of AIDS, crack, and violence in the early 1990s and in this context we tried to understand the larger structural problems that contributed to these issues. My part (in the research) came to be the psychology of place, asking how the collapsing neighborhood became associated with such ill health."

Fullilove—who is one of only a handful of African Americans in the country who holds full professorships in psychiatry—went a step further in her research when, in

1999, she decided to explore the role of place in her own life. She wrote "The House of Joshua: Meditations on Family and Place" (Univ. of Nebraska), a combination of a memoir and academic analysis of the spatial relation to personal development.

The book is based on her own life, growing up in New Jersey the daughter of a passionate African American labor activist and a generous white mother who tried to guide her through the maze of childhood. The essays in her book reveal the psychological importance of place in the life of an individual, but it is a personal study of how the actual places in Fullilove's life—schools, houses, streets, rooms—shaped her worldview and self-perception.

Fullilove's interest in the effects of place seem to have grown stronger since her book came out. Last year she received a Robert Wood Johnson Foundation Health Policy Investigator Award to look specifically at how urban renewal efforts funded by federal initiatives in the last fifty years disproportionately affected African Americans. In fact, she was just digging into the project when the World Trade Center was attacked. And certainly, Fullilove's experience studying the effects of trauma on communities prepared her for the moment. That's when NYC Recovers was born, and though she will spend the next year researching, she will also spend her time at rallies and workshops helping a traumatized city find its place again.

## Researchers Discover Certain Anti-AIDS Drugs Can Cause Cardiovascular Problems

By ROBIN EISNER

Researchers have uncovered important clues about how certain anti-AIDS drugs, called protease inhibitors, may lead to the severe cardiovascular problems suffered by many patients taking the medications.

The findings, to be published in the December issue of *Nature Medicine*, could help drug developers create a next-generation AIDS medication that would not have the same side effects.

For the past six years, people infected with HIV have been living longer as a result of taking a three-component cocktail of AIDS drugs that includes an HIV protease inhibitor. All the drugs act to keep the virus at low levels in the body and prevent the destruction of the immune system that is characteristic of AIDS.

But as people have been taking these drugs, particularly protease inhibitors, for longer periods of time, many have developed dangerous problems with fat metabo-

lism, including a disfiguring redistribution of fat in the body called lipodystrophy and high levels of cholesterol and fat (triglyceride) in the blood stream.

Although patients taking these anti-HIV drugs may not progress to AIDS, they could have an increased risk of mortality due to cardiovascular events.

In the study, a team of scientists at Columbia's College of Physicians & Surgeons in collaboration with an Australian researcher analyzed how protease inhibitors damage the ability of liver cells grown in culture to assemble lipoprotein particles.

Lipoprotein particles, also known as VLDLs, LDLs and HDLs, are large complexes of molecules that transport cholesterol, triglycerides and other fats through the blood. Liver cells also manufacture apolipoproteins, which sit on the surface of the lipoprotein to direct the particles where to deliver their cargo inside the body. Fat is used for energy in the body and cholesterol is a key component

of cell membranes, but too much fat and cholesterol in the blood can clog arteries.

The researchers found that protease inhibitors cause the accumulation inside the liver cell of a certain

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apolipoprotein, called apolipoprotein B, because the drugs act to block their breakdown. The drugs also simultaneously prevent apolipoprotein B from being secreted by the liver cell.

Apolipoprotein B is a critical component of the VLDL lipoprotein particle. VLDLs are a precursor to LDLs, the

so-called bad cholesterol, high levels of which increase the risk of heart disease. After the liver cell secretes VLDLs into the bloodstream and the body uses the fat inside, the particles become LDLs.

In normal liver cells, half of the apolipoprotein B molecules are degraded before the formation of VLDL. But the cells treated with protease inhibitors were laden with apolipoprotein B.

The researchers also found that the stockpiling of apolipoprotein B inside the cell caused by the protease inhibitors can be relieved by giving the cell a fatty acid, a component of fat. The fatty acid allows the liver cell to release supra-normal amounts of the apolipoprotein B-VLDL particles.

The findings, the scientists say, suggest that the accumulation of apolipoprotein B in liver cells in the presence of protease inhibitors represents a population of newborn lipoprotein particles ready for release into the blood stream.

Based on the data, the

investigators hypothesize that high levels of VLDLs and LDLs found in the blood stream of individuals taking protease inhibitors could be due to excess particles that get released after the consumption of fatty meals, which contain fatty acids.

Although the problem protease inhibitors inflict on apolipoprotein B levels may help explain some of the cardiovascular side effects of these medications, other drugs in the cocktail also affect the mitochondrion, the part of the cell machinery responsible for generating energy. Mitochondria use constituents of fat as fuel for energy.

The researchers say the liver cell assay systems used in their study might help drug developers design new protease inhibitors that would not lead to the accumulation of apolipoprotein B inside the cell.

The cell systems also can be used to distinguish the extent of the apolipoprotein effect with the protease inhibitors currently in use.