Commentary

Constance E. Lieber, Theodore R. Stanley, and the Enduring Impact of Philanthropy on Psychiatry Research

John H. Krystal, Anissa Abi-Dargham, Schahram Akbarian, Amy F.T. Arnsten, Deanna M. Barch, Carrie E. Bearden, David L. Braff, E. Sherwood Brown, Edward T. Bullmore, William A. Carlezon Jr., Cameron S. Carter, Edwin H. Cook Jr., Zafiris Jeff Daskalakis, Ralph J. DiLeone, Ronald S. Duman, Anthony A. Grace, Ahmad R. Hariri, Paul J. Harrison, Noboru Hiroi, Paul J. Kenny, Joel E. Kleinman, Andrew D. Krystal, David A. Lewis, Barbara K. Lipska, Stephen R. Marder, Graeme F. Mason, Daniel H. Mathalon, Colleen A. McClung, Christopher J. McDougle, Andrew M. McIntosh, Francis J. McMahon, Károly Mirnics, Lisa M. Monteggia, Rajesh Narendran, Eric J. Nestler, Alexander Neumeister, Michael C. O'Donovan, Dost Öngür, Carmine M. Pariante, Martin P. Paulus, Godfrey Pearlson, Mary L. Phillips, Daniel S. Pine, Diego A. Pizzagalli, Mikhail V. Pletnikov, J. Daniel Ragland, Judith L. Rapoport, Kerry J. Ressler, Scott J. Russo, Gerard Sanacora, Akira Sawa, Alan F. Schatzberg, Yavin Shaham, Simone G. Shamay-Tsoory, Pamela Sklar, Matthew W. State, Murray B. Stein, Stephen M. Strakowski, Stephan F. Taylor, Gustavo Turecki, Bruce I. Turetsky, Myrna M. Weissman, Venetia Zachariou, Carlos A. Zarate Jr., and Jon-Kar Zubieta

Neuropsychiatric disorders constitute the single greatest source of the global burden of disease, but it seems that philanthropy and advocacy aimed at supporting research to alleviate the burden of these disorders often are overshadowed by corresponding efforts in many other areas of medicine. For example, the United States public donates five times more money to cancer than to mental health research (1), and for the United Kingdom public, the equivalent figure is a staggering 900 times more (2). In this context, it is particularly sobering that we recently lost two towering mental health advocates and philanthropists, Constance E. Lieber and Theodore R. Stanley (Figures 1 and 2). These two individuals made an enormous and enduring impact through the initiatives that they created and sustained, through their personal contributions, and through their ability to mobilize others. For the editors, editorial board members, and editorial committee members of Biological Psychiatry who constitute the authors of this commentary, the losses are personal. Each of us has received research support made possible through the actions of these unique individuals. In acknowledging our gratitude, we hope that our collective efforts to advance the understanding of mental illness and its treatment are a lasting testament to their impact.

Constance Lieber died on January 15, 2016. With her husband Stephen, Constance led the National Alliance for Research on Schizophrenia and Depression (NARSAD), now known as the Brain and Behavior Research Foundation (BBRF), from 1989 through 2007. Through the Liebers' generosity and their vigorous advocacy, NARSAD/BBRF has had an enormous impact. Since 1987, BBRF has awarded more than \$346 million in the form of more than 5000 grants to more than 4000 scientists from more than 500 universities based in 34

countries. Critically, 80% of these grants have been small grants to young investigators that have given them resources that often played critical roles in launching careers like ours. The NARSAD Young Investigator Award is a distinction that recognizes scientific promise, and it remains a model funding mechanism for advancing scientific careers. After establishing and leading BBRF, Constance and Stephen created other initiatives, such as the Lieber Center for Schizophrenia Research and the Lieber Clinic for Comprehensive Care at Columbia University and New York State Psychiatric Institute.

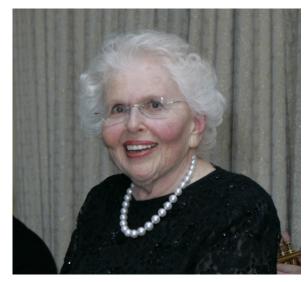


Figure 1. Constance Lieber.



Figure 2. Ted and Vada Stanley.

and more recently, the Lieber Institute for Brain Development on the medical campus of Johns Hopkins University. Constance was very much at the center of psychiatry research advocacy. For us, she was "Connie," our friend and supporter. She knew us, appreciated the challenges of research, was excited by our findings, and worked to advance our field. The impact of her philanthropy lives on, but her absence is sorely felt.

Theodore R. Stanley, known as "Ted," died on January 3, 2016. A cofounder of the Danbury Mint, which became MBI, Inc., Ted Stanley amassed a fortune valued at more than \$1 billion. After their son was diagnosed with bipolar disorder, Ted and Vada Stanley created the Stanley Medical Research Institute (SMRI) in 1989 to develop new treatments for bipolar disorder and related conditions. Since its inception, SMRI has provided more than \$550 million in research support across 30 countries. Its mission includes funding clinical trials; the Stanley Brain Collection; the Stanley Neurovirology Laboratory at Johns Hopkins University; the Stanley Program for Epidemiology, Prevention, and Treatment of Schizophrenia; and the Treatment Advocacy Center. In 2007, the Stanleys gave \$100 million over 10 years to create the Stanley Center for Psychiatric Research at the Broad Institute, a joint venture of the Massachusetts Institute of Technology and Harvard University. They donated \$50 million in 2011, and in 2014, they committed an additional \$650 million, a record in psychiatric philanthropy (see https://www.youtube.com/ watch?v=IH6cEk74De8). In the New York Times obituary for Mr. Stanley, his son Jonathan is quoted as saying, "A good chunk of this huge amount of money that's going to Broad would've ended up in my bank account All I can say is my family got it right."

The legacies of Connie Lieber and Ted Stanley are models for what can be accomplished through philanthropy. As a result of their efforts, NARSAD/BBRF and SMRI have often funded investigators who were too young or projects from established investigators that were too preliminary to draw support from traditional funding sources. The Stanley Brain Collection is a major resource for the analysis of human postmortem tissue. Both the Lieber Institute for Brain

Development and the Stanley Center at the Broad are largescale investments in investigating the causes and mechanisms of mental illness at a scale that could not be achieved through other funding mechanisms.

The need for philanthropy in translational neuroscience and experimental therapeutics is greater than ever before, commensurate with the enormous potential for impact arising from technologic advances in genetics and neuroscience research. The gap between what we know and what we need to know to develop effective preventions and cures for mental illness may be greater than for other areas of medicine, because the brain is the most complicated and least well-understood organ in the body. The BBRF and SMRI are joined by other initiatives attempting to raise research funds, such as the Simons Foundation, the Avielle Foundation, the American Foundation for Suicide Prevention, the William K. Warren Foundation, and the International Mental Health Research Organization/One Mind Institute. We hope that the examples of Connie Lieber and Ted Stanley will serve to invigorate the philanthropic organizations that they founded and stimulate new charitable efforts in translational neuroscience and experimental therapeutics around the world.

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Except for the first author position identifying the corresponding author, all authors are named in alphabetical order.

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Article Information

From the Department of Psychiatry and Neuroscience (JHK, AFTA, RSD), Yale University School of Medicine, New Haven, Connecticut; Behavioral Health Services (JHK), Yale New Haven Hospital, New Haven, Connecticut; Clinical Neuroscience Division (JHK), VA Connecticut Healthcare System, West Haven. Connecticut: Departments of Psychiatry and Radiology. Columbia University, New York, New York; The New York State Psychiatric Institute (AB-D), New York, New York: Department of Psychiatry (SA), Icahn School of Medicine at Mount Sinai, New York, New York; Child Study Center (AFTA), Yale University School of Medicine, New Haven, Connecticut; Departments of Psychology and Radiology (DMB), Washington University in St. Louis, St. Louis, Missouri; Departments of Psychiatry and Psychology and the Brain Research Institute (CEB), Semel Institute for Neuroscience and Human Behavior, University of California at Los Angeles, Los Angeles, California; Department of Psychiatry (DLB), University of California San Diego, San Diego, California; Department of Psychiatry (ESB), The University of Texas Southwestern Medical Center, Dallas, Texas; Department of Psychiatry and Behavioral and Neuroscience Institute (ETB), University of Cambridge, Cambridge, United Kingdom; ImmunoPsychiatry (ETB), GlaxoSmithKline, Cambridge, United Kingdom; Department of Psychiatry and Neuroscience (WAC), Harvard Medical School, McLean Hospital, Belmont, Massachusetts; Department of Psychiatry and Behavioral Sciences (CSC), Imaging Research Center, and Center for Neuroscience, University of California at Davis, Davis, California; Institute of Juvenile Research, Department of Psychiatry (EHC), University of Illinois at Chicago, Chicago, Illinois: Temerty Centre for Therapeutic Brain Intervention (ZJD), Mood and Anxiety Division Centre for Addiction and

Mental Health, Toronto, Ontario, Canada; Department of Psychiatry (ZJD), University of Toronto, Toronto, Ontario, Canada; Department of Psychiatry (RJD), Yale University, New Haven, Connecticut; Departments of Neuroscience, Psychiatry, and Psychology (AAG), University of Pittsburgh, Pittsburgh, Pennsylvania; Department of Psychology & Neuroscience (ARH), Duke University, Durham, North Carolina; Department of Psychiatry (PJH), University of Oxford, Oxford, United Kingdom; Departments of Psychiatry and Behavioral Sciences, Neuroscience, and Genetics (NH), Albert Einstein College of Medicine, Bronx, New York; Department of Pharmacology & Systems Therapeutics (PJK), Icahn School of Medicine at Mount Sinai, New York, New York; Genetic Neuropathology Section (JEK), Lieber Institute for Brain Development, and Department of Psychiatry and Behavioral Sciences. Johns Hopkins University School of Medicine. Baltimore, Maryland; Department of Psychiatry and Behavioral Sciences (ADK), Duke University School of Medicine, Durham, North Carolina; Department of Psychiatry (DAL), University of Pittsburgh, Pittsburgh, Pennsylvania; Human Brain Collection Core (BKL), Division of Intramural Research Programs, National Institute of Mental Health, National Institutes of Health, Bethesda, Maryland; Semel Institute for Neuroscience (SRM), University of California at Los Angeles, Los Angeles, California; VA Desert Pacific Mental Illness Research, Education, and Clinical Center (SRM), Los Angeles, California; Departments of Radiology & Biomedical Imaging and Psychiatry (GFM), Yale University, School of Medicine, New Haven, Connecticut; Department of Psychiatry (DHM, MWS), University of California at San Francisco, San Francisco, California; Psychiatry Service (DHM), San Francisco VA Medical Center, San Francisco, California; Department of Psychiatry (CAM), University of Pittsburgh School of Medicine, Pittsburgh, Pennsylvania; Massachusetts General Hospital and MassGeneral Hospital for Children (CJM), Lurie Center for Autism, Lexington, Massachusetts; Department of Psychiatry (CJM, DAP), Harvard Medical School, Boston, Massachusetts; Division of Psychiatry (AMM), University of Edinburgh, Edinburgh, United Kingdom; Human Genetics Branch and Genetic Basis of Mood and Anxiety Disorders Section (FJM), National Institute of Mental Health, Intramural Research Program, Bethesda, Maryland; Department of Psychiatry (KM), Vanderbilt University, Nashville, Tennessee; Department of Neuroscience (LMM), University of Texas Southwestern Medical Center, Dallas, Texas; Departments of Radiology and Psychiatry (RN), University of Pittsburgh School of Medicine, Pittsburgh, Pennsylvania; Department of Neuroscience and Friedman Brain Institute (EJN, SJR), Icahn School of Medicine at Mount Sinai, New York, New York; Mitsubishi Tanabe Pharma Development America, Inc., (AN) Jersey City, New Jersey; MRC Centre for Neuropsychiatric Genetics and Genomics (MCO), Cardiff University, Cardiff. United Kingdom; Department of Psychiatry (DO, KJR), McLean Hospital, Harvard Medical School, Belmont, Massachusetts; Departments of Psychology and Neuroscience (CMP), Institute of Psychiatry, King's College London, London, United Kingdom; Psychiatry and Immunology Lab & Perinatal Psychiatry (CMP), The Maurice Wohl Clinical Neuroscience Institute, London, United Kingdom; Laureate Institute for Brain Research (MPP), Tulsa, Oklahoma; Departments of Psychiatry and Neurobiology (GP),

Yale University and Olin Neuropsychiatric Research Center, Hartford, Connecticut; Department of Psychiatry (MLP), Western Psychiatric Institute and Clinic, University of Pittsburgh School of Medicine, Pittsburgh, Pennsylvania; National Institute of Mental Health (DSP), Intramural Research Program, Bethesda, Maryland; McLean Imaging Center (DAP), McLean Hospital, Belmont, Massachusetts; Departments of Neuroscience and Molecular and Comparative Pathobiology (MVP), Johns Hopkins University School of Medicine, Baltimore, Maryland; Department of Psychiatry and Behavioral Sciences (JDR), Imaging Research Center, University of California at Davis, Sacramento, California; Child Psychiatry Branch (JLR), Division of Intramural Research, National Institute of Mental Health, Bethesda, Maryland; Department of Psychiatry (GS), Yale University, New Haven, Connecticut; Department of Psychiatry (AS), Johns Hopkins University School of Medicine, Baltimore, Maryland; Department of Psychiatry and Behavioral Sciences (AFS), Stanford University School of Medicine, Stanford, California; Behavioral Neuroscience Branch (YS), National Institute on Drug Abuse - Intramural Research Program, Baltimore, Maryland; Department of Psychology (SGS-T), University of Haifa, Mount Carmel, Haifa, Israel; Division of Psychiatric Genomics (PS), Department of Psychiatry, Icahn School of Medicine at Mount Sinai, New York, New York: Departments of Psychiatry and Family Medicine & Public Health (MBS), School of Medicine, University of California at San Diego, La Jolla. California; Department of Psychiatry (SMS), Dell Medical School, University of Texas at Austin, Austin, Texas; Department of Psychiatry (SFT), University of Michigan, Ann Arbor, Michigan; Department of Psychiatry (GT), McGill University, Montreal, Canada; Department of Psychiatry (BIT), Perelman School of Medicine, University of Pennsylvania, Philadelphia, Pennsylvania; New York State Psychiatric Institute & Department of Psychiatry (MMW), College of Physicians and Surgeons of Columbia University, New York, New York; Fishberg Department of Neuroscience (VZ), Mount Sinai School of Medicine, New York, New York; Experimental Therapeutics and Pathophysiology Branch (CAZ), National Institute of Mental Health, National Institutes of Health, Bethesda, Maryland; Department of Psychiatry (J-KZ), University Neuropsychiatric Institute, University of Utah Health Sciences Center, Salt Lake City, Utah.

Address correspondence to John H. Krystal, M.D., Department of Psychiatry, Yale University School of Medicine, 300 George Street, Suite 901, New Haven, CT 06511; E-mail: john.krystal@yale.edu.

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