AURÉLIE BOCHET INTERVIEW



Synapsy's clinician-scientist grant helped Aurélie, a young doctor, land MD-PhD funding. Synapsy took the opportunity to ask her about her motivations and how she sees child psychiatry research.

Where does your interest in medicine come from?

Pediatrics, psychology and psychiatry all interested me back when I was in secondary school, which is why I suggested that the topic for my maturité fédérale certificate should be Rett syndrome. My thesis consisted of investigating the syndrome's genetic aspects. That brought me into contact with Hilary Wood, a psychologist and director of the Autism Early Intervention Center in Geneva, as well as Stephan Eliez. Meeting these two people influenced my decision to join the Faculty of Medicine at the University of Geneva.

What motivated you to go into child psychiatry research?

When I started my studies in medicine, I wanted to do neurology but then the idea of child psychiatry gradually began to take hold. I think I needed something other than the uniquely somatic approach you find in neurology. Without really understanding why, I felt more drawn to human relationships, and hence psychiatry. The psychiatrists and everyone involved in care inspired me. During my internship in child psychiatry, I spent some time in Marie Schaer's laboratory, and I think that's where my desire to do research became more concrete: the environment was more dynamic than in the clinic world and I fitted in well there.

You received a Synapsy clinician-scientist grant in 2016. Tell us what that was like.

I applied during my final year of medicine so that I could get some research experience before applying for the MD-PhD grant from the Swiss National Science Foundation (SNF). The selection process for the Synapsy grant wasn't really an easy thing for me. I hadn't been around a long time, so didn't have much experience and my

case wasn't strong. So, when I found myself in front of these well-known researchers defending my project at the Villars retreat, it was a bit anxiety-provoking. Afterwards I was able to start in Marie Schaer's laboratory on a half-time basis with the clinic at the Autism Consultation Center.

Since autumn 2018 and the MD-PhD grant from SNSF, you've continued to divide your time between clinical work and research. Is that important for you?

The SNF grant actually means I can spend 85% of my time on my research project and 15% on clinical work. It's essential to keep the clinical part, especially for following up patients with whom I began consultations before starting my MD-PhD. Although Marie Schaer's laboratory is very clinically oriented, it's important for me to keep the relational aspect with patients. Clinical work means you can have an entirely different relationship with families, and it calls for versatility. The research involves more specific tasks, such as taking or analyzing data.

What is the topic of your research project?

The original cohort at Marie Schaer's laboratory covers children aged two to four with autism spectrum disorder (ASD). As the children are getting older, the goal now is to expand the cohort to school-age children over four years of age. The idea is to open up the existing cohort to attention deficit hyperactivity disorders (ADHD) because there is a great deal of co-morbidity between ASD and ADHD. The aim is to track the occurrence of attention deficits in children with a neuro-developmental disorder, and –if possible— define specific neurobiological markers or even early predictors of attention deficits in these children.

What are your career plans?

After getting my MD-PhD, I will probably start my clinical training to obtain an FMH in child psychiatry. I will then need one year of adult clinic, one year in somatic medicine and 4 years in pedopsychiatry. This will be an asset if the research options close or if I would no longer be interested in it. All this will depend, of course, in the course of the next three years.

What do you think of Synapsy's approach, which is designed to link medicine and basic science?

It's highly relevant, especially in the context of psychiatry and neuroscience. Neurobiology, psychiatry and genetics are branches that have to be unified. The Freudian concepts found in psychoanalysis are very far-off when tackling neuro-developmental disorders in children. I think it would be a good idea if there was a specialization in child neuropsychiatry in Switzerland or that child psychiatry looked at more developmental aspects.