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Grant Citation

Investigators using ICTS cores and services to support their research should acknowledge the CTSA Grant **UL1 RR024992**

ICTS scholars and trainees should acknowledge the CTSA linked grant **KL2 RR024994** or **TL1 RR024995**

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New ICTS Center for Administrative Data Research

By Pamela Owens, PhD, Co-Director

ICTS investigators interested in using existing administrative data for clinical epidemiologic, health services, and comparative effectiveness research have a new resource: the Center for Administrative Data Research (CADR). This core was funded effective June 1, 2009 under the BJHF/ICTS Clinical and Translational Research Funding Program.

Led by researchers with a background in medicine, epidemiology and health policy, the CADR assists ICTS members with:

- Selecting appropriate administrative databases
- Obtaining data
- Storing data securely
- Using data
- Providing tools, programs, and resources
- Collaborating with others

Administrative Data

Administrative data is readily available and previously collected. Administrative databases contain clinical and nonclinical information typically found in discharge abstracts, on claim forms, or on standardized surveys. Information includes patient demographics, expected payer or insurance coverage, all-listed diagnoses and procedures, length of stay, admission month and source, and discharge status. Some databases also include information about charges and costs, detailed information about specific diseases, laboratory and other clinical detail, and prescription medication. Data are collected by hospitals, by insurance providers, and by households, containing either information about all patients in one setting of care or specific patients across the continuum of care.

Administrative data is highlighted as one of the growth areas in comparative effectiveness research with the recent Institute of Medicine National Priorities for Comparative Effectiveness Research report emphasizing the importance of more efficiently using existing data. Moreover, administrative data can be used to:

- Study prognosis, risk and harms, and etiology of diseases
- Analyze trends over time and capture long-term outcomes
- Examine geographic variation in health service utilization
- Analyze racial and ethnic disparities in access to and outcomes of health care
- Study low prevalence conditions
- Assess the clinical effectiveness in populations and subpopulations
- Generate hypotheses for experimental research

Examples of Databases Available Through the Center for Administrative Data

<ul style="list-style-type: none"> • Centers for Medicare & Medicaid Services (CMS) Chronic Condition Data Warehouse 	<ul style="list-style-type: none"> • 1999-2006 • 3.4 million Medicare beneficiaries
<ul style="list-style-type: none"> • CMS Inpatient Data 	<ul style="list-style-type: none"> • 2003 • 38.2 million Medicare patients



(See CADR: page 2)

CADR, from Page 1

Examples of Databases Available Through the Center for Administrative Data (Cont'd)

<ul style="list-style-type: none"> • CMS Medicaid Analytic Extract files - MO, IL, CA, GA, FL, TX 	<ul style="list-style-type: none"> • 1999-2005 • 2.2 - 3.0 million Medicaid enrollees
<ul style="list-style-type: none"> • National Cancer Institute Surveillance Epidemiology and End Results (SEER) - Medicare Breast Cancer 	<ul style="list-style-type: none"> • 1995-2002 (SEER)/1993-2003 (Medicare) • 76,199 breast cancer Medicare patients
<ul style="list-style-type: none"> • Healthcare Cost and Utilization Project (HCUP) state databases (inpatient, emergency department, ambulatory surgery) 	<ul style="list-style-type: none"> • 2000-2008 (varies by state) • 16 states • 129,000 - 8.8 million records per database
<ul style="list-style-type: none"> • HCUP nationwide databases (inpatient, children's inpatient, emergency department) 	<ul style="list-style-type: none"> • 1998-2007 • 1.9 to 26.0 million records (unweighted) • 6.3 to 120 million records (weighted)
<ul style="list-style-type: none"> • American Hospital Association (AHA) Annual Survey 	<ul style="list-style-type: none"> • 2000, 2004 and 2008 • 6,800 hospitals
<ul style="list-style-type: none"> • Area Resource File 	<ul style="list-style-type: none"> • 1980-2008 • Over 3,000 counties

CADR Website

Detailed information about services offered and available databases will be available through the Center's website at <http://cadr.wustl.edu> (which will be live by the end of June 2010). In the interim, visit the CADR page of the ICTS website at <http://icts.wustl.edu/cores/cadr.aspx>.

For More Information

Victoria J. Fraser, MD, FACP, serves as the CADR Director. Co-Directors include: Margaret A. Olsen, PhD, MPH, and Pamela Owens, PhD. For more information, contact Pam Owens, Margie Olsen, or Cherie Hill at CADR@wustl.edu.

Just-In-Time ICTS Core Funding

ICTS Just-In-Time (JIT) awards provide quick access to funding to use any of the ICTS cores for research advancing medical knowledge that can improve human health. The JIT program supports a broad range of clinical and translational studies including:

- Pilot data needed to complete an initial but unfunded project
- Pilot data needed for the preliminary results of a proposal for extramural funding
- New direction on a current project not otherwise supported
- Funded projects that did not build costs into the budget for services previously free or subsidized that now carry a fee

Awards are up to \$5,000 (over 1 year) for use of ICTS core services. For the Human Imaging Unit, the maximum request is \$10,000 due to matching funds from the WU Mallinckrodt Institute of Radiology (MIR).

JIT applications are due by the 10th of each month and funding decisions are made by the 10th of the following month. For application information visit <http://icts.wustl.edu/funding/>.

In the News

- "Cancer remodeling in a basal-like breast cancer metastasis and xenograft," was published in the April 15, 2010 issue of *Nature*. The research team included Matthew J. Ellis, MB, BChir, PhD, the Anheuser-Busch Endowed Professor in Medical Oncology and director of a new ICTS Core, Human and Mouse Linked Evaluation of Tumors (HAMLET), which was utilized for the study. For more information about the research, see the Washington University website news story at <http://news.wustl.edu/news/Pages/20568.aspx>.
- The current 2010 national CTSA newsletter can be found at <http://www.ncrr.nih.gov/ctsa/newsletter/currentissue/>. Also learn more about upcoming events, workshops, and intra-CTSA university initiatives at the CTSA website at <http://www.ctsaweb.org/>.

COMMUNITY ENGAGEMENT AND THE ICTS

WU-PAARC Surveys Local Community Pediatricians about Adolescents with Depression

Reprinted from the WU PAARC Update, May 2010

As in other parts of the United States, local pediatricians have identified significant problems with referral to mental health professionals for adolescents with depression. To describe how these patients are cared for in the community, the Washington University Pediatric & Adolescent Ambulatory Research Consortium (WU PAARC) conducted a mailed survey of local community pediatricians (104/234, 44% response rate).

- 95% of respondents would like to improve their care for adolescents with depression.
- Respondents suggested additional training and an up-to-date list of local health providers with timely referrals would be useful resources to aid in their management of adolescent depression.
- At least 1/3 of respondents were not confident in interpreting depression screening tools, assessing suicide risk, initiating treatment with selective serotonin reuptake inhibitors (SSRIs), providing supportive counseling, and monitoring treatment response.
- On average, physicians prescribed SSRIs to 37% of their depressed adolescent patients.

Through an initiative at St. Louis Children's Hospital (SLCH), a team of mental health professionals and primary care pediatricians is developing a system of care delivery for adolescents with depression that is feasible to use in the primary care setting. Team members include Drs. Jane Garbutt, Sarah Tycast, Susan Sylvia, Jeffrey Rothweiler, Randy Sterkel, and Jerry O'Neil. This system of care will first be piloted at the Adolescent Center at SLCH, and then in a few primary care offices to learn how to adapt the model for different settings. WU PAARC hopes to offer this project to all pediatric primary care offices throughout the St. Louis area.

WU PAARC, one of three ICTS programs involved in community engagement, seeks to expand and support practice-based research networks (PBNRs) of community practitioners. Currently 61 pediatricians and 5 pediatric nurse practitioners from 31 practices are members. Jane Garbutt, MBChB, FRCP, is the Director of the ICTS Community Health Care Practitioners program and the Medical Director of WU PAARC. Shannon Gentry, MS, LPC, is WU PAARC's Network Coordinator. WU PAARC is supported by the ICTS and the St. Louis Children's Hospital Foundation.

To learn more about WU PAARC or to request consultations services as an ICTS member, visit the [website](http://www.wustl.edu/cores/chcp.aspx) at <http://icts.wustl.edu/cores/chcp.aspx> or contact Dr. Garbutt at jgarbutt@dom.wustl.edu.

CCBR Enhances Research Participation through NIH GO Grant and HealthStreet

The NIH National Heart, Lung, and Blood Institute has awarded a "Grand Opportunities" (GO) Grant to Linda B. Cottler, PhD, ICTS Director of The Center for Community-Based Research (CCBR), for a "Websystem to Increase Research Participation of Underrepresented Populations Project." This system will refine the recruitment workflow by automating processes and make it complementary to both local and national registry-based efforts.

The CCBR works to enhance research participation through HealthStreet (opened January 2009), which serves St. Louis residents through its outreach effort and storefront location. As of May 2010, HealthStreet completed health assessments on 2404 people from 96 zip codes. Of those, 1,558 were linked to studies, 378 of which were subsequently enrolled. HealthStreet offers free services like HIV testing, health-related classes, and medical/social service referrals, which do not require study participation. To date 1,775 people have received such HealthStreet services. For more information about HealthStreet, visit its [website](http://www.healthstreet.org) or contact Dan Martin at 314-531-3034 or martind@wustl.edu.

Dr. Wilkins Presents Poster at "Partnering to Improve Health: The Science of Community Engagement" Conference

Consuelo H. Wilkins, MD, the new ICTS Director of Community Organizations and Co-Director of *Our Community, Our Health* (OCOH), attended the May national community engagement conference hosted by the NCRR/NIH and the Duke University CTSA. The conference focused on the scientific rigor of community engagement by discussing methods, models, and outcomes that demonstrate measurable health improvements.

Dr. Wilkins presented the poster, "Sharing Research Results with the Community to Increase Community Engagement and Eliminate Health Disparities," based on the results of a study by Victoria Anwuri, MPH; Brenda Battle, RN, MBA; Mikki Brewster, MSW; Emma Ilori, MPH; Rosetta Keeton, MHA; Katherine Mathews, MD, MPH, MBA; Consuelo H. Wilkins, MD; and Aimee S. James, PhD, MPH.

To learn more about ICTS Community Organizations or OCOH activities visit the ICTS website at <http://icts.wustl.edu/cores/ocoh.aspx> or email ocoh@wustl.edu.

BJHF/ICTS Funding Program Announces 2010 Awardees

The Barnes-Jewish Hospital Foundation (BJHF) and the ICTS partnered in 2008 to offer a joint Clinical and Translational Research Funding Program. During the second year of this joint program, a total of 82 applications were received by the deadline of November 16, 2009, including 63 Research grants and 19 Planning grants. Each application was assigned to three reviewers and the ICTS Research Design and Biostatistics Group (RDBG) provided feedback on the statistical design of each. In late January, 74 faculty from WU and ICTS partner institutions participated in one of the three review panels modeled after the NIH study section process using the 9-point evaluation scale.

The average panel score was calculated and 27 applications had priority scores better than 4 (7 Planning grant applications and 20 Research grant applications). The ICTS Executive Committee and Dr. John Lynch (representing the BJHF) approved funding for 24 applications (7 Planning grants and 17 Research grants) with an award date of June 1, 2010. The list of awardees and titles of their proposals can be found through the "Funding Opportunities" section of the website at <http://www.icts.edu/funding/currentaward-ess.aspx>.

All applicants received a Summary Statement that included the written critiques by all three reviewers as well as suggestions from the ICTS Research Design and Biostatistics Group. This written feedback from experienced researchers will hopefully assist investigators as they navigate the application process to pursue other funding for their research.

We anticipate running this program annually, with the next round of letters of intent due late summer 2010. Questions may be directed to icts@dom.wustl.edu.

2nd Annual National Clinical Research Predoctoral Meeting Held at Washington University in St. Louis

The ICTS Clinical Research Training Center TL1 Predoctoral Program again hosted the National Predoctoral Clinical Training Meeting on May 3-4, 2010. Jay F. Piccirillo, MD, the TL1 Program Director, along with Chancellor Mark S. Wrighton, PhD, Dean Larry J. Shapiro, MD, and ICTS Director Kenneth S. Polonsky, MD, welcomed 31 institutions to Washington University in St. Louis. Attendees included 101 trainees, 19 program administrators, and 32 program directors. Barbara M. Alving, MD, Director of the NIH National Center for Research Resources (NCRR), was the keynote speaker and presented "From Training to Translation: Ushering in a New Era for Biomedical Research." Program directors and administrators met prior to the meeting to discuss novel approaches and program collaboration within their home institutions. Dr. Alving later joined the group for dinner and a panel discussion on the metrics of success for predoctoral programs.

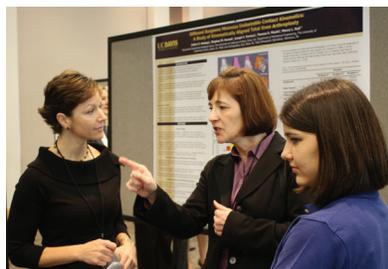
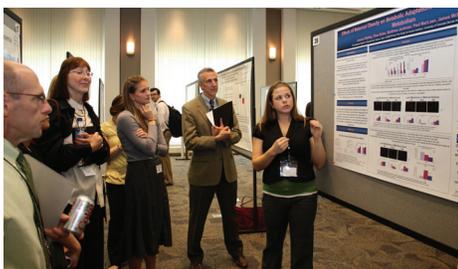


Two venues provided trainees the opportunity to present their research -- 34 participated in oral presentations and 56 presented posters. An e-book of 98 research abstracts was published for attendees. Dinner was again held at the City Museum in downtown St. Louis. For more information, please visit the meeting website at <http://nationalpredocmtg.org>.



Barbara M. Alving, MD, NCRR Director, talks with CRTC program directors, Victoria J. Fraser, MD, FACP and Jay F. Piccirillo, MD, at the pre-meeting dinner.

The meeting was sponsored by the Washington University School of Medicine, the NIH/NCRR, the ICTS, and the Barnes Jewish Hospital Foundation.



First Clinical Research Management Certificates Awarded

The WU Clinical Research Management Undergraduate Certificate Program celebrated its first graduates on May 19, 2010. Eight students--Tina Day, Tina Hicks, Amanda Haas, Tammy Koch, Katie Krueger, Mike Lewis, Donna Marin, and Cindy Terrill--successfully tackled the 21 unit program, completing their capstone this semester.

For the capstone, students either spent time in a clinical research environment or completed a project to be used in research. The students were creative, and one of the projects will be implemented by St. Louis Children's Hospital. That project by Tina Hicks was a pamphlet entitled, "Research Studies at St. Louis Children's Hospital: A Parent's Guide to Medical Research," and its full implementation will include a website.

For more information on the Clinical Research Management Program (BS, MS, Undergraduate/Graduate Certificate), contact Shawn Cummings, Academic Advisor and Pre-Health Coordinator at 314-935-6783 or cummings@wustl.edu.

Andria Ford, KL2 Scholar, Awarded Top 20% Abstract Recognition at 2010 National ACRT/SCTS Meeting

ICTS Clinical Research Training Center (CRTC) scholars, program directors and staff attended the 2010 Clinical and Translational Research and Education ACRT/SCTS Joint Annual Meeting on April 5 - 7, 2010, in Washington, DC. The meeting is sponsored by the Association for Clinical Research Training and the Society for Clinical and Translational Science. Over 800 scholars, faculty, and staff across CTSA, K30, RCMI and IDEA institutions attended.

A highlight of the meeting is the Plenary Scholar Poster Session where scholars present the methodology, findings, and conclusions of their research. 242 scholars presented posters and KL2 Career Development Award Scholar, Andria Ford, MD, Instructor, Neurology, received a Top 20% Scholar Abstract Award for her poster, "MR-Oxygen Metabolic Index Predicts Infarction Better than ADC in Acute Ischemic Stroke." Abstracts are reviewed and scored by faculty with those scoring in the top 20% being recognized. Dr. Ford's mentors are Jin-Moo Lee, MD, PhD, Associate Professor, Director of the Cerebrovascular Disease Section, Program Director of the Neurovascular Residency, Department of Neurology, and Colin Derdeyn, MD, Professor of Radiology, Neurology and Neurological Surgery.

Scholars also had opportunities to meet with NIH Program Officers, participate in mock study sections, tour the NIH Clinical Research Center, and attend sessions on transitioning from K to R grants, translational research across CTSA institutions, and enhancing transdisciplinary research through teamwork and collaboration.

ICTS CRTC Director and KL2 Program Director Victoria J. Fraser, MD, FACP, and KL2 Program Coordinator Alison Ebers served on the meeting's Executive Committee and were responsible for planning and implementing the scholars' programming.

Have You Met?

Rachel Driskell

Rachel Driskell, MA, is the Curriculum Coordinator for the ICTS Clinical Research Training Center (CRTC). Rachel joined WU and the CRTC last September and has become an integral team member working with trainees, scholars, mentors, and program directors to coordinate and implement the curriculum for clinical research education programs. CRTC programs include:



- KL2 Career Development Awards Program for fellows, post-doctoral scholars, and junior faculty committed to multidisciplinary clinical research;
- Postdoctoral Program for junior clinical investigators;
- TL1 Pre-Doctoral Program for medical and allied healthcare students;
- Doris Duke Fellowship Program for medical students.

The CRTC offers a Master of Science or a Certificate degree in Clinical Investigation. WU faculty, clinical research staff, or scholars in mentored training programs may request to take courses. Rachel works with the CRTC Curriculum Director, Bradley A. Evanoff, MD, MPH, and the CRTC Curriculum Committee to ensure that courses needed to complete the degrees are offered in a timely sequence and that the curriculum meets core competencies as defined by both Washington University and the NIH. Rachel acts as a liaison to other degree programs at the School of Medicine such as the Genetic Epidemiology Master of Sciences (GEMS) and the Master of Population Health Sciences (MPH/S) and identifies when courses, such as statistics or ethics, might be scheduled to meet the needs of multiple programs.

Rachel's role keeps evolving and this spring she has been coordinating the curriculum for a new program, the Advanced Summer Program for Investigation and Research Education (ASPIRE), that introduces high-school and college students to clinical research. ASPIRE is funded by an ARRA supplement and is directed by Jay F. Piccirillo, MD, and Victoria J. Fraser, MD, FACP. On June 7th the cohort of 19 students will begin their intensive summer training on the Washington University Medical School campus.

Rachel is the contact for CRTC students during registration and updates them on their progress toward degree requirements. She also assists students and faculty mentors during the thesis approval process. Rachel has concentrated the past few months on implementing changes and streamlining the registration process.

Rachel's interests have drawn her to a career working with people. She earned a bachelor's degree in psychology and a master's degree in educational counseling from Saint Louis University. She enjoys traveling and recent trips have kept her in touch with college friends, whether to celebrate a wedding or to visit and explore Costa Rica.

If you are interested in CRTC courses or learning more about the Master of Science or Certificate in Clinical Investigation, contact Rachel at 314-362-8719 or rdriskel@wustl.edu.

Events & Announcements

HRPO & ICTS Ethics Series

June 8 (8:30-9:30 a.m.)

“Therapeutic Misconception in Clinical Research”

Rebecca S. Dresser, JD, Daniel Noyes Kirby Professor of Law, Professor of Ethics in Medicine, Co-Director, ICTS Center for Clinical Research Ethics

Moore Auditorium, 1st Floor McDonnell Science Building, Washington University Medical School Campus. Seating is limited, register at <http://hrpo.wustl.edu> under Education, select Ethics Series. For information, contact Sarah Fowler-Dixon, PhD, at fowlerds@msnotes.wustl.edu.

ICTS Brown Bag Seminars

June 24 (Noon–1:00 p.m.)

“Lies, White Lies, and Statistics”

Jay F. Piccirillo, MD, Professor, Otolaryngology -- Head and Neck Surgery; Co-Director, Clinical Research Training Center (CRTC); and Director, TLI Predoctoral Training Program.

July 21 (Noon–1:00 p.m.)

“Sponsored Research Fundamentals”

Cindy Kiel, JD, Assistant Vice Chancellor of Research and Executive Director, Office of Sponsored Research, and **John Michnowicz**, Director, Office of Sponsored Research, School of Medicine.

ICTS Brown Bag Seminars are held in Holden Auditorium, Farrell Learning and Teaching Center, Washington University Medical School Campus. Registration is preferred due to limited seating. WU staff register via HRMS Self Service, Training & Development. Non-WU attendees email ICTS@wustl.edu or call 314-362-9829.

ICTS Research Navigator Corner

DID YOU KNOW that the ICTS has a core that supports investigators in all aspects related to biospecimen collection, processing, and storage? The Translational Pathology and Molecular Phenotyping (TPMP) core, directed by Mark Watson, MD, PhD, can assist with study design as well as the necessary language in the informed consent form related to biospecimen collection and utilization for genomic and molecular correlative studies.

The TPMP core provides support for the procurement, processing, storage and inventory management of study participant blood and tissue specimens. If you have your own biospecimen collection, the TPMP core can also provide consultation on standard operating procedures and data management to assure consistency with evolving best practices in biospecimen banking, and to help facilitate new collaborations between investigators who are searching for and who can provide needed biospecimens throughout the Medical Center.

For more TPMP information contact Dr. Watson at watsonm@wustl.edu or visit the TPMP website at <http://icts.wustl.edu/cores/tpmp.aspx>.

Contact Sally Anderson, the ICTS Research Navigator, for TPMP information or for assistance in navigating through the research process.

Sally Anderson, RN, BSN, CCRC
ICTSNavigator@wustl.edu
 (314) 747-8155

**Connecting You to the People,
 Services and Training You Need to
 Advance Your Research**

Are You Involved in Community-Based Participatory Research or Outreach?

Make sure your programs are counted! The WU Community Counts service inventory is an ongoing effort to capture the breadth of civic engagement and community service initiatives that are undertaken in the name of Washington University in St. Louis. Administered as an electronic survey each spring, Community Counts identifies the incidence, nature, and scope of service and outreach sponsored by schools, departments, programs, and groups. The survey also seeks to include initiatives involving community-based participatory research or community outreach, including clinical programs. Add your initiative to the University inventory by visiting www.gephardtstitute.wustl.edu/cc.

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