Welcome to the Fall quarterly research update from the Department of Family and Community Medicine. In this issue we highlight our Research Division faculty member and biostatistician Anthony Leonard, PhD and his work with diverse projects across departments. If an entry touches on a common interest, please reach out to discuss potential collaborations.

-Chris White, MD, JD, MHA
Director of DFCM Research Division

Dr. Chris White Leads Naloxone Training Session for Residents

Chris White, MD, along with Soni Regan, PhD, and Daniel Hargraves, MSW, led a naloxone didactic and skills session for family medicine interns as part of the HRSA Primary Care Training Enhancement Medication Assisted Treatment Expansion Project (MAT-EP). The HRSA grant is led by PI Jeffery Schlaudecker, MD, MEd and also includes Research Division team member Keesha Goodow, BAE as program manager. The MAT-EP project aims to increase knowledge and efficacy in treating patients with opioid addiction for both resident learners, Family Medicine faculty, and community preceptors. As Cincinnati resides near the epicenter of the current national opioid epidemic, the training was particularly timely, considering that such trainings have yet to be established as part of core residency curricula nationwide.

The training occurred Oct. 12 in the Residency Office at The Christ Hospital. Dr. White led the didactic session, providing an overview of the national and local challenges in the opioid crisis, policy and regulations currently driving treatment, and the pros and cons of four modes of administration for overdose treatment.

Patricia Wigle, PharmD of the UC College of Pharmacy led the skills portion of the training with a pharmacy trainee. This included a hands on demonstration and application of three of the four more popular modes of naloxone administration: syringe and ampule, nasal atomizer, and auto injector. Each resident was offered their own devices to assemble, with stepped instruction, and apply saline doses.

A pre and post evaluation of the session indicated substantial change in knowledge, attitude, and efficacy in naloxone administration. While 29 percent of the residents reported some discomfort in prescribing naloxone to patients and their families before the session, 100 percent at least agreed that they felt comfortable prescribing after completing the session. Additionally, at least 57 percent felt some discomfort administering three different formulations of naloxone prior to the session, however, 100 percent felt comfortable administering the same three formulations after participating in the skills portion.
On Sept. 12, 2017, Family and Community Medicine faculty participated in a panel discussion with UC’s first year medical students. The panel, which included Betsy Malloy, professor from the UC College of Law, Dr. Kate York from the UC College of Nursing, and Barbara Tobias, MD and Charles Doarn, MBA from the College of Medicine, Department of Family and Community Medicine, was moderated by Keith Stringer, MD of the College of Medicine, Department of Pathology. The students and panel watched a short film, “Sick Around the World – Can the US Learn Anything from the rest of the World about How to Run an Health Care System?”. The PBS film can be found at http://www.pbs.org/video/frontline-sick-around-the-world/. The panel and students had a lively and engaging discussion on many issues related to health care systems in the UK, Japan, Germany, Taiwan, and Switzerland.

UC DFCM to Collaborate with Case Western Reserve University on Ohio-Funded Cardiovascular Disease Project

Research Division team members Chris White, MD, Soni Regan, PhD, and Daniel Hargraves, MSW will be among those on the DFCM team collaborating with CWRU on a project to distill and aggregate best practices for care in cardiovascular disease (CVD) sponsored by the Ohio Department of Medicaid. Case Western is serving as the lead institution and is also partnering with Wright State University, Ohio State University, and Ohio University to assist in preparing Medicaid providers to address the social determinants of health and improve health outcomes for our most vulnerable populations, specifically those diagnosed with hypertension and other CVDs.

The project hopes to create a repository through web presence to share best practice resources. Project deliverables include implementing education for standardizing CVD care in primary care practices with interprofessional care providers. Teleconferencing will also play a role in disseminating modules, using existing resources such as Project ECHO and WebEx. The first year of the project runs through June 2018.

Wellness in the Workplace
By Mary Beth Vonder Meulen, RN

Take a break to stand stretch and breathe every 30 minutes. Free reminder apps are available for all types of devices: phones, tablets, and PCs. Download an app to remind you to take a break. Your body and brain will work all the better after a 5 minute break.

Smile even if you don’t feel like smiling. Studies have found that even forced grins will cheer you up. Remember that smiles and frowns are contagious. Other people will mirror your stressed-out expressions, as well as your smiles, and project them right back at you. You help yourself when you smile at others.

Three good deeds – Making the effort to do three acts of kindness every day has shown to drop depressive symptoms. So, stop looking at your phone and look up, smile, and say hello. Hold the door, hug a friend, or tell your co-workers you appreciate them. You’ll be the one who benefits.
Posters and Presentations

Edelhäuser F, Tauschel D, Haramati A, Cotton S. Curricular Interventions That Impact on Medical Student Empathy, Well-Being and Distress: Lessons Learned at Three Medical Schools. A panel discussion at the International Conference to Promote Resilience, Empathy and Well-Being in Health Care Professions Centile Conference; October 22-25, 2017; Washington DC.

Malosh L, Pallerla H, Moss E, Johnson D, Cotton S. Auricular Acupuncture Groups for Medical Student Wellness: A Pilot Program. A poster presentation at the International Conference to Promote Resilience, Empathy and Well-Being in Health Care Professions Centile Conference; October 22-25, 2017; Washington DC.

Malosh L, Moss E, Cotton S. The Development of a Medical Student Wellness Resource Room. A poster presentation at the International Conference to Promote Resilience, Empathy and Well-Being in Health Care Professions Centile Conference; October 22-25, 2017; Washington DC.

McDonald S, Haramati A, Peters M, Adcock K, Cotton S. Lessons Learned from Expanding a Mind-Body Program Across a University. A poster presentation at the International Conference to Promote Resilience, Empathy and Well-Being in Health Care Professions Centile Conference; October 22-25, 2017; Washington DC.


Hargraves D, Goodnow K, White C. The Evolving Role of Patients’ Voices in Residency Communication Curriculums. An oral presentation at the 38th Forum for Behavioral Sciences in Family Medicine; September 13-16, 2017; Chicago, IL.

Warnick S, White C, Brazill K. There’s an App for That: Behavioral Health Apps to Improve Patient Care and Education. An oral presentation at the 38th Forum for Behavioral Sciences in Family Medicine; September 13-16, 2017; Chicago, IL.
For 10 years, Anthony Leonard, PhD was a research assistant in the UC Department of Psychiatry (Traumatic Stress Study Center), being what he describes as an “all-purpose guy” with a focus on datasets and stats. Eventually the money for traumatic stress projects became scarce. Here, Dr. Leonard narrates, in his own words, his journey to his current position as a Biostatistician and Associate Professor in the DFCM Research Division:

**How did you arrive at the DFCM Research Division?**

I made $26,000 per year as a research assistant (RA), had a bachelor’s degree, the business world seemed to smell me from a mile away, I had a wife who never made much money and a freshly minted second kid; desperate measures were called for. Other RA stats jobs required a masters degree. I could do math, so I made a plan to borrow money, take masters-level biostats classes for a year, and write a masters thesis once I returned to work. Once in school, one thing led to another and I ended up with a PhD. That led to a job and faculty position here at UC. When the department I was in, Public Health Sciences, dissolved, I moved to our department. I think of none of this as a career path.

**Tell us about your current research projects.**

I work a lot with nephrology, lots of work with US Renal Data Systems data (info on all dialysis in the US). Topics are often about the sequelae of acute renal injury. Numerous recent studies have been about patient demographics and comorbidities prior to starting dialysis, and how those are related to the choice of dialysis modalities, and then how all that is related to mortality once dialysis is started. [Led by PIs Charuhas Thakar and Silvi Shah]

Another research area is the effects of bariatric surgery on post-surgery cancer rates and whether reductions in cancer rates are due to weight loss following surgery, or due to hormonal effects of the surgery that are independent of weight loss. [Led by PI Dan Schauer]

Finally, I’ve been often funded by work on tools for helping patients and physicians make treatment decisions regarding atrial fibrillation. [Led by PI Mark Eckman]

There are many other smaller projects, but most of my time and funding are tied to the three above.

**How did you choose these research areas?**

Mostly my research areas chose me. All of my main PIs are people I got with largely by happenstance, and they were smart and good researchers who got money to fund me, so I made sure to stick close to them.

Mostly I’m an all-purpose stats guy. A project I’m looking forward to is shown in this link: https://slotmods.com/

**Department of Family and Community Medicine Continues Scholarship Development Fund**

To encourage and support scholarship for faculty, the Scholarship Development Fund offers a competitive funding program for planning, performing, and presenting research projects and investigating clinical questions. Projects will also engage learners in the research process. Individual project funds of up to $10,000 will be available for faculty to spend over a two-year period. The applications are peer reviewed from a pool of faculty in the DFCM. In 2016, four projects were funded with each continuing and producing encouraging results.

The department encourages all faculty to pursue this opportunity. All interested applicants should contact Mary Beth Vonder Meulen, RN for an application and more Scholarship Development Fund information:

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Dedicated full-time staff members with over 50 years of cumulative experience provide full project support from assisting in design and implementation to analysis and evaluation. The division offers expertise in:

- Project Management
- Data Management
- Grant Writing
- IRB Protocols
- Statistical Analysis
- Data Collection Methods
- Project Reports
- Manuscript Development, Writing and Editing
- Research Nurse
- Qualitative Research

For more updates on our projects and other events in the UC Department of Family & Community Medicine, please like our Facebook page today!

https://www.facebook.com/ucfamilymed/