

THE CENTER...

The Minneapolis Center for Chronic Disease Outcomes Research (CCDOR) was established in April 1998. Its mission is to enhance, through research, education and dissemination activities, the delivery and accessibility of high-quality, cost-effective health care that will result in optimal clinical, psychosocial, and functional outcomes for veterans with chronic disease. The Center has grown into a vibrant, productive organization supporting 64 funded projects in FY2007 with an annual budget of over \$7.5 million. The Center's leadership includes Dr. Hanna E. Bloomfield (PI), Dr. Melissa Partin (Co-PI), and a distinguished steering committee, chaired by Dr. Jas Ahluwalia.



* Contributed by Maureen Carlyle.

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FEATURED RESEARCH

UNDERSTANDING AND MEETING THE NEEDS OF INFORMAL CAREGIVERS TO IMPROVE OUTCOMES FOR TRAUMATIC BRAIN INJURY PATIENTS WITH POLYTRAUMA

Background. Polytrauma (PT) involves injuries to multiple body systems or organs. Service members from Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) are sustaining polytraumatic injuries that often have traumatic brain injuries (TBI) coupled with other injuries (e.g. amputation, burns, vision loss) (TBI/PT). Many of these injuries are so severe that TBI/PT patients will require some degree of caregiving and support to perform daily activities, integrate back into the community, and coordinate their ongoing health services and benefits. Because the polytrauma field is relatively new, little is known about how caregiving by families affects the TBI/PT patients and their health. To date there is no evidence showing how caregiving affects TBI/PT patient, caregiver or family outcomes. Overall, little is known about who is providing care to TBI/PT patients, how much and what kind of care is required, or how the challenges of caregiving affect caregiver health and patient rehabilitation in the short and long term.

Overview. With this study, **Joan Griffin, PhD**, will assess the relationship between caregiving and patient, caregiver and family health outcomes. Her team will quantitatively describe TBI/PT patients and their caregivers and assess the physical, emo-

tional and financial burden of caregiving and the resources available to caregivers. They will test how strain from the burden of caregiving is associated with caregiver, family, and patient outcomes. The team will assess what available resources reduce caregiver strain to improve outcomes. This will be accomplished by surveying caregivers. Additionally, they will then enrich the quantitative findings with qualitative information on the context of caregiving, uncover content areas not specified a priori in the survey, and inform the selection of appropriate interventions for caregivers, patients and their families. This will be accomplished by interviewing caregivers.

This is a mixed-method, cross-sectional, observational study. All OIF/OEF TBI/PT patients discharged for at least 3 months from 1 of the 4 VA Polytrauma Rehabilitation Centers (PRC), estimated to be 1,000 by Spring 2008, will be asked to identify a primary family caregiver, who will be mailed a survey. Qualitative interviews will be conducted with a stratified purposeful sample of caregivers.

Significance. Prior literature shows that caregivers can affect health outcomes for stroke and dementia patients. It is likely that caregiving also affects TBI/PT patient outcomes. Understanding these relationships is critical to improve OIF/OEF TBI/PT health. This study will provide critical information on how the VA can best support the caregivers who provide care to this highly visible and vulnerable population.

This 3-year project will start up this Spring.

JUST FUNDED!

Dr. Nina Sayer's proposal "Soldier to Civilian: RCT of an Internet-Based Intervention for New Veterans" was just approved for funding in a joint effort by the Department of Defense and VA. This innovative and exciting proposal plans to assess the efficacy and applicability of a low-cost, resource-efficient, and readily disseminated intervention in easing OIF/OEF troops' reintegration into civilian life. To put this complex project in simple terms: it will determine whether Internet-Based Expressive Writing can promote psychological adaptation and improved functioning among veterans returning from hazardous deployments.

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calendar

- VA HSR&D Service Annual Meeting
February 13-15, 2008
Baltimore, MD
- 12th Annual MN Health Services Research Conference
March 6, 2008
Continuing Education and Conference Center,
University of Minnesota
Minneapolis, MN
- CCDOR Steering Committee Meeting
April 24, 2008
Minneapolis, MN
- CCDOR Research Seminar
Monthly presentations by local and national researchers
Every 3rd Thursday of the Month
Minneapolis VAMC
3:30 PM



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CCDOR Connections is a semi-annual publication of the Center for Chronic Disease Outcomes Research. Please direct comments or suggestions to the Editor: Krysten Halek • Tel 612.467.3827 • Fax 612.727.5699 www.hsrd.minneapolis.med.va.gov

FEATURED RESEARCH (CONTINUED)

PROACTIVE TOBACCO TREATMENT FOR DIVERSE VETERAN SMOKERS

Background. Current tobacco use treatment approaches are reactive and require smokers to initiate treatment or depend on the provider to initiate smoking cessation care. As a result, most veteran smokers do not receive comprehensive, evidence-based treatment for tobacco use that includes intensive behavioral counseling along with pharmacotherapy. Offering easy access to care, proactive outreach and choice of telephone or face-to-face smoking cessation services has great potential to increase the utilization of evidence-based treatments, but has not been rigorously tested.

Overview. Steven Fu, MD, plans to conduct an effectiveness trial to test whether population-based, proactive outreach and treatment strategies increase the population impact of tobacco cessation treatment. Population impact is the product of the rate of utilization of treatment and the effectiveness of treatment. Population impact accounts for exposure to treatment and is important to assess because effective treatment, if rarely utilized, has negligible population impact. The primary objectives of this study are to (1) Assess the effect of a proactive care intervention (PRO) on population-level smoking abstinence rates (i.e., abstinence among all smokers including those who use and do not utilize treatment) and on utilization of tobacco treatment compared

to usual care (UC) among a diverse population of veteran smokers, (2) Compare the effect of PRO on population-level smoking abstinence rates and utilization of tobacco treatments between African American and White smokers, and (3) Determine the cost-effectiveness of the PRO intervention.

This prospective randomized controlled study will identify a population-based sample of current smokers from the computerized patient record system (CPRS) tobacco use clinical reminder system. A total of 4,400 smokers from four VA medical centers will be randomly assigned to PRO or UC. The proactive care intervention combines: (1) proactive outreach (a mailed invitation letter followed by an outreach call that will encourage smokers to seek treatment with choice of services) and (2) offer of choice of smoking cessation services (telephone or face-to-face).

Significance. This study will test proactive outreach strategies offering choice of smoking cessation services, an innovation that if proven effective and cost-effective, will transform the way tobacco treatment is delivered and improve smoking abstinence rates in the veteran population. This research will harness the power of the VA's electronic medical record to link smokers to state-of-the-science treatment and serve as a model for national tobacco control efforts. National dissemination of proactive treatment approaches could dramatically reduce tobacco-related morbidity, mortality, and health care costs in the VA and for the nation.

This 3-year study will begin this Spring.

SEXUAL ASSAULT PREVALENCE AMONG MALE, PTSD-DISABLED GULF WAR VETERANS

Background. The prevalence of sexual assault among female veterans has been relatively well described. However, there are limited data published describing the burden of sexual assault on male veterans. With the study "Sexual Assault Prevalence Among Male, PTSD-Disabled Gulf War Veterans" co-PIs Maureen Murdoch, MD, and Melissa Polusny, PhD, hope to identify the proportion of sexually assaulted men who have been screened for sexual trauma, have been offered or received treatment, or who perceive the need for treatment related to their assault.

Overview. Centered on a mailed survey, this project aims to replicate findings of an earlier, smaller study which found that 13 percent of male Gulf War veterans applying for PTSD (posttraumatic stress disorder) disability benefits had been sexually assaulted while in service. Eligible participants are male Gulf War era veterans who have applied for PTSD-related disability benefits.

Among others, one stated hypothesis is that individual characteristics and military contextual factors will influence the odds of in-service sexual assault as well as the odds of being screened and/or treated for in-service sexual assault. Therefore, the 2,078 enrollees will receive a survey which includes items designed to capture individual characteristics, combat experience characteristics, deployment housing experiences, childhood sexual assault experiences, treatment characteristics (such as distance to nearest VA medical center, resources available at that VA, and treatment and screening experiences), and beliefs in myths related to sexual assault.

Significance. Investigators intend to disseminate their findings to both enhance clinicians' awareness of the high prevalence of in-service sexual assault in this particular group and to encourage clinicians to integrate treatment for these trauma histories into treatment plans wherever possible. It is also intended that a screening / intervention program be developed and targeted toward veterans at the time they apply for PTSD disability services.

This 3-year project began September 1, 2006. *

CONGRATULATIONS

As a participant in the VA Pain Research Summit, Dr. Diana Burgess helped to develop a cross-disciplinary research agenda targeting pain rehabilitation research, with a focus on recently deployed OIF/OEF veterans. Outcomes of this summit included a report to the Office of Research (ORD) to inform its pain-relevant research agenda and a report to the office of Patient Care Services to inform practice and policy related to pain care.

Dr. Steven Fu participated in the Smoking & Tobacco Use Cessation Technical Advisory Group Meeting in Washington, DC, June 4-5, 2007. This meeting was convened by the Public Health Strategic Health Care Group to define a strategic plan to address tobacco cessation in the VA and to provide input on the National VA Tobacco Performance Measures for FY 2008.

Dr. Hildi Hagedorn co-hosted a national conference call for opioid agonist therapy (OAT) clinic staff to discuss and promote best practices in OAT and promote use of the OAT Monitoring System, the toolkit that was developed as part of the OAT Effectiveness Initiative project.

Dr. Maureen Murdoch was invited to provide testimony to the Joint Congressional Subcommittees on Health and Disability Assistance and Memorial Affairs regarding her findings in VA

HSR&D funded research of race and gender disparities in PTSD disability awards.

Dr. Adam Powell worked closely with the VISN chief medical officers, the Office of Quality and Performance, and Systems Redesign (formerly ACA) to develop and execute a national timeliness of colonoscopy survey. 132 facilities reported data on the timeliness of colonoscopy and provided data on the efforts they have taken to improve access. Results were disseminated throughout the VA and are being used to stimulate and guide future quality improvement work.

Dr. Nina Sayer participated in the national Traumatic Brain Injury (TBI) Clinical Reminder Work Group that developed the clinical reminder for screening of OIF/OEF veterans for TBI. This reminder was implemented nationally in April 2007.

Dr. Timothy Wilt's systematic reviews of alpha antagonists for treatment of BPH demonstrated that use of generic alpha antagonists would provide similar outcomes at markedly reduced costs. These findings led to a VISN 23 Pharmacy formulary change for alpha antagonists resulting in annual cost-savings of approximately \$250,000.

WHAT IF?

Name: Andrea Cutting, MA

1. May all our databases grow up to be healthy, well-adjusted, productive members of society.

2. Is the term "chicken bus" still reflective of transportation realities in Central America? Our team has been sent to supervise the counting of live chickens on a sample of retired US school buses throughout Honduras. A corollary project involves calculating the daily number of eggs laid during transit.

3. The producers of the popular reality show "Ghost Whisperer" have hired data managers to track a flood of requests by the dearly departed for help crossing over. They will create a severity scale to rank each lost soul's unfinished earthly business and search for surviving family and friends. The addition of data managers to the Ghost Whisperer team is expected to increase program efficiency from only one assisted spirit per episode to upwards of twenty.

4. McDonalds Corporation has hired us to calculate with more precision the actual number served so that their message boards can be updated hourly. We will do this by accessing international databases that track weight and serum cholesterol levels.



Alisha, Tammy & Andrea

Name: Tammy Schult, MPH

1. That every file arrived at my desk already cleaned and ready to import into SAS. Is that too much to ask?

2. At this point, I would take any very warm destination that preferably has a beach – oh, let's just say Hawaii. A little sand in the keyboard can't cause too much damage, can it?

3. "Project Runway" – Tim Gunn and Heidi Klum want me to develop a system to keep track of the number of yards and types of fabric wasted and the number of unused spools and colors of thread each season in order to prepare for an upcoming "green" season in which the designers have to make everything out of the scraps from previous seasons.

4. "Caps" – they want me to observe customers and determine whether or not it would be cost-effective to add more pulled pork to the Stacker sandwich. I'm thinking *definitely*.

INTRODUCTIONS

CARMEN HALL, PHD, RN

Just over a year ago, Carmen Hall, RN, PhD joined the Polytrauma/Brain-Related Injury (PT/BRI) QUERI as its Implementation Research Coordinator. Dr. Hall comes to this important role with a background in nursing and a PhD in Evaluation Research Methods from the University of Minnesota's School of Nursing. Prior to joining CCDOR and the PT/BRI QUERI, Dr. Hall worked in different healthcare settings, all with a similar mission as the QUERI: to bring evidence into practice. One such role included Director of an in-house applied research group for Allina. It's not surprising that when asked of a memorable project during that time, she recounts a rapid response directive where her group had 12 weeks to provide Medica with information about why well child visits were under-utilized. During this condensed timeframe, Dr. Hall's team conducted focus groups with over 100 parents and youth patients and completed 1,100 telephone interviews, collecting qualitative and quantitative data. At the end of 12 weeks they were able to provide Medica with valuable, practical information.



So Dr. Hall is no stranger to rapid response pressure. Thankfully, her current project allows for more than 12 weeks! Under the lead of Dr. Hall, a team is working to develop a Family-Centered Care Map to support the informational and emotional needs of families caring for a member with polytrauma/brain injuries. Using a learning collaborative approach, a team including psychologists, nurses, and rehabilitation specialists from VA's four nationwide Polytrauma Rehabilitation Center (PRCs), are leading the way to understand and provide resources for caregivers to be able to prepare, cope and adapt to caring for a PT/BRI patient. The concept of the Family Care Map as a web-based tool was first introduced in the area of neonatal care. Last May, Dr. Hall's team met with the Canadian team that was responsible for evaluating the pioneering Neonatal Family-Centered Care Map. Borrowing from some of the experiences of the neonatal model, Dr. Hall's team has been working to apply the model to what is known about PT/BRI patient treatment and care. To date, they have developed a web-based PT/BRI Family Care-Centered Map that they plan to implement in the PRCs this April for a 6-month evalu-

ation period. In essence, this web-based resource will provide caregivers with the "playbook" to better understand, plan and prepare for the changing spectrum of their loved one's needs.

Like many Minnesotans, Carmen has lived in different parts of the country, but has returned to Minnesota. She and her husband live in the Twin Cities area with their Portuguese Water Dog, Otter. When not working to bring evidence into practice, she enjoys cross-country skiing, sailing and water training with Otter. Otter is also a trained therapy dog and they plan to work with children with reading difficulties. Need to practice your next presentation on a non-judgmental, furry audience? I bet your pet would gladly listen.



AREEF ISHANI, MD

A CCDOR affiliate investigator since 2004, Areef Ishani, MD, came to Minnesota from Canada to complete his residency in Internal Medicine, and he stayed. I set off to meet with Dr. Ishani on a Tuesday in January and found myself on a tour of the back halls of the Minneapolis VA. Let me assure you - his visitors are unlikely to wander by without a purpose, and a map.

I asked him to tell me about a few of his current projects and Dr. Ishani laughed. He quoted Dr. Frank Lederle who says he's like "a kid in a candy store" awed by the possibilities and convinced he should try one of everything. His current research agenda includes a VA-funded project describing the long term consequences of acute kidney injury, a VISN-funded randomized controlled trial looking to determine the impact of nurse case management of diabetes outcomes over usual care and he just submitted an NIH grant that would seek to determine if outcomes or costs are influenced by how frequently patients are seen on hemodialysis. When asked to describe his dream project, Dr. Ishani hesitated a nanosecond before describing a randomized trial with an endpoint of slowed progression of kidney disease.

He's a physician, a researcher, a husband and a dad. Together with wife of 10 years Shelina, Areef has three children. Khalid is 7 and an avid Xbox 360 player and introvert who loves to read and is just taking up tennis. Ziyen is 3 and favors the Wii, soccer, tennis and anything else physical. Newcomer

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MEET THE NEW VA HSR&D FELLOWS

Since 2002, CCDOR has successfully recruited a new post-doc into the **VA HSR&D Post-Doctoral Fellowship Program** each year. In September 2007, **Shannon Kehle, PhD**, joined this distinguished group. Dr. Kehle earned her doctorate in Clinical Psychology from Rutgers. She came to the Minneapolis VA Medical Center in August 2006 where she completed her 1 year pre-doctoral clinical internship. After completing her PhD, it was a natural progression and perfect fit for Dr. Kehle to join CCDOR. Clinically, she is interested in cognitive behavioral treatment for anxiety disorders, specifically Posttraumatic Stress Disorder (PTSD). These interests extend into her research focus: empirically supported treatments in "real world" settings and the dissemination of these treatments to clinicians.

Dr. Kehle is working on Dr. Melissa Polusny's "Readiness and Resilience in National Guard Soldiers" (RINGS) project. This study has unprecedented access to a deployed group of OIF/OEF National Guard soldiers. Dr. Kehle will look at alcohol use in National Guard soldiers and how it relates to PTSD. In addition,

as part of the RINGS project, she plans to look at health care utilization in the National Guard and is writing a paper on the construct of "hardiness" (a personality trait) and it's role in preventing negative outcomes after experiencing trauma. Dr. Kehle plans to apply for a VA Career Development Award later this year.



Beyond work... Shannon just returned from a warm vacation in Mexico, where she was fortunate to escape the below zero temperatures at home. While in graduate school at Rutgers, she appreciated getting to know the East Coast and enjoys traveling back often to visit friends,

regularly spending time in beautiful Cape Cod. But we are happy that after each vacation, she returns to Minneapolis, the VA Medical Center, and yes, CCDOR.

If a tour of the midwest was what **Heather McDougall, MD** intended, she certainly succeeded. Raised in Sioux Falls, SD, Dr. McDougall did her undergrad at the University of Iowa, attended medical school at Indiana University and completed her residency in Internal Medicine at the University of Minnesota with a rotation here at the Minneapolis VA. She's now finishing up a Masters of Science in Clinical Research at the University of Minnesota. Dr. McDougall is CCDOR's first fellow in the **VA HSR&D Physician Post-Resident Program**.



When I contacted Dr. McDougall about this interview, she warned me that she'd need to make something up in order to have anything remotely interesting to share. She mentioned snake collecting as an option. But then we started chatting and all sorts of interesting things came out. I learned a great deal about the difference between a flexible sigmoidoscopy and a colonoscopy and why one might be preferred to the other. I learned about the challenges of gardening for a

townhouse dweller. And I learned where an avid magazine collector/reader gets her fix.

Dr. McDougall is currently working to develop a research proposal to submit to the IRB. Among other ideas, she's interested in looking at veterans' attitudes toward colorectal screening - reasons they are screened, refusal reasons, the role of their provider in decision making, etc. She's also interested in understanding the differences in VA resident / physician screening practices as compared to providers at other non-VA sites. The proposal she'd make if the VA's coffers were bottomless and her approval guaranteed would be a matched colonoscopy / flexible sigmoidoscopy randomized controlled trial.

When she's not on call, in clinic or consumed by course work, you're likely to find this confirmed Midwesterner either planting perennials or perusing periodicals. An avid magazine collector/reader, what little free time Heather has is primarily devoted to ferreting out places to either inexpensively purchase her drug of choice, or to read them in comfort surrounded by comfy chairs and coffee smells. Husband of more than 2 years Tommy, however, doesn't quite get the need to hang out for hours. These reunited high school sweethearts took that fateful trip down the aisle in June of 2005. *

AREEF ISHANI (continued from page 4)

Jenna is one-and-a-half and has turned the household on its ear. This fiercely independent toddler can barely say the word "Dora" but insists that the shoes that bare the likeness of this icon must not be removed, not even at bedtime.

So if you ever find yourself back by the Dialysis Center, stop in - and ask him if he's settled on a particular flavor of candy, or if Jenna has taken off those Dora shoes. *

FROM THE DIRECTOR

HANNA E. BLOOMFIELD, MD, MPH

We here in CCDOR spent much of our time and energy in the last year thinking about how we could best contribute to veterans' health over the next five years. As we surveyed both our strengths and the needs of VA, we realized that we were best positioned to focus our efforts in the area of post-deployment health.

More than 600,000 new veterans have become eligible for VA services since the beginning of the global war on terror. These veterans face a host of unique combat-related problems, many of which will become lifelong chronic conditions. Over the next five years CCDOR plans to initiate post-deployment health research activities in four key areas.

- First, we will undertake longitudinal studies of OIF/OEF veterans to identify those most at risk for poor mental health outcomes following deployment-related trauma.
- Second, we will develop, test, and implement interventions that reduce barriers to obtaining and adhering to treatment for PTSD.
- Third, we will carry out studies to optimize care of the PT/BRI veteran. Specifically, we will focus on transi-



tions between care venues; screening for highly prevalent, "invisible" problems such as hearing loss and traumatic brain injury; and facilitating the supportive care provided by family members.

- Fourth, we will leverage our expertise in designing effective interventions for substance use disorders to develop treatment approaches for substance users with co-morbid mental health problems.

As this newsletter goes to press, we received the exciting news that one of our major post-deployment health projects was approved for funding by both VA and DoD (see also page 1). The Soldier to Civilian study led by PT/BRI QUERI research coordinator, Nina Sayer, PhD, will test the effectiveness of an on-line intervention for veterans returning from combat duty.

The intervention, expressive writing, has been shown in civilian populations to improve psychological adaptation and functioning following traumatic exposure.

We are proud to be on the forefront of research that will help our troops re-integrate into civilian life and lead productive and healthy lives.

WHAT IF?

Name: Alisha Baines, MS

1. Everyone would select one answer for survey questions where one answer is required.
2. The VA has a new therapy program for veterans with PTSD called P-MEP (PTSD Marine Experience Project). To evaluate the program, I will travel to the Baja peninsula in Mexico, where the participants observe marine life throughout the Sea of Cortez and have a chance snorkel with sea lions and whale sharks. The data collection will include interviews before and after each experience, and of course to create the instruments, I would need to spend some time participating in the project myself.
3. After the disaster that was "The Amazing Race All Stars" – when Uchenna and Joyce ended up stuck in Frankfurt and didn't land in Kuala Lumpur until after the other teams had finished – the producers decided they needed a data manager to analyze available flights, and ensure more bunching on the race. In my position as "Amazing Race" Data Manager, I look at each place the race will travel, and help determine the order of countries the race visits.
4. Sadly, no restaurant would want any of my skills. Even if I was stuck in an office, I would still find a way to spill water all over the customers – or on my computer.

THE GROUP
CCDOR Data Managers

THE QUESTIONS

1. The data fairy has granted your data wish. What's your data wish?

2. You've been asked to supervise data collection at an off-site location. Tell us about this location/project.

3. There is a new trend: Data Managers needed on the set of TV shows. Which show hires you and why?

4. Your data skills are required at a local restaurant. Which one has contacted you?

SELECTED CCDOR PUBLICATIONS FY2007

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***CCDOR Core Investigators.**
Additional CCDOR staff indicated in bold.