

HSR&D Research Briefs

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New Director of HSR&D Named

Seth A. Eisen, MD, MSc, has been named Director of HSR&D effective late December 2006. Dr. Eisen received his Medical Degree from Washington University in St. Louis, MO and his Masters of Science in Epidemiology from the Harvard School of Public Health. After completing his training in rheumatology, Dr.



Seth A. Eisen, MD, MSc
HSR&D Director

Eisen devoted several years to lab bench science. In the late 1970's, he realized he missed contact with patients and accepted the opportunity to become Director of Ambulatory Care at the newly constructed St. Louis VA Ambulatory Care facility. Thus, a long history with the VA and VA research began.

In a recent interview, Dr. Eisen spoke enthusiastically about his research. His first VA funded project was an evaluation of the relationship between medication adherence and blood pressure control. The medication compliance monitoring device that he and colleagues invented for this work was later patented by VA. In the early 1980's, he became very interested in the health effects of the Vietnam War. Over 8 million Americans were in service during the Vietnam War, and Dr. Eisen and colleagues had the idea to create a national registry of Vietnam era veteran twins. After an initial demonstration project that confirmed the proposed study's feasibility, they developed the Vietnam Era Twin (VET) Registry, a cohort of 7400 monozygotic and dizygotic twin pairs in which twin siblings both served in the military during the Vietnam War. Twin pairs were then evaluated by phone and mail to assess the

physical and psychological effects of war on health. Subsequently, collaborating with colleagues at Washington, St. Louis, and Boston Universities, and the University of California San Diego, the research team received funding from the National Institutes of Health to study many disorders including post-traumatic stress disorder (PTSD), major depression, tobacco dependence, drug abuse and dependence, and pathological gambling. Work with the twin registry is ongoing. Additionally, Dr. Eisen is engaged in work on a national study of Gulf War veterans and their families.

Dr. Eisen brings this research commitment and enthusiasm to his new position as HSR&D Director. He knows all too well the great disappointment of funding failures, as well as the satisfaction of success. "I have personally experienced many of the issues researchers in the field are dealing with. In this new position, I will be on the side of the researchers."

For example, information technology and access to VA databases for research is very much on Dr. Eisen's radar. "I am an epidemiologist by training and, as such, I love data and databases. VA's national databases are important to the Office of Research and Development in general, and to HSR&D specifically. A major goal is to ensure that the current level of access remains and, further, to improve access to VA databases for researchers," said Eisen. He went on to say that in IT planning meetings that he has attended thus far, there is a clear recognition on the part of all parties of the importance of data for research.

In addition, Dr. Eisen sees wonderful opportunities for collaborations across health services, clinical science, and rehabilitation research. "The expertise for evaluating and implementing the results of clinical science and rehabilitation resides in HSR&D and VA's Quality Enhancement

Research Program. I have a strong interest in developing these collaborations."

Dr. Eisen also is interested in developing

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HSR&D NATIONAL MEETING

February 21-23, 2007
Hyatt Regency Crystal City,
Arlington, VA

Agenda and details on the web at
[www.hsrd.research.va.gov/
meetings/2007](http://www.hsrd.research.va.gov/meetings/2007)

We look forward to seeing you there!



New Director of HSR&D Named *Continued from page 1*



Seth A. Eisen, Director, and Shirley Meehan, Deputy Director of HSR&D.

the next generation of health services researchers as evidenced by his work as Chair of the Career Development Review Committee for the past four years.

At the same time that warm welcomes are extended to Dr. Eisen, a heartfelt THANK YOU is given to Shirley Meehan. Dr. Meehan has done a tremendous job as Acting Director of HSR&D for the past two and a half years, and all of us in HSR&D are grateful for her dedication, leadership, and guidance. Dr. Meehan will now resume her role as Deputy Director of HSR&D.

HSR&D Research Featured in JAMA's "Author in the Room" Series

Two studies will be discussed by HSR&D investigators in the "Author in the Room" series – a joint initiative from *The Journal of the American Medical Association* (JAMA) and the Institute for Healthcare Improvement (IHI). In this

Publication Notification

HSR&D requires notification of all articles by HSR&D investigators when the article is ACCEPTED for publication. When an article is accepted please send an email to vhacohsrd@va.gov and to research.publications@va.gov and include the journal name, expected publication date, funding source, and a copy of the accepted article.

series, an author of a study published in *JAMA*, with the potential to change clinical practice, will talk to clinicians during a conference call that is facilitated by clinical experts in implementing changes in practice.

An HSR&D Advanced Career Development Awardee, Dr. Louise Walter discussed her study on Wednesday, December 20, 2006. Walter and colleagues conducted a study to determine prostate-specific antigen (PSA) screening rates among elderly veterans, including those with limited life expectancy. Most screening guidelines do not recommend PSA screening in elderly men with limited life expectancies. However, this study showed that PSA screening rates are high among elderly veterans aged ≥ 70 years, with more than half receiving a PSA test in 2003 (68% done within VA, 32% within Medicare). The study also showed that age was the strongest predictor of PSA screening. The percentage of veterans having a PSA test decreased with advancing age, for example, from 64% for veterans ages 70-74 to 35% for veterans age 85 or older.¹

Dr. David Ganz, HSR&D investigator at the VA Greater Los Angeles Health Care System, will discuss his study on Wednesday, February 21, 2007 from 2:00-3:00 pm (EST). Ganz and colleagues sought to identify risk factors for falls that would be included in a screening test that could be incorporated into routine clinical examinations. In 2001, approximately 2.7 million elderly Americans were treated for non-fatal injuries in emergency departments, 62% as the result of falls. A typical intervention begins with a fall-risk assessment that a clinician would perform as part of the patient's history and physical examination. This type of intervention is usually reserved for high-risk patients, thus clinicians must be able to recognize patients at high risk of falls. This study shows that patients who have fallen within the previous year or the past month, or who have a gait or balance problem have a 50% chance of falling within the next year. It also suggests that fall-risk interventions for those who screen positive for being at high risk could reduce the rate of falls among the elderly by 30-40%.²

For more information about the

"Author in the Room" series and to sign up for sessions, go to www.ihl.org/authorintheroom.

1. Walter L, Bertenthal D, Lindquist K, and Konety B. PSA screening among elderly men with limited life expectancy. *JAMA* November 15, 2006;296(19):2336-2342.
2. Ganz D, Bao Y, Shekelle P, and Rubenstein L. Will my patient fall? *JAMA* January 2007, in press.

New REAP Sites

The goal of the Research Enhancement Award Program (REAP) is to increase HSR&D capacity by assisting VA sites that already show promise, as demonstrated by a history of HSR&D peer-reviewed research and career development funding. Groups of investigators who are eligible for funding are those located at VA medical centers that do not contain and are not affiliated with an HSR&D Center of Excellence. Following is a description of the newest sites to receive HSR&D REAP funding. For more information on this program, visit the HSR&D web site at www.hsrld.research.va.gov/about/centers/reap.cfm.

Colorado REAP to Improve Care Coordination for Veterans

Evelyn Hutt, MD, Denver VAMC

Research at this site focuses on quality of life and care for the rapidly expanding segment of the veteran population with complicated chronic disease management issues and those who reside in long-term care. Projects are designed to improve the quality of care for serious acute and chronic medical illnesses common in older veterans, such as pneumonia, congestive heart failure, and depression, and on projects designed to enhance quality of life for veterans receiving care in multiple sites by addressing issues such as care coordination, pain management and falls. In addition, investigators will pursue a research agenda to assist in planning for the long-term care needs of the aging veteran population by describing the health and socio-demographic characteristics of veterans who use long-term care across a variety of settings. This site is affiliated with the University of Colorado Health Sciences Center.



Columbia Center for the Study of Chronic, Comorbid Mental and Physical Disorders

Linda Ganzini, MD, MPH, Portland VAMC

The Columbia Center's mission is to conduct interdisciplinary research to improve care for veterans afflicted with both physical and mental disorders. Of particular interest is the interaction

between mental illnesses and delivery of primary medical care, screening for medical illnesses, cancer care, and treatment for hepatitis C. The Center will investigate patient, clinician, and systems-based barriers to delivering medical care to patients with mental disorders and test novel methods of health delivery to patients with both mental and physical

disorders. In addition, the Center will develop new conceptual models of how patients with chronic, comorbid mental and physical disorders and their providers understand the patients' illnesses and health care needs. Academic collaborators include Oregon Health & Science University and the Kaiser Permanente Center for Health Research.

Newly Funded Career Awardees

Diana Burgess, PhD	Minneapolis VAMC	Understanding and Ameliorating Racial/Ethnic Disparities in Healthcare
Michael Ho, MD	Denver VAMC	Improving Hypertension Outcomes among IHD Patients
Cari Levy, MD	Denver VAMC	Site of Death among Veterans in Nursing Home Care Units
Douglas Robertson, MD	White River Junction VAMC	Developing Sensible Cancer Screening Strategies Following Colonoscopy
Christianne Roumie, MD	Nashville VAMC	Targeted Evidence-Based Improvements to Overcome Clinical Inertia
Paul Varosy, MD	San Francisco VAMC	Optimizing Utilization of ICD Therapy in Veterans

Research Projects

(Only awards/projects with funding start dates that have been confirmed since the last issue of Research Briefs are listed here.)

Investigator-Initiated Research

Neena Abraham, MD, MSc	Houston VAMC	Economic and Clinical Outcomes of Recommended NSAID Prescription Strategies
Cathy Alessi, MD	VA Greater Los Angeles Health Care System	Non-Pharmacological Interventions on Sleep in Post-Acute Rehabilitation
Barbara Bokhour, PhD	VA New England Health Care System	Culture and Communication in Hypertension Management
Kenneth Boockvar, MD, MS	Bronx VAMC	Reducing Transition Drug Risks after Patient Transfer
Katharine Bradley, MD, MPH	VA Puget Sound Health Care System	Alcohol Misuse and the Risk of Post-Surgical Complications and Mortality
Laurel Copeland, PhD	VA South Texas Health Care System	Patterns of Late-Life Healthcare among VA Patients with Schizophrenia
Timothy Dillingham, MD	Milwaukee VAMC	Electrodiagnostic Services: Guidelines, Compliance, and Outcome
Jack Edinger, PhD	Durham VAMC	Sleep Specialty Consultation: Improving Management of Sleep Disorders
Leonard Egede, MD	Charleston VAMC	Telepsychology-Service Delivery for Depressed Elderly Veterans
Michael Gould, MD, MS	VA Palo Alto Health Care System	Quality of Practices for Lung Cancer Diagnosis and Staging
Erik Groessl, PhD	VA San Diego Health Care System	A Self-Management Intervention for Veterans with Hepatitis C
Hildi Hagedorn, PhD	Minneapolis VAMC	Effectiveness of Contingency Management in VA Addictions Treatment
Said Ibrahim, MD, MPH	VA Pittsburgh Health Care System	Knee Replacement Disparity: A Randomized, Controlled Intervention
Mark Kunik, MD	Houston VAMC	Partners in Dementia Care
Steven Lash, PhD	Salem VAMC	Reinforcement of Abstinence and Attendance in Substance Abuse Treatment
Todd Lee, PharmD, PhD	Hines VAMC	NSAID Related Adverse Events: Evaluating Risk Using Clinical Information
Bruce Ling, MD, MPH	VA Pittsburgh Health Care System	Improving Patient-Provider Communication for Colorectal Cancer Screening
David Litaker, MD, PhD	Cleveland VAMC	Summary Measures of Quality for Diabetes Care
Matthew Maciejewski, PhD	Durham VAMC	Long-Term Outcomes of Bariatric Surgery in the Veterans Health Administration
Clare Mahan, PhD	Washington, DC VAMC	Profile of Gulf War Veterans Receiving Undiagnosed Illness Compensation
Megan-Crowley Matoka, PhD	VA Pittsburgh Health Care System	Sociocultural Dimensions of Provider Decision-Making in Pain Management
John McKellar, PhD	VA Palo Alto Health Care System	Improving Long-Term SUD Outcomes with Telephone Case Monitoring
Terri Monk, MD	Durham VAMC	Intra-Operative Predictors of Adverse Outcomes
Maureen Murdoch, MD, MPH	Minneapolis VAMC	Sexual Assault Prevalence among Male, PTSD-Disabled Gulf War Veterans
Jonathan Nebeker, MD, MS	VA Salt Lake City Health Care System	Implementation of Real-Time ADE Surveillance and Decision Support
Eli Perencevich, MD	VA Maryland Health Care System	Predicting Antibiotic Resistant Bacteria Carriage at Hospital Admission
Steven Pizer, PhD	VA Boston Health Care System	How Do Medicare Health Plan Options Affect VA Utilization and Outcomes?
Diane Cowper Ripley, PhD	North Florida/South Georgia Veterans Health System	Geographic Access to VHA Rehabilitation Services for OEF/OIF Veterans



Anne Sadler, RN, PhD	Iowa City VAMC	Physical and Sexual Assault in Deployed Women: Risks, Outcomes and Services
Usha Sambamoorthi, PhD	VA New Jersey Health Care System	Chronic Physical and Mental Illness Care in Women Veterans
Usha Sambamoorthi, PhD	VA New Jersey Health Care System	Health Care Use, Outcomes, and Costs of Comorbid Diabetes and Depression
Matthew Samore, MD	VA Salt Lake City Health Care System	Surveillance of Medical Device-Related Problems in Intensive Care Units
Yujing Shen, PhD	VA New Jersey Health Care System	Longitudinal Analysis of Utilization and Cost by VA Patients with Diabetes
Jillian Shipherd, PhD	VA Boston Health Care System	MST Effects on PTSD and Health Behavior: A Longitudinal Study of Marines
Eric Slade, PhD	VA Maryland Health Care System	Access Criteria and Cost of Mental Health Intensive Case Management
Theodore Speroff, PhD	Nashville VAMC	Electronically Identifying Adverse Events in Clinical Narrative
Corrine Voils, PhD	Durham VAMC	A Patient-Spouse Intervention for Self-Managing High Cholesterol
Donna Washington, MD, MPH	VA Greater Los Angeles Health Care System	Women Veterans Ambulatory Care Use - Project Phase II
Saul Weiner, MD	Hines VAMC	Identifying and Predicting Contextual Errors in Medical Decision Making
Alan West, PhD	White River Junction VAMC	Veterans' Healthcare Needs in National Surveys of the General Population
Joseph Westermeyer, MD, MPH	Minneapolis VAMC	Pathological Gambling and Gambling Problems among Veterans Receiving VA Health Care
Susan Zickmund, PhD	VA Pittsburgh Health Care System	Barriers to Initiating Antiviral Therapy for Veterans with Hepatitis C

Implementation – Rapid Response Projects

Sherrie Aspinall, PharmD	VA Pittsburgh Health Care System	Implementation of Practices to Improve Efficiency of Care for Pneumonia
Paul Barnett, PhD	VA Palo Alto Health Care System	Economic Impacts of Buprenorphine Adoption in VHA
Ann Borzecki, MD, MPH	VA New England Health Care System	Potential Barriers to Quality Care: Linking Wait Times to Avoidable Hospitalizations
Matthew Chinman, PhD	VA Greater Los Angeles Health Care System	Evidence-Based Review of Peer Support
Ann Hendricks, PhD	VA Boston Health Care System	Implementing a Metric for VA Hospice Referrals: Phase I, Develop the Triggers
Henry Lew, MD, PhD	VA Palo Alto Health Care System	Predicting Rehabilitation Costs for VA Patients with Traumatic Brain Injury
Audrey Nelson, PhD, RN	Tampa VAMC	Gap Analysis for Managing Upper Limb Pain and Function in SCI
Amy Rosen, PhD	VA New England Health Care System	Quality Improvement Initiatives: A Focus on Specific Patient Safety Indicators
Craig Rosen, PhD	VA Palo Alto Health Care System	VIP: Staff Distance Learning in Substance Use Intervention for Returnees
Constance Uphold, PhD	North Florida/South Georgia Veterans Health System	Education Materials for Puerto Rican OIF/OEF Veterans and Families
Marcia Valenstein, MD	VA Ann Arbor Health Care System	Implementing the Pharmacy-Based Adherence Facilitation Program
W. Bruce Vogel, PhD	North Florida/South Georgia Veterans Health System	VHA Costs of Acute vs. Subacute Rehabilitation Care for Stroke
Kenneth Weingardt, PhD	VA Palo Alto Health Care System	Brief Motivational Interventions for Substance-Using Veterans Pilot

Service-Directed Projects

Ann Borzecki, MD, MPH	VA New England Health Care System	Translating the AHRQ Quality Indicators to the VA
Sonia Duffy, PhD, MS, RN	VA Ann Arbor Health Care System	Inpatient Smoking Cessation: Bringing the Program to the Smoker



Center for Information Dissemination and Education Resources

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