

CMC³ (151H)
Hines VA Hospital
5th and Roosevelt Roads
Hines, IL 60141

On page 2

*TBI Study funded by HSR&D for
Theresa Pape*

On page 3

*Study Funded for Bonnie Spring
SCI QUERI News*

On page 4

*Selected 2007 publications
of CMC³ Staff*



Todd A. Lee, PharmD, PhD to Receive Bernie O'Brien New Investigator Award from ISPOR

Todd A. Lee, PharmD, PhD, CMC³ Senior Investigator, has been named the 2007 recipient of the Bernie J. O'Brien New Investigator Award from the International Society for Pharmacoeconomics and Outcomes Research (ISPOR). Lee will receive the award Tuesday, May 22, at the ISPOR Annual Meeting in Arlington, VA. In addition to a plaque and complimentary meeting registration, he will receive a \$5,000 research grant and up to \$1,500 in travel expenses.

The ISPOR is an international nonprofit organization that promotes the science of pharmacoeconomics and health outcomes research. In 2004, ISPOR established the ISPOR Bernie J. O'Brien New Investigator Award to honor O'Brien's commitment to training and mentoring new scientists. The award is given annually to the best nominee showing exceptional promise of technical and scholarly work in the fields of pharmacoeconomics and outcomes research.

Dr. Lee's currently funded HSR&D research includes: IIR 05-293 "NSAID Related Adverse Events; Evaluating Risk Using Clinical Information"; and IIR 03-307 "Outcomes Associated with Salmeterol Use in Obstructive Lung Disease."

Dr Lee's recent publications include:

Lee T.A., Bartle B., Weiss K.B. Impact of NSAIDS on mortality and the effect of preexisting coronary artery disease in US veterans. *Am J Med.* 2007 Jan;120(1):98, 9-16.

Lee T.A., Bartle B., Weiss K.B. Spirometry use in clinical practice following diagnosis of COPD. *Chest.* 2006 Jun;129(6):1509-15.

Lee T.A., Weaver F.M., Weiss K.B. Impact of pneumococcal vaccination on pneumonia rates in patients with COPD and asthma. *J Gen Intern Med.* 2007 Jan;22(1):62-7.

Lee TA, Fuhlbrigge AL, Sullivan SD, Finkelstein JA, Inui TS, Lozano P, Weiss KB. Agreement between caregiver reported healthcare utilization and administrative data for children with asthma. *J Asthma.* 2007; 44(3): 189-194.

Lee TA, Pickard AS, Bartle B, Weiss KB. Osteoarthritis: a comorbid marker for longer life? *Ann Epidemiol.* 2007; 17(5): 380-384

The ongoing conflicts in Iraq and Afghanistan have created a more urgent need for early assessment and timely intervention for soldiers returning with traumatic brain injuries. One study addressing this need was recently funded by HSR&D.

The project titled "Measurement and Outcomes Post Severe Brain Injury" is a prospective measurement and outcomes study of persons with severe traumatic brain injury (TBI). The purpose of this study is to enhance neurobehavioral measurement and prognostication after severe TBI. The nature of the injuries being incurred by our military service personnel serving in Iraq and Afghanistan (<http://www.polytrauma.va.gov/>) makes this research project timely and important. It is important because even in peace time military service personnel and veterans, compared to the general US population, are at increased risk for TBI. It is also important because of the chronic debilitating nature of severe TBI. The VA will provide each veteran with a lifetime of medical rehabilitation services and care.

Severe TBI causes altered consciousness. Some survivors will recover consciousness and others will not. The lack of recovery of consciousness is described by three clinical sub-syndromes; the comatose, vegetative and minimally conscious states. Coma indicates a state where the patient cannot be aroused whereas the vegetative state indicates a state of wakefulness without awareness of self in one's environment. Minimal consciousness reflects the ability to demonstrate limited but clear evidence of awareness of self, but an inability to functionally communicate. Outcomes after surviving a severe TBI range from return to active duty and/or gainful employment to remaining

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vegetative for years until death. An adult survivor who does not recover consciousness within the first year of injury will live for an average of 10 years in vegetative and/or minimally conscious states. Estimated lifetime costs for persons surviving in these states ranges from \$600,000 to \$1,875,000 per person.

Clinicians do not have the capacity to monitor neurobehavioral recovery, to determine the effectiveness of interventions nor are clinicians able to provide evidence based prognoses. This study develops our capacity to measure

neurobehavioral functioning and to provide evidence based prognoses. The results will enable clinicians to objectively monitor recovery and determine the short-term effectiveness of daily medical rehabilitation services and treatments provided during coma recovery.

The project starts October 1, 2007 and ends September 30, 2010. The coordinating center for this multi-site study is Hines VA Center for Management of Complex Chronic Care (CMC³). Subject recruitment will start January 2, 2008 and occurs at three VA and three non-VA rehabilitation hospitals. Study sites include: Hines, Minneapolis and Tampa (James A Haley) VAMCs, Marianjoy Rehabilitation Hospital, the Rehabilitation Institute of Chicago, and RML Specialty Hospital.

Dr. Pape's pre-doctoral training was in MCHSPR (now CMC³). She then went on to complete a post-doctoral fellowship at Northwestern University's Institute for Health Services Research and Policy Studies, returning to VA for the beginning and advanced Career Development Awards through RR&D. This grant brings her full circle back to HSR&D.

Visit the CMC3 website at: www.cmc3.research.va.gov/

Obesity Management Trial Funded for Bonnie Spring

An obesity epidemic is gaining momentum in the United States, and in the VA in particular. Among veterans receiving care at VA outpatient centers in the year 2000, the prevalence of overweight was 73% and obesity was 33%. A growing body of literature describes the association between obesity and chronic pain conditions. Pain and obesity in combination have an additive negative effect on health-related quality of life, a finding demonstrated both in patients seeking treatment for obesity and patients seeking treatment for chronic pain.

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The PDA+ trial funded by VA RR&D, will enroll overweight patients with chronic pain who are participants in MOVE! Level 2 weight loss counselling. The two group randomized clinical trials test whether the addition of a Personal Digital Assistant (PDA) decision support tool improves weight loss and pain outcomes. Patients randomized to receive the decision support tool will record their diet and physical activity onto the PDA. The tool provides visual feedback and decision support to guide diet and physical activity choices. It graphs progress towards energy balance and pain management goals allowing veterans to have a visual depiction of their progress. Once they show mastery of the Palm, the calorie and physical activity goal algorithms activate providing stepped goals that encourage the veterans to decrease calorie intake and increase physical activity. Participants use a modem to upload their data to a web server.

The project tests a cutting edge intervention to treat obesity in an inexpensive manner that overcomes access barriers and is disseminable. The intervention to be tested interfaces with the existing VA MOVE! weight loss program, and aims to extend its reach and effectiveness. In addition to addressing obesity, the intervention secondarily targets pain, thus addressing two prevalent clinically significant problems that affect veterans.

SCI QUERI News

Charlesnika Evans successfully defended her doctoral thesis April 10th at the University of Illinois at Chicago, School of Public Health, Department of Epidemiology and Biostatistics. The title of her thesis is: "Blood stream infections in veterans with spinal cord injury". Congratulations Dr. Evans!

Sherri LaVela has been selected as one of two Paul D. Doolan Scholars for the Study of Aging at the University of Illinois 2007-2008 in the area of behavior-social sciences. The scholarship is funded by an endowment in honor of Paul D. Doolen from the Retirement Research Foundation. Sherri also received word this past week that an article she had published in SCI Nursing, "Older Adults with Spinal Cord Injuries and Disorders: Implications for Long-term Care" is to receive two awards from the American Association of Spinal Cord Injury Nurses. The awards are: 2006 Best Article of the Year and 2006 Best Aging Article of the Year.

We would like to welcome Lauren Rapacki, MS to the Center. Lauren earned her degree from the University of Northern Colorado. She has joined SCI QUERI as a project assistant on the grant, "Characterizing Variability in Respiratory Care for SCI&D." Welcome aboard Lauren!

2007 Selected Publications

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EDITORIAL CREDITS

Contributions or
Suggestions should be addressed to:
Madeline Thornton
c/o HSR&D (151H)
P.O. Box 5000
Hines VA Hospital
Hines, IL 60141-5151

EDITORIAL ASSISTANT
Carol Durczak

DESIGN/LAYOUT
Madeline E. Thornton

EDITORIAL DIRECTOR
Kevin B. Weiss, M.D.

TECHNICAL DIRECTOR
Frances M. Weaver, PhD