News for the VA research community **Vol. 2, No. 5/May 2002**

VA Research Currents

Update from the Office of Research and Development...

Publicity success stories for VA research

By John R. Feussner, MD, MPH, Chief R&D Officer

Just in the past few weeks, we've seen several positive examples of what can *go right* when our investigators make their VA affiliation known to media reporters.

For instance, on May 2, many newspapers across the nation reported on a study led by Dr. Allen Gifford, of the VA San Diego Health Care System, that suggested minorities are not being adequately represented in HIV clinical trials. Dr. Gifford was quoted and clearly identified as a VA researcher.

Here are other examples of studies that in the past month or two generated positive media coverage for our program:

• Dr. Frank Lederle, Minneapolis, led a VA cooperative study that found no survival advantage in repairing abdominal aortic aneurysms smaller than 5.5 centimeters.

• A team led by Drs. Karl Hostetler and James Beadle, San Diego, announced a new oral drug for smallpox.

• Dr. Joy Lewis of the Greater Los Angeles VA Healthcare System published findings on pharmacy compli-

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Study raises questions about widespread prescribing of diabetic footwear

Medicare pays for therapeutic footwear for thousands of people with diabetes each year, but a VA researcher and colleagues report in the May 15 *Journal of the American Medical Association* that for many of these patients regular good-quality shoes may work just as well in preventing foot ulcers.

"The results were surprising," said principal investigator Gayle E. Reiber, MPH, PhD, of the VA Puget Sound Health Care System and the University of Washington. "The popular notion among foot specialists is that therapeutic shoes and inserts should be prescribed freely to all patients with diabetes and prior foot ulcers. However this study did not provide evidence to support this practice."

Reiber said the study suggests that careful attention by health care professionals may be more important than therapeutic footwear in preventing ulcers. Patients not receiving this level of care, she said, may in fact benefit from special footwear.

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Sleep researchers aiming for clinical trials

Some 80 investigators representing 13 VA medical centers convened in Philadelphia in March for the first National VA Sleep Conference, and forged plans to step-up the agency's efforts in managing what they see as an increasing burden on VA healthcare: obstructive sleep apnea (OSA).

> "VA could lead the way in developing innovative, cost-efficient approaches to diagnose and treat sleep disorders."

According to conference co-organizer Samuel T. Kuna, MD, a sleep researcher at the Philadelphia VA Medical Center, last year only about 30,000 veteran patients received a diagnosis of obstructive sleep apnea—a number he and his colleagues believe is far below the actual prevalence. Kuna said obstructive sleep apnea is linked with several other medical problems, such as hypertension, heart disease and daytime sleepiness, and therefore failing to diagnose the condition may represent missed opportunities to dramatically improve patients' quality of life.

In 1997, VA had 52 sleep laboratories with 126 beds—not enough, according to Kuna and other experts, to

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ance with California's prescription-drug discount program for seniors.

In all the above cases, VA research was mentioned prominently in publications read by millions of Americans, such as the *New York Times, USA Today, Washington Post, and Los Angeles Times.*

The investigators involved were simply following VA policy: They clearly stated their VA affiliation when submitting abstracts or manuscripts, and when speaking with reporters.

But this is not always the case. Too often, we have seen news stories—or, for that matter, journal articles—where only our researchers' academic affiliation was noted, with no mention of VA.

First of all, this does a disservice to American citizens, who have a right to know how their tax dollars are spent. Second, it prevents veterans who look to VA for their health care from knowing about VA's advances in research and care.

It is a fact of life that the amount of money Congress allocates to VA for health research is determined not only by the good work we do, but by the public's *perceptions* of what we do. And those perceptions are influenced in no small measure by what our neighbors see and hear in the news.

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This reality was stated plainly by political commentator Dr. Charles Krauthammer in his keynote talk at the national meeting of VA's Rehabilitation Research Service earlier this year. Speaking about media hype, he said, "Hype is extremely important in deciding how things are allocated politically—because hype influences public opinion and public opinion influences people in Congress, and they are the ones who decide."

The recent examples of excellent publicity for VA research are directly related to our investigators clearly acknowledging their VA roles when reporting their findings. Continuing to adhere to this policy will ensure a win-win situation for us and our valued constituents. ■

Tampa investigator receives EPVA award

Ronald Gironda, PhD, an associate investigator at the Tampa VA Medical Center, received the 2002 Eastern Paralyzed Veterans Association (EPVA) Scholar Award. Gironda is evaluating a newly developed multidimensional measure of spinal cord injury (SCI) pain-treatment outcomes, and comparing the effectiveness of different interventions for upper-extremity musculoskeletal pain in veterans with paraplegia.

Dr. Vivian Beyda of EPVA says research on pain management is a priority for the organization. "Pain management is a significant health care issue for people with spinal cord injury, but unfortunately, this critical component to a high quality of life is often overlooked by health care professionals. Dr. Gironda's proposal is exciting and has significant implications for those with spinal cord injury."

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Multiple sclerosis is focus of special issue of VA's *Journal of RR&D*

Rehabilitation Research and Development investigators explore multiple sclerosis (MS), the most common disabling neurological disorder in young adults, in the April 2002 *Journal of Rehabilitation Research and Development*. The single-topic issue includes 12 articles that provide an overview of current MS research and clinical care. Among the topics covered: disease characteristics, therapeutic strategies, including the use in Europe of azathioprine and intravenous immunoglobulins; genetic research, assistive technologies, and differences in treatment patterns between veterans and non-veterans.

"MS is a leading cause of spinal cord dysfunction," said Timothy Vollmer, MD, associate director for clinical studies at VA's Center of Excellence on Restoration of Function in Spinal Cord Injury and Multiple Sclerosis in West Haven, Conn., and guest editor for the April issue. "Treatment of MS has become substantially more complex, but therapeutic options are far more effective than they were even five years ago. The message of this single-topic issue is one of hope."

The *Journal of Rehabilitation Research and Development* is the only peer-reviewed, scientifically indexed publication covering all rehabilitation research disciplines: neurology, orthopedics, engineering, audiology, ophthalmology and optometry, outcomes, restorative, prosthetics, geriatrics, psychiatrics, and community reintegration. The journal accepts original research papers, review articles, and clinical and technical commentary from U.S. and international researchers. For online access visit **www.vard.org.** ■

VA piloting 'just–in–time' review

Following a model adopted by the National Institutes of Health in 2001, VA is piloting "just-in-time" funding review for two of its four research services. Under the system, in effect through the remainder of 2002, investigators can submit research proposals to Rehabilitation Research and Development or Health Services Research and Development at VA Central Office before gaining approval from the Internal Review Board (IRB) at their facility. The investigators, though, do need to submit approval letters from their local overall R&D Committee, along with drafts of informed consent forms.

As for the other two research services in VA, the Cooperative Studies Program already has in place a just-in-time policy. The Medical Research Service is currently not participating in the pilot.

The pilot is expected to expedite the review and approval process for Rehabilitation and Health Services investigators. It is important to note, however, that no funds are released until *all* required reviews, approvals and certifications are received by Central Office.

ORD will evaluate the program after this year, and decide by the end of fiscal year 2003 whether to continue, expand or end it. Comments from investigators and administrators about just-in-time review are welcome, and should be addressed to the appropriate program managers within each service.

FOOTWEAR (continued from page 1)

The study randomized 400 men and women with diabetes and a prior foot ulcer into three groups. One group wore extra-depth study therapeutic shoes with customized cork inserts. A second group wore special, therapeutic shoes with non-custom polyurethane inserts. The third group served as controls and wore their own shoes. After two years, ulcer rates were similarly low in all three groups: 15, 14, and 17 percent, respectively. The study did not include those five percent of diabetic patients with severe foot deformities or other special problems who may benefit from custom-made footwear.

The reulceration rates reported in the study were strikingly lower than those found in several earlier European studies. Reiber cited two possible explanations: All participants in her study were provided specially designed slippers to wear when not in their shoes, to prevent non-shoe-related injuries and ulcers; and all had access to good-quality health care, as patients of either the VA Puget Sound Health Care System or the Seattle-based Group Health Cooperative.

Study participants made visits every 17 weeks to a study team that included a foot care specialist. Patients and their health care providers were informed about any foot lesions, and the patients were referred to the providers for treatment. Reiber noted that the extra attention given the study participants may have contributed to the overall low rate of ulcers in all three groups, regardless of what kind of shoes they wore.

Funding for the study was provided by VA, the National Institute of Diabetes and Digestive and Kidney Diseases, and the Centers for Disease Control and Prevention.

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serve all the veteran patients requiring these resources. "Many medical centers are outsourcing patients to non-VA sleep laboratories that are already overburdened, and access to these non-VA sleep laboratories is limited and expensive," said Kuna.

The answer may lie not in more labs, but in using home-based technology such as portable sleep monitors and automatically adjusting positive airway pressure machines, which would allow veterans to sleep at home and have data sent electronically to labs for analysis. According to Kuna, a strong consensus emerged from the conference to begin work on designing multi-center clinical trials to test these methods.

"VA could lead the way in developing innovative, cost-efficient approaches to diagnose and treat sleep disorders in veterans and, eventually, in the general population," he said.

Among the other recommendations to emerge from the conference:

• Standardized policies and procedures should be adopted by VA sleep laboratories to facilitate data exchange, and existing VA sleep labs should be computer-networked.

• A "Strategic Plan for Clinical Sleep Research" within the VA should be developed, and VA investigators should provide input to the ongoing strategic research plan being developed by the National Center for Sleep Disorders Research. ■

R&D Hotline Conference Calls

July 8 and Sept. 9,

noon – 12:50 p.m. (EST).

Dial (800) 767-1750,

code 17323

Career achievements

James Tulsky, **MD,** director of the Program on the Medical Encounter and Palliative Care at the Durham (N.C.) VA Medical Center; and **Jeffrey R. Smith, MD, PhD,** of the Nashville (Tenn.) VA Medical Center were among this year's recipients of the Presidential Early Career Award for Scientists and Engineers. The award is presented each year to about 60 investigators by the White House Committee on Science and Technology. Tulsky's work centers on improving patient-physician communication in end-of-life care. Smith is an oncologist focusing on the molecular genetics of hereditary prostate cancer.

Larry E. Davis, MD, chief of the Neurology Service at the New Mexico VA Health Care System, received the 2002 A. Earl Walker Neuroscience Research Award from the University of New Mexico. Davis, a pioneer in exploring the pathogenesis of various viral and bacterial brain infections, is most noted for his work on the pathogenesis of Reye's syndrome.

Longtime VA researcher noted for aspirin studies

Aaron J. Marcus, MD, a VA physician and researcher since 1958, received the Aspirin Senior Award from Bayer in March 2002 for his research on the therapeutic use of aspirin.

Marcus, chief of hematology-oncology at the VA New York Harbor Healthcare System, was among the pioneers in the 1950s of research on blood platelets. He later focused on the effect of aspirin on blood cells, and laid the groundwork for the preventive use of aspirin in cardiovascular health. In 1995, his editorial in the *New England Journal of Medicine* on aspirin and colorectal cancer received wide publicity, as he was among the first scientists to recommend the preventive use of aspirin for patients at high risk for certain cancers. In recent years, Marcus has been studying the effects of an enzyme called CD39, which has proved effective in treating heart attack and stroke in laboratory animals. He is now investigating the enzyme in combination with aspirin as a possible breakthrough treatment for heart disease in humans.

EPVA (continued from page 2)

About 250,000 Americans have spinal cord injuries; about 40,000 are veterans eligible for VA care. EPVA, in partnership with VA's Rehabilitation Research and Development Service, established the EPVA Scholar Award in 2000 to promote spinal cord injury research, and provides up to $75,000 per year to support the program.

The 2001 recipient, Dr. Margot Damaser, a biomedical engineer in Hines, Ill., is testing a device she developed to enable veterans with SCI to measure their bladder pressure at home. The 2000 awardee, Dr. David Gater, a research associate and physician in Ann Arbor, has demonstrated a strong correlation between body fat and glucose intolerance in SCI and is using exercise to favorably alter those conditions. ■

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