



VA Research Currents

Update from the Office of Research and Development

A new vision for VA research...

By Nelda P. Wray, MD, MPH, Chief R&D Officer

As I begin my duties as VA's chief research and development officer, I am extremely excited at the opportunity to lead such a distinguished program to even greater achievements in the future. One of my first activities has been to lead a strategic planning meeting during which the Office of Research and Development (ORD) established a new vision: *Today's VA research leading tomorrow's health care.*

I ask each of you to reflect on this compelling vision statement. To achieve it, we must expand the VA research portfolio. While maintaining its strength in laboratory studies based on fundamental questions about disease, VA research must expand its efforts in two other areas.

First, we will expand our efforts in clinical research that will guide clinical practice. In addition to increasing funding for clinical research studies, we are developing a new initiative to dramatically increase our clinical research capacity. We will emphasize research that provides knowledge for the practice of evidence-based medicine.

However, as the Institute of Medicine report "Crossing the Quality Chasm" documents, too often patients do not receive the care research has shown to be beneficial. Therefore, we also will expand our portfolio into organizational research to identify barriers to best practices, and study new organizational structures with the potential to remove these obstacles. We are developing new programs in translation research that will train investigators in the scientific

see **VISION** on page 3

Oral smallpox drug in *Popular Science*

An oral smallpox drug developed by a VA-led team was selected by *Popular Science* magazine as one of the five most promising developments in medical technology for 2002. The drug, hexadecyloxypropyl-cidofovir (HDP-CDV), stops the spread of smallpox and other poxvirus-caused illnesses in mice. It is undergoing additional testing in animals, and will need to be tested in human clinical trials before it is made available for use. One advantage of the drug is that it can be administered orally, rather than intravenously, which would make it valuable in a bioterrorist attack.

The development effort was led by Karl Hostetler, MD, and James Beadle, PhD, of the VA San Diego HealthCare System and the University of California, San Diego, in collaboration with scientists at the U.S. Army Medical Research Institute of Infectious Disease and the University of Alabama, Birmingham. ■

New editor aims to make VA's rehabilitation journal top in its class

"Impact factors" are to scientific journals what "Nielsen ratings" are to television shows. The impact factor, a measure of how frequently a journal's articles are cited, is a key indicator of a journal's clout in the scientific community.

The impact factor of VA's *Journal of Rehabilitation Research and Development (JRRD)* has been rising steadily in recent years and is now at 1.108. Anything above 1 is considered "respectable" in the industry, says Stacieann C. Yuhasz, PhD, who took over the editorship of

the journal last fall and is seeking to boost the publication's prestige even further. "Our impact factor is doing very well, and I anticipate that it will go up," says Yuhasz, a biophysicist who previously edited the journal *Proteins: Structure, Function and Genetics*. "We're going to be pushing this journal to become the premier vehicle for rehabilitation research."

The Baltimore-based *JRRD*, produced every two months, has been published by VA under its current name since the early 1980s. Previously, it was called *The Bulletin of*

see **JOURNAL** on page 3

Team care proves effective for elders' depression

In a study involving VA investigators and patients, a new model of team care more than doubled the effectiveness of depression treatment for older adults in general medical settings. The findings appeared in the Dec. 11 *Journal of the American Medical Association*.

The study followed 1,801 depressed older adults from primary-care clinics in four states for one year. Half the patients received usual care and the other half received a new model of team care titled "Improving Mood—Promoting Access to Collaborative Treatment" (IMPACT). The IMPACT patients were assigned to a depression-care manager in their usual primary care clinic. These specially trained nurses or psychologists worked in close collaboration with the patients' regular physicians for up to 12 months to educate and counsel patients, track symptoms and side effects, and assist with changes in antidepressant treatment. Team psychiatrists consulted on the care of about 10 percent of IMPACT patients.

About half the IMPACT patients reported a 50 percent or greater reduction in depression symptoms at 12 months, compared with 19 percent of those in usual care.

VA sites taking part in the study were the South Texas Veterans Health Care System and Central Texas Veterans Health Care System. VA-affiliated co-authors were John W. Williams Jr., MD, MHS, and Polly Hitchcock Noel, PhD.

Combination therapy promising for schizophrenia

A study by VA researchers and colleagues found that combining the anticonvulsant drug divalproex with either of two commonly used antipsychotic drugs significantly enhanced and hastened responses in patients with acute psychotic episodes of schizophrenia, with no additional side effects.

"Our findings suggest that combination therapy with divalproex can decrease the mental pain and suffering for many patients with schizophrenia and shorten the time they need to be in the hospital," said study leader Daniel E. Casey, MD, of the Portland VAMC and Oregon Health and Science University. Compared to patients treated with either antipsychotic drug alone, those treated with the combination showed an enhanced reduction of symptoms as early as the third day of therapy. Casey and his colleagues report on their study in the January issue of *Neuropsychopharmacology*. ■

VA-specific software wins Human Protection award

A software package called MIRB—now in use by research programs at 23 VA medical centers to ensure strict adherence to human-subject-protection guidelines—was cited for excellence by the group Public Responsibility in Medicine and Research at its recent national conference.

The VA-specific software, developed by a private company in conjunction with research administrators at the McGuire VA Medical Center in Richmond, Va., generates reports and reminders that make it easier for study personnel to comply with the myriad VA and external regulations for conducting studies, both with human and animal subjects. MIRB also allows users to document, audit and continually improve compliance.

According to Franklin Zieve, MD, PhD, associate chief of staff for research at the McGuire VAMC, the software is unique because it grew out of a successful Human Research Protection Program at a VA medical center. "Human subject protection rests largely upon the meticulous observation of procedural safeguards," said Zieve. "MIRB is a tool to ensure that this actually occurs."

VA Research Currents

is published monthly for the

Office of Research and Development

of the Dept. of Veterans Affairs

by VAR&D Communications

103 S. Gay St., Rm. 517

Baltimore, MD 21202

(410) 962-1800, ext. 223

researchinfo@vard.org

Brain-imaging center planned for San Francisco

The San Francisco VA Medical Center has received a \$2 million grant from the National Institutes of Health to help establish a brain-imaging center to study neurodegenerative diseases common among veterans, such as Alzheimer's disease, epilepsy and amyotrophic lateral sclerosis. The center, to be directed by Michael Weiner, MD, is expected to open in late 2003.

The NIH funds will go toward the purchase of a \$3.4-million "high-field" magnetic resonance imaging (MRI) and spectroscopy system. The system will be the most powerful of its kind dedicated exclusively to the study of neurodegenerative diseases, said Weiner, director of MRI at the San Francisco

see **IMAGING** on page 4

Journal aiming to be top in its class (cont. from pg.1)

Prosthetics Research. The name change reflected how the scope of rehabilitation research had widened, which is even more the case today. Recent issues of the journal (www.vard.org) include articles on everything from wheelchair mechanics, diabetic footwear and prosthetics to functional electrical stimulation, artificial retinas, and mechanical leeches for post-surgery healing. Future issues, says Yuhasz, will increasingly feature cutting-edge topics such as robotics, tissue engineering and “BIONs”—wireless, implantable muscle-stimulating devices.

JRRD also will venture into areas of research that are not new, but that have seldom appeared in its pages—for example, sexuality in spinal cord-injury. “That is something we’ve never covered, and it’s of interest to a lot of veterans,” notes Yuhasz.

Journal seeking to publish more outcome-driven research

Aside from covering cutting-edge issues, *JRRD* will also seek to publish research of a more rigorous, quantitative nature—studies that use larger populations and that identify specific outcomes, or endpoints, and test the effects of different interventions. For example, a study might measure the effect on gait of different prosthetic devices, as opposed to simply describing anecdotally what occurred in the clinic.

“Until now, most of the studies we’ve published include only a couple of dozen or fewer people,” says Yuhasz. “Gradually, we will start seeing studies with larger numbers of participants. Studies with more than 100 people produce more meaningful statistics. When studies like this come to fruition, they can definitely make an

impact on how medicine is practiced.”

Starting this month, *JRRD* is offering online submission and review. Prospective authors can upload their manuscripts at <http://jrrd.manuscriptcentral.com>. Reviewers will visit the same site to view or download their assigned papers. “In my past experience [with online submission], we’ve seen a significant decrease in manuscript review times, as well as an increase in submissions,” says Yuhasz. “People like to submit online. It cuts down on their paperwork and processing time.”

Yuhasz hopes *JRRD*’s upgraded Web presence will also stimulate more letters to the editor, leading to a lively, collegial exchange of views and feedback like that found in first-tier journals. Plans also call for a link to a new page for veterans, where they can submit questions to rehabilitation experts.

Even with increased Web activity, Yuhasz still wants to boost the journal’s hard-copy distribution, which now is about 4,725. “Researchers tend to use the Web when they’re doing a paper. But if you want to read, you want a hard copy.” She says investigators like being able to pull a copy of the journal off their shelf when they are searching for an article they remember seeing, but can’t recall fully enough to look up in PubMed.

Just the same, Yuhasz is counting on Web-based submission to increase interest from both VA and non-VA authors. “We invite authors with first-rate research to send it to us,” she says. “We expect that *JRRD*’s new system will substantially reduce the time required for peer review. Compared to our previous system, this will mean faster publication.” ■

VISION (cont. from page 1)

disciplines necessary to advance this field *and* provide opportunities for managers to develop an understanding of these concepts.

This vision, however, can be translated into action only by an integrated research *organization*. A cornerstone of our effort thus will be the development of our research organization into a vigorous, vibrant and highly coordinated effort. Our associate chiefs of staff for research will be the foundation on which we will base our local leadership teams and will be critical to communicating our vision and new efforts to the field. We are developing a comprehensive program to ensure that

We will emphasize research that provides knowledge for evidence-based medicine.

both new and veteran ACOSs and administrative officers receive the education, training and support they need to do their jobs effectively. We are also reaching out to VISN and medical center leadership by creating a committee of such individuals to directly advise me on how to achieve our vision.

Most importantly, we in ORD realize that to achieve this vision it must be *your* vision as well as ours. We will work tirelessly to partner with medical and research administrators and investigators in the field. I am reaching out to ask you to join me in this effort. Together we will build the greatest health care research program in the country!

National Hotline Conference Call schedule:
http://vaww.va.gov/resdev/fr/call_calendar.cfm

Give us your feedback to this newsletter

Please take a minute to fill out the form below and mail to *VA Research Currents*, VA R&D Communications, 103 S. Gay St., Baltimore, MD 21202, or fax to (410) 962-0084. Or, type your answers in an e-mail and send to researchinfo@vard.org.

For each of the following two questions, check whichever boxes apply:

- I receive *VA Research Currents* by e-mail (as a link to a PDF on the VA research website).
 - I receive *VA Research Currents* by regular mail.
 - I am not currently on either mailing list.
-
- I would like to receive (or continue receiving) *VA Research Currents* by e-mail.
 - I would like to receive (or continue receiving) *VA Research Currents* by regular mail.
 - I do not wish to receive *VA Research Currents* at this time.

Hot topics on the VA research website

- For details of VA’s newest solicitation for research on the health effects of military deployment, see www.va.gov/resdev/fr/ProgramAnnouncementDeploymentHealthIssues.pdf.
- VA’s updated policy directive on security in biomedical labs can be found at www.va.gov/resdev/directive/HAZMAT-Directive-revised1.doc.

IMAGING (cont. from page 2)

VAMC. The new MRI system will boast a 4-tesla magnet, which generates a magnetic field 80,000 times more powerful than the earth’s and three times more powerful than those of standard MRI units.

“This system will allow us to see smaller structures in the brain,” said Weiner. “This is a unique resource.”

Additional funding for the new brain-imaging center will come from the Northern California Institute for Research and Education, one of 80 Congressionally authorized nonprofit foundations that help support VA research.

VA Research Week

National VA Research Week is set for April 20 – 26, 2003. Look for a fax and mailing from R&D Communications about this important event. For help with planning your local events or for further details contact Christine Amereihn at (410) 962-1800, ext. 273, or chris@vard.org.

Inside this issue...

- Dr. Wray details vision for VA research
- New directions for VA rehabilitation journal
- Findings from studies on schizophrenia, depression

VA Research and Development Communications
 Department of Veterans Affairs
 103 S. Gay St., Rm. 517
 Baltimore, MD 21202