



POPULATION MEDICINE & RESEARCH NEWSLETTER

Connecting you with valuable resources
and innovative research from the Division
of Population Medicine

 **College of
Medicine**
Family and Community Medicine



MESSAGE FROM THE DIRECTOR

How do you like our new newsletter design? Kudos goes to Kim Haney, KAN Coordinator, who developed a new, consistent look for our publications in the Department of Family and Community Medicine at the University of Kentucky College of Medicine. In this issue, we highlight several exciting activities and accomplishments since our last newsletter.

The Department of Family and Community Medicine has a mission focused in education, research, and clinical service. We recently published our first departmental executive summary of the annual report that highlights our tremendous accomplishments over the last year in these mission-centric areas. We also recently announced a new unit in our department called the "IQ Unit." The IQ Unit will be an organizing home for all our efforts around quality improvement and innovative programs to drive primary care and population health services. We are excited to announce that Jessica Sass, APRN will serve as the unit lead.

West Virginia University, in collaboration with KAN, received notice that we were awarded a \$13.3 million grant from PCORI to study the effectiveness of web-based cognitive behavioral therapy for patients suffering from depression in rural communities. This cross-state collaboration will be recruiting 8,000 patients from 200 primary care providers in our respective practice-based research networks.

You will find other updates of our ongoing research in this issue and we have resumed a member spotlight, starring Dr. Demetra Antimisiaris at the University of Louisville School of Medicine. As always, we thank you for your ongoing collaboration and support!



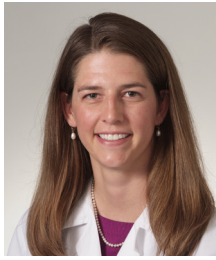
Roberto Cardarelli, DO, MHA, MPH
Director, KAN
Professor and Chief of Population
Medicine



OUR TEAM



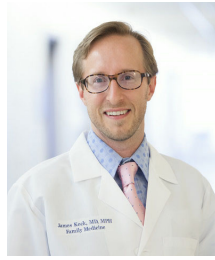
Roberto Cardarelli,
DO, MHA, MPH



Mary Sheppard,
MD



Carol Hustedde,
PhD



James Keck, MD,
MPH



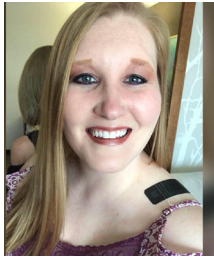
Karen Roper, PhD



Kim Haney, MLS



Kacie Bledsoe



Madeline Slimack



Jackie King

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HIGHLIGHTS:

Executive Summary of the FY2018 Department of Family and Community Medicine Annual Report

The University of Kentucky Department of Family & Community Medicine (DFCM) recently released its first Executive Summary of the FY2018 Annual Report. The summary highlighted several achievements, including:

- Growing the number of department faculty to 49 strong, with approximately 150 clinical and academic staff, and a statewide network of 150 voluntary faculty
- 103 medical students engaged across our longitudinal family medicine programs, departmental electives, and the Family Medicine Interest Group (FMIG)
- 76,631 billed office visits and 8,342 patient hospital days across four clinics and two hospital services
- Total of \$31.87 million in billed charges
- \$1.66 million in grant funding for FY2018 (Five-year summary: \$13.25 million)
- 18 peer-reviewed publications and 10 national/international conference presentations
- Of the 14 faculty/provider leaders in the DFCM, 71% were women, 29% were women of color, and 21% were under-represented minorities

We are proud of our accomplishments, yet we are not satisfied. We will be recruiting new clinical and senior research faculty to our team, and will continue to study and practice disruptive models that better integrate upstream social determinants to ensure that our graduates are prepared to lead in our evolving healthcare system. Our success is made possible by the dedicated faculty, providers, staff, and residents of the UK DFCM and the patients and populations who we serve. For that, we are indebted to their contributions.

Pictured above: Dr. Wanda Gonsalves, Professor of Family Medicine and Department Vice Chair, and Melissa Kerns, Clinical Services Technician

New Innovations & Quality (IQ) Unit in Department of Family and Community Medicine

On October 22, 2018 Dr. Roberto Cardarelli announced the new Innovations & Quality (IQ) Unit of the Department of Family and Community Medicine.

Led by Jessica Sass, APRN (who also heads up the Patient-Centered Medical Home programs for the Department), the IQ Unit will organize a variety of ongoing innovative programs aimed at transforming and improving the clinical experiences of the populations we serve. These include the Population Medicine Innovation Team, QI Projects, Patient Experience (lead: Dr. Shannon Voogt), Transitional Care Management (Lead: Julia Byarlay, RN), Chronic Care Management (Lead: Lindsey Hensley, RN), among others.

The IQ Unit will be a resource for faculty, residents, clinical staff, and medical directors, and will be able to provide content expertise in KAN programs relating to quality improvement.

The Population Medicine Innovation Team (PMIT), mentioned above, is led by Dr. Carol Hustedde and serves as the clinical service arm of the Division of Population Medicine. PMIT designs and implements asynchronous quality improvement initiatives that target defined populations to improve specific outcomes. Current projects, at various stages of development, include uncontrolled diabetic follow-up, abdominal aortic aneurysm screening, and diabetic retinopathy screening.

These IQ Unit-based programs and initiatives span the entire population served by our four clinics in the Bluegrass and Eastern Kentucky regions.



The IQ Unit will serve as the organization and facilitation home of all quality-related clinical, education, and research initiatives for the four clinics across the Department.

WVU-UK awarded \$13.3 million PCORI grant to improve access to depression care in rural regions

West Virginia University researcher Robert Bossarte, in collaboration with the University of Kentucky (Site PI: Cardarelli, R.), has received a \$13.3 million award from the Patient-Centered Outcomes Research Institute (PCORI) to improve access to mental health care for depressed patients in rural areas. The study will compare three treatment strategies for patients diagnosed with Major Depressive Disorder (MDD)—antidepressants alone, antidepressants combined with unguided online cognitive behavior therapy, and antidepressants combined with guided online cognitive behavior therapy.

“Cognitive behavior therapy is a way of retraining your brain to react to things differently. It’s breathing, muscle relaxation, the way you think about things,” said Bossarte, Associate Professor in the WVU School of Medicine’s Department of Behavioral Medicine and Psychiatry.

During the unguided therapy, patients will follow the steps provided on a website to determine what exacerbates their depression symptoms and change how they respond to those triggers. For example, a patient might acknowledge feeling sad, identify money worries as the cause, realize the financial catastrophe she envisions doesn’t reflect reality and gain a more accurate perspective of her financial situation—one that doesn’t cause her symptoms to flare up.

During the guided therapy, patients will complete the same cognitive behavior therapy exercises, but they will check in with a coach who will walk them through the process instead. The coaches will work under the supervision of a clinical psychologist or psychiatrist, and will be able to engage with patients to provide elements of remote collaborative care (e.g. medication adherence and monitoring, coordinating with the primary care provider, and facilitating speciality referral).

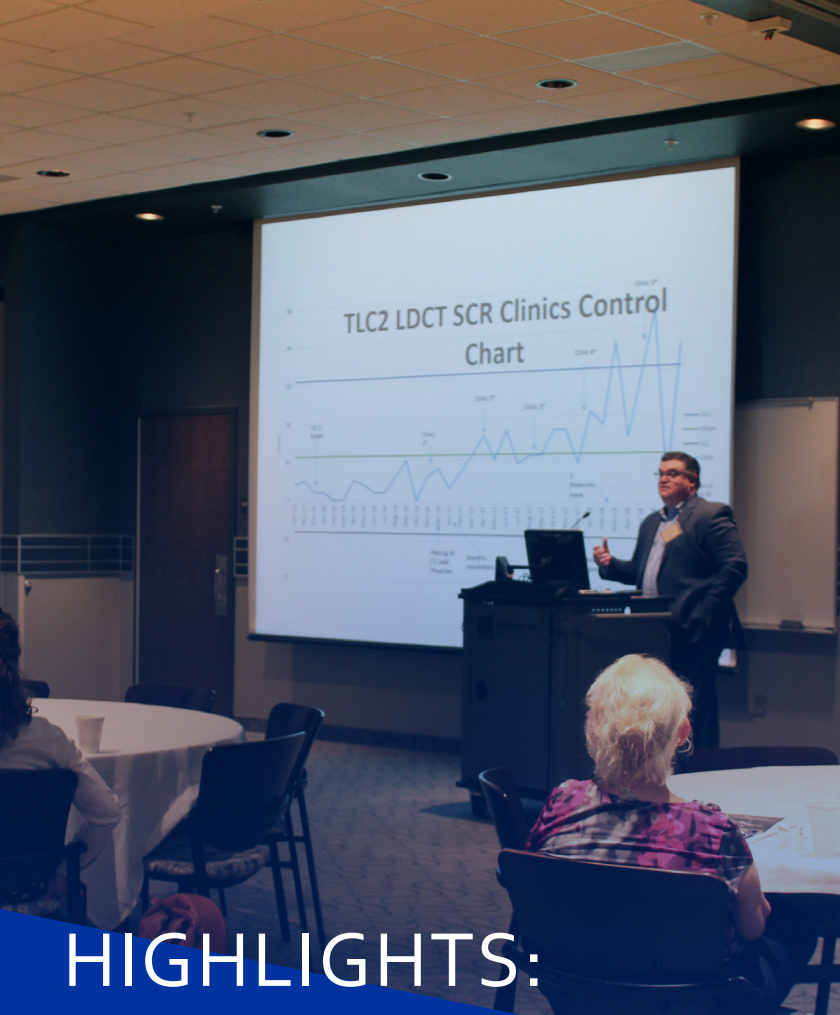
“This is more than ‘let’s see if the cognitive behavior therapy works.’ It’s ‘let’s see who the therapy works for,’” Bossarte explained. “Our ultimate goal is to drive down the treatment failure rate. It’s precision medicine. How do we get the right treatment to the right patient?”

The study will include 8,000 MDD patients who live in West Virginia and Kentucky.

Both the West Virginia Practice-Based Research Network (WVPBRN) and the Kentucky Ambulatory Network (KAN) will have integral roles in recruiting clinical sites, clinicians, and patients into the study.



Rates of depression tend to be higher in rural areas than urban ones; however, rural patients with depression may have fewer options for treatment and less access to the necessary mental health care.



HIGHLIGHTS: Third Annual Lung Cancer and Smoking Cessation Symposium

The third and final Lung Cancer and Smoking Cessation Symposium held in Morehead, Kentucky on September 14 was a successful day full of rich content and conversations around the topic. For the past three years the symposium has been conducted and funded through the Terminate Lung Cancer (TLC)2 study. Dr. Roberto Cardarelli, the principal investigator on the TLC study, presented preliminary findings from the project and the dramatic progress that the St. Claire Primary Care teams have made as a result.

Keynote speaker, Dr. Brenna Van Frank, Senior Medical Officer at the Centers for Disease Control, presented the latest evidence-based approaches to tobacco cessation and prevention, following a morning full of presentations around the history of tobacco use and current interventions taking place in our communities. Ben Chandler, President and

CEO of the Foundation for a Healthy Kentucky spoke about policy efforts throughout the state, and providers from five St. Claire Primary Care clinics in Morehead and surrounding areas wrapped up the day with a panel discussion regarding efforts within their practices.

Common themes emerged from the day—most all agree that the topic is one of great importance yet it doesn't receive the attention it needs. Calls to action from the day include greater emphasis among healthcare providers on lung cancer screenings and smoking cessation, community-driven efforts to reduce tobacco use, and a push for the development of policy that compliments those of the nation.

Pictured above, left: Dr. Roberto Cardarelli presenting preliminary data from the TLC study; Above, right: Ben Chandler speaking on statewide policy efforts to reduce tobacco use in Kentucky.

New study examines barriers to surgical colon cancer treatment in rural Appalachia



Studies have shown that patients in rural Appalachia may face significantly more barriers to receiving life-saving care than patients living in other areas of the U.S.

Kentucky's Appalachian patients are disproportionately affected by colon cancer, compared to non-Appalachian patients. There have been tremendous strides made in improving screening rates and access to screening. However, the path from diagnosis to surgical treatment can be challenging for many patients.

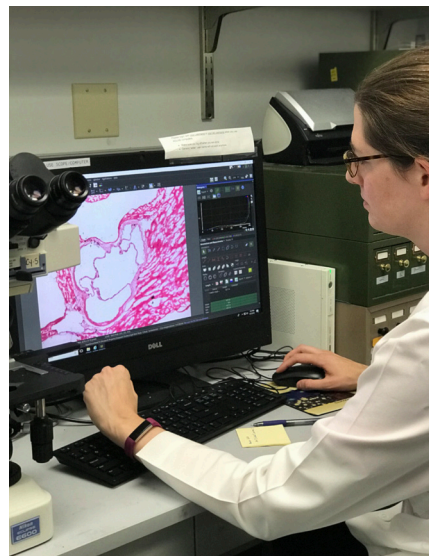
"Barriers to Surgical Colon Cancer Treatment in Appalachian Kentucky" is a study aimed at identifying perceived patient barriers to surgical care.

This summer, study personnel will be reaching out to providers in Appalachia for help in understanding perceptions of these barriers.

Dr. Mary Sheppard and Team publish in *Journal of Translational Internal Medicine*

Dr. Mary Sheppard, Assistant Professor of Family Medicine, along with her research team, recently published their research titled, "Heterogeneity of aortic smooth muscle cells: A determinant for regional characteristics of thoracic aortic aneurysms?" in the *Journal of Translational Internal Medicine*.

There are many unknown features related to the mechanism of thoracic aortic aneurysms. Dr. Sheppard's research into these mechanisms provide hypotheses that can translate to future diagnostic modalities and therapies.



UPCOMING EVENTS

[Kentucky Statewide Diabetes Symposium](#)

November 2, 2018
Louisville, KY

[Family Medicine Review & Pediatric Conference](#)

November 4-9, 2018
Lexington, KY

[Kentucky Primary Care Association Annual Conference](#)

November 5-6, 2018
Lexington, KY

[Staying Alive Kentucky 2018: Building Youth for the Future](#)

November 8-9, 2018
Lexington, KY

[North American Primary Care Research Group Annual Meeting](#)

November 9-13, 2018
Chicago, IL

[Rural and Underserved Health Research Center - Fall 2018 Symposium](#)

November 12, 2018
Lexington, KY

[Kentucky Rural Health Association Annual Conference](#)

November 15-16, 2018
Bowling Green, KY

[North American Primary Care Research Group International Conference on Practice Facilitation \(ICPF\)](#)

December 10-11, 2018
Tampa, FL

[Society of Teachers of Family Medicine Conference on Practice Improvement](#)

December 6-9, 2018
Tampa, FL

KAN Member Spotlight:

Demetra Antimisiaris, PharmD,
BCGP, FASCP



Location: University of Louisville School of Medicine

Specialty areas:
Polypharmacy

Research interests:
Polypharmacy,
Pharmacovigilance,
Medication Use Decision Making, Medication Use Literacy

Demetra Antimisiaris, PharmD, serves as Associate Professor at the University of Louisville Department of Pharmacology and Toxicology. She has associate appointments with the Departments of Family and Geriatric Medicine and Neurology. Dr. Antimisiaris leads the Frazier Polypharmacy and Medication Management Program, which is an endowed program dedicated to education, research, and outreach regarding Polypharmacy.

Dr. Antimisiaris first learned about KAN in 2009, and sees missed opportunities for improved medication use and analysis and management as the greatest health-related issues in her patient population that could benefit from research. Currently, Dr. Antimisiaris is working toward a project centered on using robust medication consultation to capture ICD code modifiers to improve MIPS scores.

In addition to her clinical and research activities, Dr. Antimisiaris also maintains the [Polypharmacy Network](#)—a grass roots non-profit organization aimed at helping clinicians, patients, and all stakeholders better understand medication use along four domains: purpose, monitoring, efficacy, and personal experience.

Do you have a clinical or practice related question?

Do you have a question regarding clinical or health/disease related issues?

Do you have a question based on experiences in your medical practice?

We want to hear from you! Tell us about the issues you see and experience in your primary care practice. We may be able to answer your question, connect you with colleagues who share your concerns, or perhaps even turn your question into a research project.

Reach out any time at KAN@uky.edu.



KAN Member Clinic Visits

Kim Haney, our KAN Coordinator, is visiting member clinics across the state to touch base with members, assess potential needs and interest, and share the latest updates and free resources. If you have not yet received a visit from Kim, expect to be contacted about scheduling one soon. Feel free to reach out to Kim at KAN@uky.edu to get your clinic on the schedule and share your thoughts about KAN.

If you know of a colleague who may be interested in becoming a KAN member, please invite them to join, and forward them this newsletter!

Get engaged with KAN and the Division of Population Medicine

We often hear the question “We are primary care, why should we be involved in research?” Our responses are always the same, “Because if we don’t do it, no one will create the knowledge and evidence we need to practice medicine that our patients and communities expect and deserve from us.”

Primary care providers have a vital role in advancing the knowledge of our professions. Practice-based research groups grew from the realization that much of the research that is done in tertiary medical centers has little applicability to the practice of outpatient and ambulatory medicine. KAN invites all its members to participate in research that will have little hindrance to daily practice.

We welcome your ideas and engagement with the numerous resources and opportunities we offer!

CONTACT US

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