

Spring 2018



Our Mission

**To enhance patient engagement in and
provider use of evidence-based practices
for Veterans with chronic disease**

Director: Steven Fu, MD, MSCE **Deputy Director:** Nina A. Sayer, PhD

Associate Directors: Melissa Partin, PhD and Brent Taylor, PhD

CCDOR Highlights

- Erin Krebs and her SPACE team** has received significant attention for their March 6 JAMA article, “Effect of Opioid vs Nonopioid Medications on Pain-Related Function in Patients With Chronic Back Pain or Hip or Knee Osteoarthritis Pain The SPACE Randomized Clinical Trial,” which showed that opioids are not better at treating chronic pain than nonopioids.
- Shahnaz Sultan** was appointed Chair-Elect to the Clinical Guideline Committee (CGC) for the American Gastroenterological Association. AGA is one of the leading professional societies in the field of gastroenterology with over 16,000 members. Dr. Sultan will help AGA implement and monitor a standard process for guideline development and develop evidence-based clinical guidance documents, algorithms and other resources for the management and treatment of digestive diseases and conditions.
- Timothy Wilt** was named Chair of the American College of Physicians Clinical Guidelines Committee (ACP-CGC). ACP is the largest medical specialty society in the world with over 150,000 members. The CGC is comprised of approximately 16 physician and public members selected from around the world. As Chair, Dr. Wilt will help oversee and lead in the direction and development of ACP-CGC methods, policies, and recommendations.
- Shannon Kehle-Forbes** was the lead author for paper “Experiences with VHA Care: A Qualitative Study of U.S. Women Veterans with Self-Reported Trauma Histories,” which was cited in written testimony of the American Congress of Obstetricians and Gynecologists before the House Committee on Veterans’ affairs regarding H.R. 3642, The Military SAVE Act, October 24, 2017.
- Aasma Shaukat** and colleagues published their paper, “BMI is a Risk Factor for Colorectal Cancer Mortality,” which confirmed that higher body mass index is linked to a greater risk of death from colorectal cancer. The paper was highlighted in the Minneapolis VA 2017 annual report.



Photo: April Eilers— Mpls VA Public Affairs

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Calendar

- Journal Club (presenter: Elisheva Danan)—May 3
- VA Research Day—May 16
- Memorial Day—May 28
- Journal Club (presenter: Brent Taylor)—June 7
- Medicine Research Conference (presenter: Melissa Partin)—June 21
- Independence Day—Jul 4
- Labor Day—Sep 3

SPACE Trial Receives National & International Attention

Dr. Erin Krebs and colleagues embarked on their HSR&D-funded Strategies for Prescribing Analgesics Comparative Effectiveness (SPACE) Trial, a 4 1/2-year Investigator-Initiated Research (IIR) that was designed to fill a critical gap in the evidence of using opioids to treat chronic pain. The study compared the effectiveness and harms of two forms of treatment (opioid therapy vs. nonopioid therapy) for chronic back, hip or knee pain in Veterans. Dr. Krebs and her team learned that in a sample of 240 Veterans with back pain and hip/knee osteoarthritis, pain interference with functioning did not differ between the two groups at 12 months. In addition, the Veterans receiving opioids had more medication-related adverse symptoms than their non-opioid counterparts.

Being the first completed RCT of long-term opioid therapy for chronic pain, coupled with its findings in the midst of the country’s opioid epidemic, SPACE has received significant attention on several platforms. Dr. Krebs presented the results of the study at the 2017 SGIM National Meeting and caught the attention of the Star Tribune, which publicized the study in its May 4, 2017 article, “Minneapolis VA Study Challenges Wide Use of Opioids.” And last month,

SPACE Trial Receives National & International Attention cont'd

the team published the findings in JAMA. The article has received national and international attention. It has been featured on 186 media outlets including U.S. News and World Report, New York Times, NPR, Newsweek, Los Angeles Times, Business Insider, to name a few. The article currently has an Almetric score of 2854, which is ranked 7th out of over 21,600 JAMA articles!

Now, Dr. Krebs and her team are hard at work on another phase of this important research. The Veterans' Pain Care Organizational Improvement Comparative Effectiveness (VOICE) trial, a PCORI-funded study. In a sample of Veterans on long-term high-dose opioids for chronic pain, VOICE will compare the effectiveness of two pain care delivery

strategies (telecare collaborative pain management and integrated pain team management) on pain and opioid use in a 12-month period. VOICE is an effort to investigate the best way to optimize pain care and reduce harms from opioid therapy.



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New in CCDOR Research

MARVEL

Dr. Diana Burgess's newest study, "Mindfulness Approaches to Reduce Veterans Pain and Enhance Life (MARVEL)," is part of a broader effort to reduce chronic musculoskeletal (MSK) pain and co-morbid conditions among Veterans through scalable, non-pharmacologic, evidence-based strategies that are "Veteran-Centric" and designed to optimize Veteran engagement, adherence, and sustainability. MARVEL aims to test two approaches for delivering effective non-pharmacological treatment for chronic pain. As one of four sites involved in the MARVEL trial, Minneapolis VA will be testing one of these approaches — Mindfulness-Based Interventions (MBIs) that incorporate mobile application technology in order to reach large numbers of Veterans. The project will also focus on adapting interventions to fit the needs of women Veterans, a priority population that is at elevated risk for chronic MSK pain and mental health comorbidities, and will be the first study to have a large enough sample to examine the effects of MBIs on women with chronic pain (n=375 men, n=375 women).

Notably, the MARVEL study was funded through a new and unique funding mechanism bringing together federal agencies to address the public health crises of chronic pain and the opioid epidemic. The Pain Management Collaboratory is a research initiative partnering the Department of

Defense, National Institute of Health, and the Department of Veterans Affairs, with the three agencies together pledging \$81 million in grants over 6 years. MARVEL is funded by the DoD as part of the Collaboratory.

Kicking CAUTI

Dr. Dimitri Drekonja, Minneapolis VA Chief of Infectious Diseases, is the Site PI for the HSR&D-funded "Less is More: Improving Antimicrobial Stewardship for Asymptomatic Bacteriuria" (PI: Barbara Trautner, Houston VA). This IIR, known as the Kicking CAUTI study, will evaluate the effectiveness of the Kicking CAUTI campaign across four VA medical centers while assessing the adoption, fidelity, generalizability, and necessary dose of the intervention. The Kicking CAUTI intervention led to a 71% reduction in screening for asymptomatic bacteriuria (ASB) and a 75% reduction in treatment of ASB at one major VA medical center in a previous investigation. Using a stepped-wedge design, the current IIR will start with a pre-implementation assessments of context, barriers and facilitators at each site in the first year. The study team will then evaluate implementation of a scalable version of the Kicking CAUTI intervention (individualized, case-based audit and feedback) in four geographically distinct VA medical centers. Finally, the team will conduct a budget impact analysis to assess the financial implications of the intervention. Although entitled

New in CCDOR Research cont'd

"Kicking CAUTI," the intervention will apply to Veterans with and without urinary catheters and will be performed in acute and long-term care.

PERSIST 2.0

On the heels of their impactful HSR&D CREATE project, PERSIST (see below), **Dr. Nina Sayer** and her team were recently awarded HSR&D funding to build on PERSIST. The new project, PERSIST 2.0, which is a collaboration with the National Center for PTSD and the Office of Mental Health and Suicide Prevention, will pilot an implementation strategy to improve the accessibility and uptake of Cognitive Processing Therapy and Prolonged Exposure. Using a quasi-experimental, repeated measure (pre-post) design, the study aims to

- 1) increase the reach of CPT and PE in 2 PTSD teams where reach is low (< 16%) using external facilitation and a PTSD EBP Implementation Toolkit to spread the clinic practices of high reach teams;
 - 2) conduct formative evaluation to inform the implementation strategy, monitor implementation progress, and examine contextual factors associated with the success of our implementation strategy; and
 - 3) refine the toolkit for national distribution.
- The PTSD EBP Implementation Toolkit will be a living document that can be updated to include additional promising strategies and resources to improve CPT and PE reach and ensure sustainability over time. Findings from this pilot will inform future implementation and quality improvement efforts.

CCDOR Research Has Local and National Impact!

CREATE Study Shapes EBP Reach Efforts

Drs. Nina Sayer and Craig Rosen (VA Palo Alto) and colleagues examined team and organizational factors associated with reach of two evidence-based psychotherapies (Cognitive Processing Therapy and Prolonged Exposure) for PTSD to patients across VHA specialty outpatient PTSD teams in their HSR&D CREATE project, PERSIST. Findings, published in Administration and Policy in Mental Health and Mental Health Services Research, were disseminated to their partners in the Office of Mental Health and Suicide Prevention (OMHSP) and the National Center for PTSD (NCPTSD). Both offices are using these findings to inform efforts to increase the number of patients with PTSD who receive CPT and PE.

Lung Cancer Screening Tracking Tool

The National Lung Cancer Screening Trial demonstrated that annual low-dose computed tomography screening reduced lung-cancer mortality in high-risk smokers. In response, VA's National Center for Health Promotion and Disease Prevention (NCP) conducted a demonstration project with the MVAHCS serving as 1 of the 8 participating sites. CCDOR investigators (**Drs. Steve Fu** and **Anne**

Melzer) contributed to MVAHCS's participation in the demonstration project and evaluated the implementation of lung cancer screening by conducting a survey of more than 1,000 Veterans eligible for lung cancer screening. Subsequently, the MVAHCS and CCDOR investigators developed a tracking tool for incidentally detected pulmonary nodules, lung cancer screening, and post-cancer resection follow-up. The tracking tool is integrated with CPRS and helps ensure that the best care is delivered for these complex and longitudinal care processes. At the request of Dr. Jane Kim, Chief Consultant for NCP, the development of this tracking tool was expedited to aid in national lung cancer screening implementation efforts. To date, the nodule tracking portion of the tool has been implemented throughout VISN 23, and 8 sites nationally are in the process of implementing the database for tracking incidental pulmonary nodules and lung cancer screening. Using operational funds provided by NCP, the MVAHCS and CCDOR have been providing technical and implementation support to new sites across the country to improve the efficiency of adoption as part of the VA National Lung Cancer Screening Toolkit. This work has been recognized with an ICare award from NCP and by the VISN 23 Network Star award for innovative clinical processes.

Selected CCDOR Publications

- Krebs EE**, Gravely A, Nugent S, Jensen AC, DeRonne B, Goldsmith ES, Kroenke K, Bair MJ, **Nooraloochi S**. Effect of opioid vs nonopioid medications on pain-related function in patients with chronic back pain or hip or knee osteoarthritis pain: the SPACE randomized clinical trial. *JAMA*. 2018;319(9):872-82.
- Sultan S, Partin MR**, Shah P, LeLaurin J, Freytes IM, Nightingale CL, Fesperman SF, Curbow BA, Beyth RJ. Barriers and Facilitators Associated with Colonoscopy Completion in Individuals with Multiple Chronic Conditions: A Qualitative Study. Patient Preference and Adherence. 2017; 11:985-94.
- Kehle-Forbes SM**, Harwood EM, **Spoont MR, Sayer NA**, Gerould H, **Murdoch M**. Experiences with VHA Care: A Qualitative Study of U.S. Women Veterans with Self-Reported Trauma Histories. *BMC Women's Health*. 2017; 17(1):38.
- Shaukat A**, Dostal A, Menk J, Church TR. BMI is a risk factor for colorectal cancer mortality. *Digestive Diseases and Sciences*. 2017; 62(9):2511-7.
- Sayer NA**, Rosen, SC, Bernardy, NC, Cook JM, Orazem RJ, Chard KM, Mohr DC, **Kehle-Forbes, SM**, Eftekhari A, Crowley J, Ruzek JI, Smith BN, Schnurr PP. Context Matters: Team and Organizational Factors Associated with Reach of Evidence-Based Psychotherapies for PTSD in the Veterans Health Administration. *Adm Policy Ment Health*. 2017; 44(6):904-18.
- Koffel E**, Vitiello MV, McCurry SM, Rybarczyk B, Von Korff M. Predictors of Adherence to Psychological Treatment for Insomnia and Pain: Analysis from a Randomized Trial. *The Clinical Journal of Pain*. 2018; 34(4):375-82.
- Duan-Porter W**, Hastings SN, Neelon B, Van Houtven CH. Control Beliefs and Risk for 4-Year Mortality in Older Adults: A Prospective Cohort Study. *BMC Geriatrics*. 2017; 17(1):13.
- Qaseem A, **Wilt TJ**, McLean RM, Forciea MA. Noninvasive Treatments for Acute, Subacute, and Chronic Low Back Pain: A Clinical Practice Guideline From the American College of Physicians. *Noninvasive Treatments for Acute, Subacute, and Chronic Low Back Pain*. *Annals of Internal Medicine*. 2017;166(7):514-30.
- Diem SJ**, Peters KW, Gourlay ML, Schousboe JT, **Taylor BC**, Orwoll ES, Cauley JA, Langsetmo L, Crandall CJ, **Ensrud KE**; Osteoporotic Fractures in Men Research Group. Screening for Osteoporosis in Older Men: Operating Characteristics of Proposed Strategies for Selecting Men for BMD Testing. *J Gen Intern Med*. 2017;32(11):1235-41.
- Polusny MA, Erbes CR**, Kramer MD, Thuras P, DeGarmo D, **Koffel E**, Litz B, Arbisi PA. Resilience and Posttraumatic Stress Disorder Symptoms in National Guard Soldiers Deployed to Iraq: A Prospective Study of Latent Class Trajectories and Their Predictors. *Journal of Traumatic Stress*. 2017; 30(4):351-61.
- Frank JW, Lovejoy TI, Becker WC, Morasco BJ, Koenig CJ, Hoffecker L, Dischinger HR, Dobscha SK, **Krebs EE**. Patient Outcomes in Dose Reduction or Discontinuation of Long-Term Opioid Therapy: A Systematic Review. *Annals of Internal Medicine*. 2017; 167(3):181-91.
- Hagedorn HJ**, Brown R, Dawes M, Dieperink E, Myrick DH, Oliva EM, Wagner TH, Wisdom JP, Harris AH. Enhancing access to alcohol use disorder pharmacotherapy and treatment in primary care settings: ADaPT-PC. *Implementation Science*. 2016;11(1):64.
- Hammett P, **Fu SS, Nelson D**, Clothier B, Saul JE, **Widome R, Danan ER, Burgess DJ**. A Proactive Smoking Cessation Intervention for Socioeconomically Disadvantaged Smokers: The Role of Smoking-Related Stigma. *Nicotine & Tobacco Research*. 2017 Apr 8.
- Partin MR**, Lillie SE, White KM, **Wilt TJ**, Chrouser KL, **Taylor BC, Burgess DJ**. Similar Perspectives on Prostate Cancer Screening Value and New Guidelines Across Patient Demographic and PSA Level Subgroups: A Qualitative Study. *Health Expectations*. 2017; 20(4):779-87.
- Ensrud KE**, Harrison SL, Cauley JA, Langsetmo L, Schousboe JT, Kado DM, Gourlay ML, Lyons JG, Fredman L, Napoli N, Crandall CJ, Lewis CE, Orwoll ES, Stefanick ML, Cawthon PM, Osteoporotic Fractures in Men (MrOS) Research Group. Impact of Competing Risk of Mortality on Association of Weight Loss with Risk of Central Body Fractures in Older Men: A Prospective Cohort Study. *Journal of Bone and Mineral Research*. 2017; 32(3):624-32.
- Nooraloochi S**, Meeden G. On Being Bayes and Unbiasedness. *Sankhya A*. 2018; 80(1):152-67.
- Rodriguez AJ*, **Fink HA***, Mirigian L, Guañabens N, Eastell R, Akesson K, Bauer DC, Ebeling PR. Pain, Quality of Life and Safety Outcomes of Kyphoplasty for Vertebral Compression Fractures: Report of a Task Force of the American Society for Bone and Mineral Research. *Joint first authors. *Journal of Bone and Mineral Research*. 2017;32(9):1935-44.

Center for Chronic Disease Outcomes Research (CCDOR)

Director: Steven Fu, M.D., M.S.C.E.

CCDOR was founded in 1998 and currently employs 26 core MD and PhD Investigators and over 50 Research and Administrative Support Staff. It supports over 70 funded studies and several research training programs for post-doctoral level Investigators.

Center of Innovation

In 2013, CCDOR became a VA Center of Innovation (COIN). The COIN program rewards research innovations and partnerships to ensure that research has the greatest possible impact on VHA policies, healthcare practices, and health outcomes for Veterans. COINs emphasize detailed strategic planning and collaboration in one or more focused areas of research, partnerships with VA clinical and/or operations leaders, and accelerated movement toward implementation and impact.

CCDOR's Focused Areas of Research

- Evidence-based therapies for PTSD
- Cancer prevention and screening (tobacco use, colorectal, prostate)
- Chronic pain

Partner Offices

- Office of Mental Health and Suicide Prevention
- National Center for PTSD
- VA Primary Care Program Office
- VA Midwest Health Care Network, VISN 23
- National Center for Health Promotion and Disease Prevention (NCP)
- VHA Pain Management (Program Office)

For More Information

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