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Comprehensive High Activity Mobility Predictor s' of agility New assessment tool could help wounded warriors gauge improvement in rehabilitation

According to Military Advanced Training Center (MATC) chief Charles Scoville, the standard tests used to evaluate agility in patients are less effective with wounded warriors, who quickly max-out their ratings on the standard six-minute-walk test. Scoville stated that there is a ceiling effect where once you get above a certain level, the standard tests do not give more information. The CHAMP (Comprehensive High Level Activity Mobility Predictor) is a test that evaluates high-end performers and allows them to look at their progress and predict to some degree their ultimate functional levels and when they are ready to move on to the next skill-sets.

During the first phase of CHAMP validity testing, 97 active duty servicemen at Fort Bragg, NC were scored. Military-specific normative scores for the tests were developed.

In phase two, wounded warriors with full range of lower-extremity limb loss were tested. (40 at San Antonio and 39 at Walter Reed).

Dr. Robert Gailey, director of the MVAMC functional outcomes research and evaluation center collaborated with Scoville and the Walter Reed rehabilitation team along with personnel at Fort Bragg; Brooke Army Medical Center, Fort Sam Houston Texas and the University of Miami Physical Therapy Department. Gailey stated that "It's been a wonderful collaboration because both groups bring different skill sets to the table. As a result, we'll have a test for the military.

We already know many who have taken the have exceeded the norms established by non-



Retired Sgt. Judas Recendez is flanked by two physical therapy students as he navigates cone while performing the T-test during Comprehensive High-level Activity Mobility Predictor (CHAMP) validation testing August 20.

amputee Soldiers tested at Fort Bragg" Gailey said. "Another contribution our soldiers are going to give is they're going to raise the bar of expectation for rehabilitation of amputees in the civilian population as well."

Gailey said before Operation Iraqi Freedom and Operation Enduring Freedom, he told people that less than 10 percent of people who lose both legs would ever be able to walk without crutches".

(Continue Page 2)

Investigators in the Miami GRECC / University of Miami Showed Persistent Reduction of Diabetes Risk Through Exercise & Healthy Diet or Metformin Treatment

In a research study that was initiated in 1996, Dr. Hermes Florez (Miami GRECC Clinical Director and Associate Professor at the University of Miami) and other members of the Diabetes Prevention Program (DPP) research group have

recently shown in a NIH-funded multi-center study that the prevention or delay of type 2 diabetes with lifestyle intervention (exercise and healthy diet leading to a 7% weight loss) or metformin therapy can persist for at least 10 years.

The onset of diabetes was delayed by about 4 years by lifestyle intervention and 2 years by metformin. This is the conclusion of an article recently published in a premier medical journal, *The Lancet*.

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Happy Holidays





Dr. Robert Gailey, physical therapy associate professor at the University of Miami and director of the MVAMC functional outcomes

CHAMPs' of agility

New assessment tool could help wounded warriors gauge improvement in rehabilitation

"I never dreamed that I'd be able to see an entire group of guys without legs be able to negotiate the obstacle course we put in front of them, and do it so well. This is unbelievable." Gailey said. "This is directly attributable to the rehab system developed within the Army.

Gailey called the opportunity to work with wounded

warriors "huge".

"I've been working with amputees for over 30 years and in the time, I've never tested such a large population of individuals who are amputees who are able to perform at the high levels that these servicemembers have," Gailey said. "That is a tribute to the prosthetic fitting that they receive and the training they receive from the

military. As a result, at the VA and in the civilian population, what they're establishing is a new level of excellence that everyone will be asked to meet or exceed.

Excerpts from article written by Craig Coleman, Stripe Assistant Editor. Please see http://www.demilitary.com/stories/082709/stripes_28214.shtml to read full article.

Dr. Leopoldo Raij Selected for Lifetime Achievement Award from American Heart Association



Leopoldo Raij, M.D., FAHA, professor of medicine and a nationally recognized hypertension researcher, has been selected to receive the 2009 Irvine Page-Alva Bradley Lifetime Achievement Award in Hypertension. The prestigious award, sponsored by the American Heart Association's Council for High Blood Pressure Research, is presented

annually to an individual who has shown a lifetime of outstanding achievements in the field of hypertension and has served as a role model through service, research, teaching and training--a description Raij exemplifies.

"Just imagine how flattered I am to receive such a prestigious national award, and it is given to me by my peers, which is so important, because my peers are the ones who can best evaluate my accomplishments," said Dr. Raij. "I'm very, very happy."

Raij has made significant contributions to the field of hypertension and how it relates to cardiovascular and kidney

disease, and has linked those basic research findings directly to clinical care. "Understanding how hypertension accelerates the development of both atherosclerosis and kidney disease is something we have worked on for many years," said Raij. "Through our early research and subsequent research, we identified certain agents used for the treatment of hypertension that can also provide better protection for the kidneys and the cardiovascular system.

More recent work by Dr. Raij and his group has demonstrated and extended the understanding of the protective

role of statins in both cardiovascular and kidney disease

Dr. Raij is recognized as a true leader in the field of hypertension research. His research has had a tremendous impact on the lives of patients with high blood pressure. The impact of Dr. Raij's contributions has been underlined by the Council for High Blood Pressure Research in the past with the Lewis Dahl Lecture Award. His latest award from the council was presented during a special ceremony at the AHA's 63rd High Blood Pressure Conference in Chicago on September 24.



AAALAC Site Visit



The **Association for Assessment and Accreditation of Laboratory Animal Care** International (AAALAC International) accredits active animal care and use programs. An active animal care and use program includes: animals; facilities; equipment; professional, technical, and administrative support; and policies and programs for institutional responsibilities, animal husbandry and veterinary care. Additionally, for a unit to be accreditable it must have a reasonable activity level relative to the space available for animal holding and use.

The AAALAC site visit took place on November 5, 2009. The final results from the site visit will be announced in March, 2010.



Research Highlights

Robert Gailey, Ph.D., P.T.

Dr. Robert Gailey, health-science researcher at the Miami Veterans Affairs Medical Center has been involved with the rehabilitation of soldiers wounded in Afghanistan and Iraq at the Walter Reed Medical Center in Washington, D.C., and Brooke Army Medical Center in San Antonio, Texas.

"One of the unfortunate outcomes of the carnage of war," Gailey observes, "is that so many men and women come home badly injured, some having lost limbs. But if there's a silver lining," he adds, "it's that the government-through the Department of Defense and the Veterans Affairs-rises to the occasion to give these wounded soldiers the best technology possible, so they can return to the lives they used to lead." According to Gailey, that means millions of dollars have been spent to improve prosthesis training. The result? "We improve prosthetic technology," he explains, "and these improvements trickle down to the civilian population."

Gailey worked with military and VA PTs to develop programs that improved amputee rehabilitation. "As physical therapists, we're developing programs and exercises to maximize the performance of prosthetics," he explains. Focusing on balance, power, and ability to perform, one 8-week exercise and physical therapy program has helped patients improve their function by between 15% and 20%. "And the program at Walter Reed and Brooke Army Medical Center has now gone far beyond the seeds I planted," he adds.

Gailey attributes his success to "very early on, learning to listen to my patients." He stresses the importance of PTs forming a partnership with their patients and going through the rehabilitation process together. When Gailey first started working with amputees, there wasn't much in the literature about rehabilitation. So, much of what he learned and the rehab programs he developed were

based on his patients' descriptions of what they felt and what therapies worked for them.

Gailey also draws great inspiration from the patients he meets. "Mike McNaughton is someone I met years ago who embodies the spirit of service," says Gailey. McNaughton had served in the military and re-enlisted after 9-11. While in Afghanistan, he lost his leg above the knee. He came back to the United States and learned to walk again--and to run. In fact, he was photographed running with former President Bush.

Wanting to continue to serve his country, McNaughton now works for the Department of Veterans Affairs helping to ensure soldiers returning from war get the best care possible. "He's one of the hundreds of other service members who - once they've gone through physical therapy - turn around and give back by returning to help others pull through. They are truly inspirational."



President George W. Bush runs with U.S. Army Staff Sergeant Michael McNaughton

"One of the unfortunate outcomes of the carnage of war is that so many men and women come home badly injured, some having lost limbs".



Mike McNaughton, injured while serving in the military in Iraq, counsels fellow amputees at the FORE Center, which helps veterans improve mobility and conducts research on how to best help their recovery.

Eva Widerström-Noga, DDS, Ph.D.

Dr. Eva Widerström-Noga gave a keynote lecture at the Congress on Spinal Cord Medicine and Rehabilitation on September 26, 2009 in Dallas, Texas which was co sponsored by the Paralyzed Veterans of America. After the lecture she moderated a workshop entitled "Assessment and classification of SCI-related pain: basic and clinical perspectives".

Pain after SCI: Mechanistic, diagnostic and translational research aspects

Most people who have sustained an SCI develop more than one concomitant and persistent pain problem that may cause significant disability and decreased quality of life. The clinical picture is typically complex with both nociceptive and neuropathic pain types. Pain following SCI is dependent on multiple pathophysiological mechanisms as well as on individual psychosocial factors.

The development of effective pain management strategies is dependent on a combination of factors including the successful translation of pain research findings into clinical settings. In order to effectively translate basic pain research regarding mechanisms and therapeutic interventions into effective clinical treatments, standardized pain assessment methods that can facilitate collaboration among centers and that can identify underlying mechanisms of pain are needed. The pain treatment should ideally be tailored to each individual's underlying mechanisms of pain as well as to important psychosocial contributors.

Because persistent pain continues to be a significant problem for those with SCI additional efforts have to be made in this area in order to accelerate the development of beneficial treatment strategies. This talk will review recent initiatives for the development of standardized pain evaluation methods and research concerning the development of novel assessment methods that may be useful for identifying underlying mechanisms of pain in persons with SCI. This talk will also discuss factors of great importance for the future development of mechanisms-based treatments and important research gaps that may present barriers to this development.





Research Highlights

Micheline McCarthy, M.D., Ph.D.

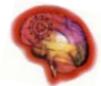


Irving Vidaurre, Dr. Micheline McCarthy, and Ricardo Martinez



The laboratory of Dr. Micheline McCarthy was featured in the recent 9th Symposium of the International Society for Neurovirology (ISNV), held at the Eden Roc Hotel, June 2nd-6th, 2009. Dr. Micheline McCarthy, along with Dr. Mahendra Kumar of the Department of Psychiatry at UM, served as co-chair of the local organizing committee for this meeting. Dr. McCarthy presented a lecture on the influence of apolipoprotein E genotype on maturing neurons exposed to HIV-1 infection. Dr. McCarthy received the President's Award from the ISNV

for her contributions to the symposium. Dr. McCarthy's laboratory, directed by Ricardo Martinez, was highlighted in the ISNV Newsletter issued at the start of the symposium. Dr. McCarthy collaborated with Dr. Ami Raval and Dr. Tony DeFazio of the Department of Neurology at UM on projects which adapted neuroscience techniques used to study cerebral ischemia to the study of HIV-1 infection in the brain. Two posters on this collaborative work were presented at the symposium as well.



Carlos Abraira, M.D.

Dr. Abraira participated in the Endocrine Society in June 2009, presenting the VA Diabetes Trial results. In August, 2009, he presented at the VA Diabetes Educators in Atlanta, comparing the VA Diabetes Trial results with recent published trials. Dr. Abraira will present at the American Heart Association in their Annual Meeting in Orlando, FL. in November 2009.



Andrew Schally, Ph.D., MDhc (Multi), D.Sc hc

On November 11, 2009 Dr. Schally presented: "Hypothalamic Hormones: From Neuroendocrinology to Cancer Therapy" at Tulane University Grand Rounds and Vascular Biology Conferences, Tulane University Health Sciences Center, New Orleans, LA

On November 18-19, 2009 at the UM Innovation Technology Showcase 2009 he presented: "Novel Antagonistic Analogs of GH-RH for Cancer Treatment" Four Seasons Hotel, Miami, FL <http://med.miami.edu/uminnovation/showcase/>

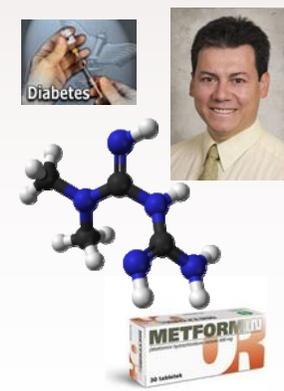
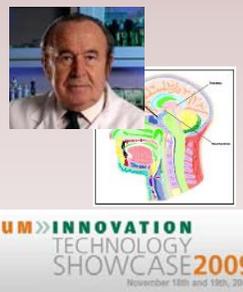
Hermes Florez, M.D., Ph.D.

Continued from Page 1

A previous report showed that DPP interventions lead to reduction of diabetes risk by 58% with lifestyle intervention and by 31% with metformin, compared to placebo. From the public health perspective, this means that 7 subjects at high-risk (with prediabetes) need to receive lifestyle intervention to prevent one case of diabetes over 3 years while for metformin the ratio is 14 prediabetics treated to prevent one case. Both interventions are cost-effective and provide a response to the epidemics of obesity and diabetes that are affecting the US population and particularly veterans. Nearly 3 out of 4 veterans are overweight or obese while 20% have diabetes.

Putting in perspective the lessons learned in this major clinical trial, one challenge is offering

DPP-like interventions in real clinical practice. Since 2006 the Miami VA Healthcare System has implemented the MOVE weight management program that aims to reduce the burden of obesity and its co-morbidities in veterans. This is done primarily through lifestyle intervention, including the Enhance Fitness program to promote physical activity in older adults. Nearly 3000 veterans are enrolled in the MOVE program and approximately one third have prediabetes. We can assume an optimistic approach on the impact that lifestyle interventions may have improving the quality of life of obese older veterans and reducing their cardio-metabolic risk and health-care costs.





Research Highlights

Eva Widerström-Noga, D.D.S., Ph.D.

In Press

Pain Symptom Profiles in Persons with Spinal Cord Injury

Cruz-Almeida, MSPH, Elizabeth R Felix, PhD, Alberto Martínez-Arízala, MD and Eva G Widerström-Noga (in press; Pain Medicine)

Persistent pain is a common consequence of spinal cord injury. A patient-specific assessment that combines both the identification of pain symptoms, which may be linked to underlying pathophysiological mechanisms and psychosocial factors, is needed for a tailored-treatment approach. The aim of the study was to define specific pain symptom profiles after spinal cord injury.

All participants underwent a neurological examination, pain history interview and measures of pain interference, life satisfaction, locus of control, social support and depression. The statistical analyses revealed three distinct groupings of symptoms or “profiles”: 1) aching, throbbing pain, aggravated by cold weather and constipation predicted by a combination of chance locus of control and lower levels of life satisfaction; 2) stabbing, penetrating and constant pain of high intensity predicted by a combination of pain interference, localized pain, powerful others locus of control and depressed mood; and 3) burning, electric, stinging pain aggravated by touch and muscle spasms predicted by pain interference.

This study suggests that identification of pain symptom profiles may be a useful component of a comprehensive assessment strategy which incorporates specific pain symptoms and psychosocial variables.



Reliability and Validity of the International Spinal Cord Injury Basic Pain Dataset Items as Self-Report Measures

Mark P. Jensen, PhD, Eva Widerström-Noga, DDS PhD, J. Scott Richards, PhD, Nanna Brix Finnerup, MD, PhD, Finn Biering-Sørensen, MD, PhD, Diana D. Cardenas, MD, MHA (in press; Spinal Cord)

The purpose of this study was to evaluate the psychometric properties of a subset of International Spinal Cord Injury Basic Pain Data Set (ISCIBPDS) items that could be used as self-report measures in surveys, longitudinal studies and clinical trials.

A subset of the ISCIBPDS items and measures of two validity criteria were administered in a postal survey to 184 individuals with spinal cord injury (SCI) and pain. The responses of the participants were evaluated to determine: (1) item response rates (as an estimate of ease of item completion); (2) internal consistency (as an estimate of the reliability of the multiple-item measures); and (3) concurrent validity.

The results support the utility and validity of the ISCIBPDS items and scales that measure pain interference, intensity, site(s), frequency, duration, and timing (time of day of worst pain) in individuals with SCI and chronic pain. The results also provide psychometric information that can be used to select from among the ISCIBPDS items in settings that require even fewer items than are in the basic dataset.



Howard J. Willens, M.D.



Publications

Adherence to Appropriateness Criteria for Transthoracic Echocardiography: Comparisons Between a Regional Department of Veterans Affairs Health Care System and Academic Practice and Between Physicians and Mid-level Providers.

Howard J. Willens, Orlando Gómez-Marín, MSc, PhD, Alan Heldman, MD, Simon Chakko, MD, Cheryl Postel, RDCS, Tabira Hasan, BS, and Fared Mohammed, CCT, Miami, Florida

We compared adherence to appropriateness criteria for transthoracic echocardiography in a Veterans Administration Medical Center (VAMC) and an academic practice and, within the VAMC, between physicians and mid-level providers. We reviewed 201 outpatient echocardiograms performed in the laboratory of an academic practice and 424 outpatient and inpatient studies performed at a VAMC. Echocardiographic examinations requested for indications addressed in the criteria were considered classified, and those for indications not addressed were considered unclassified. Classified studies were further rated as appropriate or inappropriate. Of 625 echocardiograms reviewed, 99 (16%) were unclassified. Approximately 80% of the indications for these could be assigned to 4 categories. Of the remaining 526 echocardiograms, indications were appropriate in 481 (91.4%) and inappropriate in 45 (8.6%). Among classified outpatient studies at the VAMC, mid-level providers requested significantly more studies for inappropriate indications than physicians (16.0% vs 7%, $P = .024$). There was no significant difference in the frequency of outpatient studies requested for inappropriate indications by VAMC and academic practice physicians (7.0% vs 9.5%, $P = .558$). The appropriateness criteria perform reasonably well at evaluating variations in use of echocardiography between health care systems and providers. The large majority of studies are requested for appropriate indications, although there is room for improvement. **Journal of the American Society of Echocardiography 2009-Jul; vol 22 (issue 7) : pp 793-9**

Editorial Comment: **“Two Years of Appropriateness Criteria for Echocardiology: What Have We Learned and What Else Do We Need to Do?”** Nicole m. Martin, MD, and Michael H. Picard, MD, FASE, *Boston, Massachusetts* **Journal of the American Society of Echocardiography July 2009; vol 22 (issue 7): pp 800-2**



Research Highlights

Geriatrics Research Education & Clinical Care

VA & NIH Grant and Career Development Award Study Sections

Dr. Paul Schiller, GRECC Investigator, a member of the VA ENDO-B Merit Review Board took part in their recent review session. This review panel reviews applications involving research on skeletal formation and repair, and bone and cartilage metabolism.

Dr. Guy Howard recently participated as a member of the VA non-Clinician PhD Eligibility Committee that meets to review applications from non-clinician PhD scientists for eligibility to submit a VA Merit Review application.

Dr. Howard participated as a member of the NIH Skeletal Biology Development and Disease (SBDD) Study Section, Center for Scientific Review in reviewing applications for NIH funding.

Dr. Carlos Perez-Stable served as a Scientific Reviewer for the DOD Prostate Cancer Research Program (PCRP) online review of Idea Award 2 page pre-applications-Endocrinology Section.

Dr. Bernard A. Roos is president of the newly established Florida Chapter of AFAR (Am Federation for Aging Research) and **Dr. Bruce Troen** is on the Board of that new organization that provides peer-reviewed funding for research on aging and age-related diseases.

American Federation for Aging Research



National & International Meetings

Two posters describing work from the GRECC were presented July 8-11, 2009, at the annual meeting of the International Society for Stem Cell Research in Barcelona, Spain.



“Marrow-isolated adult multilineage inducible (MIAMI) cells are neuroprotective in an *ex vivo* model of ischemia”. Elisa Garbayo, Kevin Curtis, Gianluca D'Ippolito, Claudia Montero-Menei, Guy A. Howard, Ami Raval, Miguel Perez-Pinzon, Paul C. Schiller

“Marrow-isolated adult multilineage inducible (MIAMI) cells protect against peripheral vascular ischemia in a mouse model”. Gianluca D'Ippolito, Amirali Azar-Rahnama, Alurdes A. Gomez, Roberto Vazquez-Padron, Teresita Reiner, Carlos Perez-Stable, Bernard A. Roos, Si Pham, Paul C. Schiller.

Dr. Bruce Troen was a Visiting Professor at the Nepean Clinical School of the University of Sydney Medical in Australia this July. Dr. Troen presented at Medical Grand Rounds on "Vitamin D: Skeletal Health and Beyond (a stealthy epidemic)" and spoke at the Division of Aging Grand Rounds on "Frailty Syndrome: Assessment, Correlates, and Approach". In addition, Dr. Troen was the keynote speaker at the Consensus Conference on the Treatment of Osteoporosis in Long Term Care in Australia with a talk entitled "Osteoporosis in the Nursing Home: What is the best approach?"

Dr. Troen attended the annual meeting of the American Society for Bone and Mineral Research in September in Denver, Colorado and also attended the Amgen Geriatric Advisory Board Meeting in New York, New York in October, which was an invitation only event for academic geriatric leaders in the field of osteoporosis.

Dr. Howard attended the annual meeting of the National Associations of VA Foundations for Research and Education in Chicago, IL, as a member of the Board of Directors of our local South Florida VA Foundation for Research and Education.

Dr. Howard attended a meeting in VACO of all the GRECC Associate Directors for Research. He spoke on the research progress and sought collaborators for our Miami GRECC.

Local UMMSM Meetings

Dr. Howard presented Grand Rounds in October for the Division of Endocrinology, Diabetes, and Metabolism in the Department of Medicine. He spoke on "Interactions Between Hepatocyte Growth Factor and 1,25-diHydroxyvitamin D on Stem Cells".

Dr. Troen spoke on "Prolongevity Compounds and Aging Bone" at the Department of Medicine Research Conference, University of Miami Miller School of Medicine this October.

Status of the VA Central IRB



The Office of Research and Development (ORD) Office of Program for Research Integrity Development & Education (PRIDE) has set up a VA Central Institutional Review Board (IRB) under the direction of K. Lynn Cates, M.D.. The stated purpose of the VA Central IRB is to improve human research protections in VA multi-site studies by ensuring consistent expert ethical and scientific review as well as ensuring that local issues are addressed and to enhance efficiency of IRB reviews. The CIRB has been functioning since August 2008 and has reviewed 22 studies involving 150 sites. The Miami VAHCS has 1 study whose IRB of record is the CIRB and one more (CIRB-reviewed) study is currently in the process of being approved locally for study initiation. For these two studies, all IRB correspondence goes to the CIRB, coordinating with our local Research Office.

Projects that have been recommended by the VA funding department head for review by CIRB are submitted by the Principal Investigator (or sometimes called the Study Chair). This application is designed to provide the CIRB with information about the protocol and covers the basic requirements for IRB review and approval. These basic requirements include the Informed Consent document, the HIPAA Authorization form as well as any recruitment materials that may be used at the different study sites. Having the CIRB review and approve these items for all the study sites will eliminate the past issues with multi-site studies having different Informed Consent documents for each one of the study sites.

The CIRB will also review the applications submitted by all of the local site investigators. (Local site investigators are the investigators recruited at each of the different study sites that wish to partici-

pate in the multi-center study.) It is the responsibility of the Principal Investigator (Study Chair) to identify and recruit each of the site investigators.

It is the responsibility of each site investigator to complete and submit the Local Site Investigator package to the Principal Investigator (Study Chair). This Local Site Investigator package must include the approvals of that Investigator's Service Chief, as well as approval by the ACOS/R&D. It is the Principal Investigator's (Study Chair's) responsibility to review and submit all Local Site Investigator packages to the CIRB.

A quick overview of the process for submission and review of a project to the CIRB has been provided above. However, if you are interested in being a local site investigator for a VA-sponsored multi-center trial, please contact the Research Office for more detailed information and guidance.

South Florida VA Foundation for Research and Education, Inc.



The Foundation wants to congratulate Dr. Rajj on receiving a "Lifetime" achievement award from the American Heart Association. Also congratulations to Dr. Gailey on the recognition he and his research team have received for its work on the Comprehensive High-level Activity Mobility Predictor (CHAMP) project. This research will assist in enabling service members with prosthetics to remain on active duty.

Sanofi-Adventis is reaching out to all the VA NPC like Novartis to develop long term relationships with VA investigators. It has various Cardiovascular, Cancer, Diabetes and Multiple Sclerosis studies in the pipe-line. The Foundation will circulate information as it is obtained.

NIH is changing the shortened SF424(R&R) submission format effective beginning with January 25th submissions. The **Grants Writers' Seminar and Workshop** group has published a workbook specific to the change to NIH submissions in general. It is a great resource. The Foundation will invest in Investigators planning to submit their NIH through the Foundation by providing them this workbook.

Master CRADAs

Amgen
Astellas
Astrazeneca
Avigen
Bristol-Myers Squibb
Genentech

Regenesis Biomedical
Roche
Sanofi-Aventis
Sucampo
Takeda

VA Master CRADA for Phase III & IV CT

Miami VA

Master CRADAs executed:

GSK - CT Phase III/IV
Pfizer - PII Educational
Ideal Life - Device
Idenix - CT Phase II

Local CRADAs under negotiation:

Novartis - PII,
Bayer - CT Phase III
Ogenix - Device

Jackson
Tunuguntla
Dang
Mendes

Rajj
Quartin
Rothenberg

Awarded:

Florez HFSF Enhanced Fitness renewed for second year

Submitted:

Jackson NIH ROI IPF Rehabilitation and Oxidant Stress

Yu NIH ROI Impact of Aging on Progenitor Cell Homing

Yu NIH R2I Role of CXCR4 on Neutrophil's contribution to Atherosclerosis

Llorente DOD TBI-Rivastigmine

Dang DOD TBI-Comparative Effectiveness of Telerehabilitation for OIF/DEF returnees

Carlos Abaira, MD

Endocrine, Polypeptide and Cancer Institute

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Endocrine, Polypeptide and Cancer Institute

Chapters:

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GRECC

Manuscripts accepted for publication

Ruiz JG, Qadri SS, Karides M, Castillo C, Milanez MN, Roos BA. Fellows' Perceptions of a Mandatory Reflective Electronic Portfolio in a Geriatric Medicine Fellowship Program. *Educational Gerontology* 2009 - *in press*

Recent publications:

Fujimura RJ, Reiner T, Ma F, Phillips V, Dickson DW, Roos BA, Howard GA, Perez-Stable C. Changes in the expression of genes associated with intraneuronal amyloid beta and tau in Alzheimer's disease, *J Alzheimer's Dis* Sept 11, 2009 [Epub ahead of print].

Levis S, Cherniack EP, Florez H, Roos BA., Troen BR. Vitamin D Supplementation In Older Persons: Benefits And Requirements, *Future Medicine-Aging Health* 5:701-709, 2009.

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Huang CY, Pelaez D, Bendala JD, Barcia-Godoy F, Cheung HS. Plasticity of stem cells derived from adult periodontal ligament. *Regen Med* 4:809-821, 2009.

Knowler WC, Florez H, et al. 10-year follow-up of diabetes incidence and weight loss in the Diabetes Prevention Program Outcomes Study. *Lancet* 374:1677-86, 2009

**Drs. Ivonne Schulman, Ming-Sheng Zhou, & Leopoldo Raij**

Drs. Ming-Sheng Zhou, Ivonne Schulman, and Leopoldo Raij have recently published in the Journal of Hypertension the study entitled "Vascular Inflammation, Insulin Resistance, And Endothelial Dysfunction In Salt-Sensitive Hypertension: Role Of NFκB Activation". The group has also recently published in the Journal of Cardiovascular Pharmacology and Therapeutics the study entitled "Role of c-June N-terminal kinase in the

Zhou M-S, Schulman IH, Chadipiralla K, Raij L. *Role of c-June N-terminal kinase in the Regulation of Vascular Tone. Journal of Cardiovascular Pharmacology and Therapeutics* 2009 (in press)

Zhou M-S, Schulman IH, Raij L. *Vascular Inflammation, Insulin Resistance, And Endothelial Dysfunction In Salt-Sensitive Hypertension: Role Of NFκB Activation. Journal of Hypertension* 2009 (in press)

Research Service Offers Special Presentation

Research Service hosted a special presentation entitled "Outcomes Research Informatics: Helping Investigators Collect & Publish Data" on November 24 in the T.C. Doherty Auditorium. Research investigators and study coordinators were invited. Dr. John Putzke, Founder, President and CEO of Science TRAX, LLC, (a research solutions company that provides an industry leading web-based software tool) gave a talk focused on the software development efforts designed to integrate research data management with the workflow and functionality associated with the entire dissemination process. These efforts offer an opportunity to dramatically change and improve the role of the investigator and increase research productivity.

StudyTRAX software completely integrates study management (e.g., create forms, run a study, collect data) with the process of generating all types of academic output (e.g., creating grants, manuscripts, posters, etc.). From a research center or organizational perspective, StudyTRAX is designed to reduce research IT infrastructure costs by eliminating duplicate development and enabling non-technical users, increase academic productivity through direct integration of the manuscript generation process and ensure research data is accessed through a secure environment

If you were unable to attend the presentation and are interested in the StudyTRAX software please view the demo (<http://www.sciencetrax.com/Home/swf/LaunchFlash.aspx?title=StudyTRAX+Overview&flashFile=AutomatedDemo25.swf>) If you need additional information, please contact the Research Service Office at extension 3722 or 3179.

**FEEDBACK**

Faculty and staff submissions can be e-mailed to the Office of Research Communications at iperez4@med.miami.med Isabel.Perez2@va.gov

Editor

Isabel Perez

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