



# CM&R

Community Medicine & Research Newsletter

Summer 2016

## Message from the Director

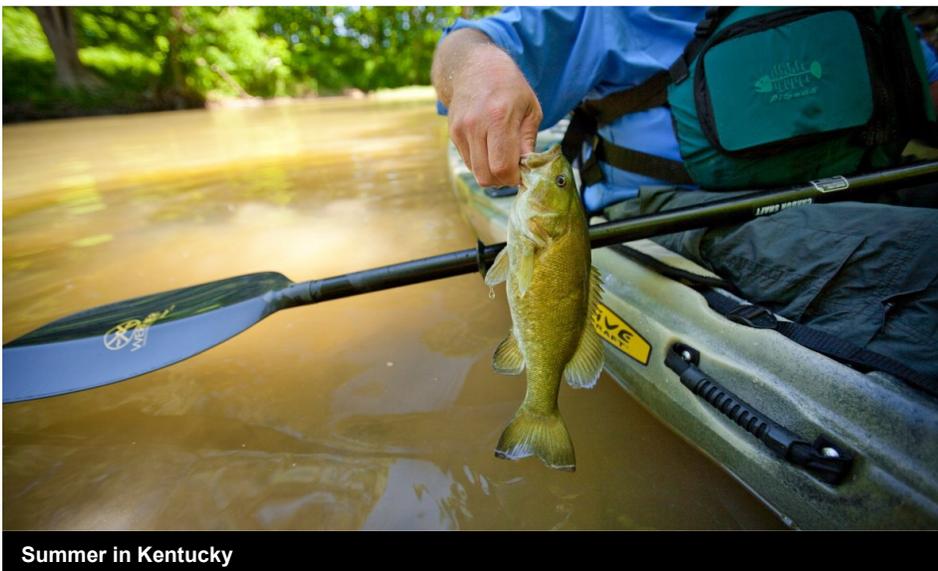
Summer is a time of relaxation and reflection for many. It gives us a time to make special memories with our family and friends as we set out for exciting vacations. While many of us in the Division of Community Medicine and the Kentucky Ambulatory Network (KAN) took time to rest and recoup, we also remained active with our research endeavors. Our team participated at the regional Appalachia Research Day in Hazard, KY and served on a discussion panel for the Markey Cancer Center Affiliate Network conference here in Lexington, KY. In addition, our team attended the Agency for Healthcare Research & Quality (AHRQ) Practice Based Research Network conference in Washington, DC.

One of our major efforts this summer has been the kick off of our Terminate Lung Cancer (TLC)-2 study, funded by the Association of American Medical Colleges and the Donoghue Foundation. We were excited to hire our new practice facilitator and coordinator for the project, Ashley Shelton, who joined our team this June. This summer has been focused on developing data infrastructure and management capabilities with our partner, St. Claire Regional Medical Center, and in working with the Northeast AHEC to plan for the upcoming annual Lung Cancer Symposium on September 16, 2016 in Morehead, KY.

Our original TLC study focused on implementing a community awareness campaign around the new lung cancer screening guidelines in Eastern Kentucky. Our initial results showed significant uptake in the number of low-dose CTs that were performed in our 2 intervention regions. We are in the process of developing a manuscript of these exciting results for a peer-reviewed journal. We are always humbled and take pride in conducting research that impacts the populations that we practice in and serve. Moreover, we are fortunate to have so many partners engaged in the various research projects that we conduct throughout Kentucky. For that, we thank you!



Roberto Cardarelli, DO, MPH, FAAFP  
Director, KAN  
Professor and Chief of Community Medicine



Summer in Kentucky

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## Invited Speaking Engagement at Appalachia Research Day and the Markey Cancer Center Network Conference

Dr. Cardarelli served as an invited speaker to the 2016 Appalachian Research Day hosted by the Center of Excellence for Rural Health in Hazard, KY. He was able to share preliminary results of the Terminate Lung Cancer (TLC) study to

community stakeholders throughout Appalachia. Dr. Cardarelli joined a distinguish list of speakers engaged in research impacting Eastern Kentucky. He was also able to unveil for the first time the significant impact that the TLC study had on increasing uptake of low-dose CTs for lung cancer screening in the 2 intervention regions.

Dr. Cardarelli also participated on a panel discussion at the UK Markey Cancer Center Affiliate Network conference in Lexington, KY. He shared the panel with distinguish leaders in lung cancer screening and treatment throughout the state and provided insight and perspectives about lung cancer screening and primary care providers. This conference had attendees throughout the state of Kentucky who serve as partners and affiliate with Markey Cancer Center.



## Drs. Hustedde and Kingery Receive Abraham Flexner Master Educator Awards

Kudos to Dr. Hustedde and Dr. Kingery for receiving the Abraham Flexner Master Educator awards for the 2015 academic year! These awards are provided to individuals exemplifying excellence in education and teaching at the University of Kentucky College of Medicine.

Dr. Hustedde serves as the Director of Community Medicine Education for the Division of Community Medicine in the DFCM. She has led the development of various community medicine educational activities that include both the undergraduate medical school program and the family medicine residency program in Lexington, KY. She has also been a course director for the Salvation Army elective and she determines the health and community medicine principles that are taught.

Dr. Kingery was recently promoted to Associate Professor in the Department of Family & Community Medicine and serves as a core faculty member at the Eastern Kentucky Family Medicine Residency. He is also the medical director/CEO of North Fork Valley Community Health Center in Hazard, KY.

## KAN Advisory Board



From Top to Bottom:

Gerry Stover  
David Bolt  
David Greene, MD  
Stephanie Moore, BHS, MPA  
Brent Wright, MD, MMM  
Marshall E. Prunty, MD

# Kentucky Ambulatory Network Convocation of Practices a Success!

Our first annual KAN Convocation of Practices was held at the Hilary J. Boone Center located on the University of Kentucky's campus. A private dinner with free CE (through the Northeast Area Health Education Center (AHEC)) for our members from across the state gave a comfortable atmosphere to communicate KAN's efforts and give the opportunity for members to participate and share their opinions. Brief presentations were given for current KAN studies to showcase the collaborative and translational research that is being conducted in primary care practices. As a PBRN that is devoted to patient-centered, population health research, this event demonstrated the success we have had and illustrated the opportunity KAN has for future impact. It was an evening filled with great food and drink, conversation and collaboration.

Among the presentations were the results of the Terminate Lung Cancer study, the Bridges to Home study, the Central Appalachia Inter-professional Pain Education Collaborative (CAIPEC) project, and Dr. Freeman's Pharmacists and Physicians Opioid Prescribing (POPS) study.

## 1st Annual Community Medicine Summer Research Fellowship (SRF)

The DCM faculty inaugurated a new summer research fellowship program this year designed to encourage current first-year medical students to engage in research/scholarship under the direction of a department faculty member.

This summer, we accepted Erica Schuster to participate in the 8-week program, working under the guidance of her mentor, Dr. Lars Peterson. The results of her work, titled "*Residency Characteristics Associated with Population Health Management Preparedness*," were recently presented in a faculty department meeting.

Erica's summer project was impressive both in terms of how much she was able to accomplish and for the high caliber of the resulting findings, which she and Dr. Peterson are currently preparing for a journal submission. Using ABFM certification examination survey data, Erica's analysis of resident's sense of preparedness to perform population health management showed a significant correlation with international medical graduate status, but interestingly little relation to rurality of a family medicine residency program.

We are encouraged that other mentors and their students at UK will take advantage of the CM-SRF opportunity, using the student stipend it offers to promote work in their areas of interest in community/primary care-based research!

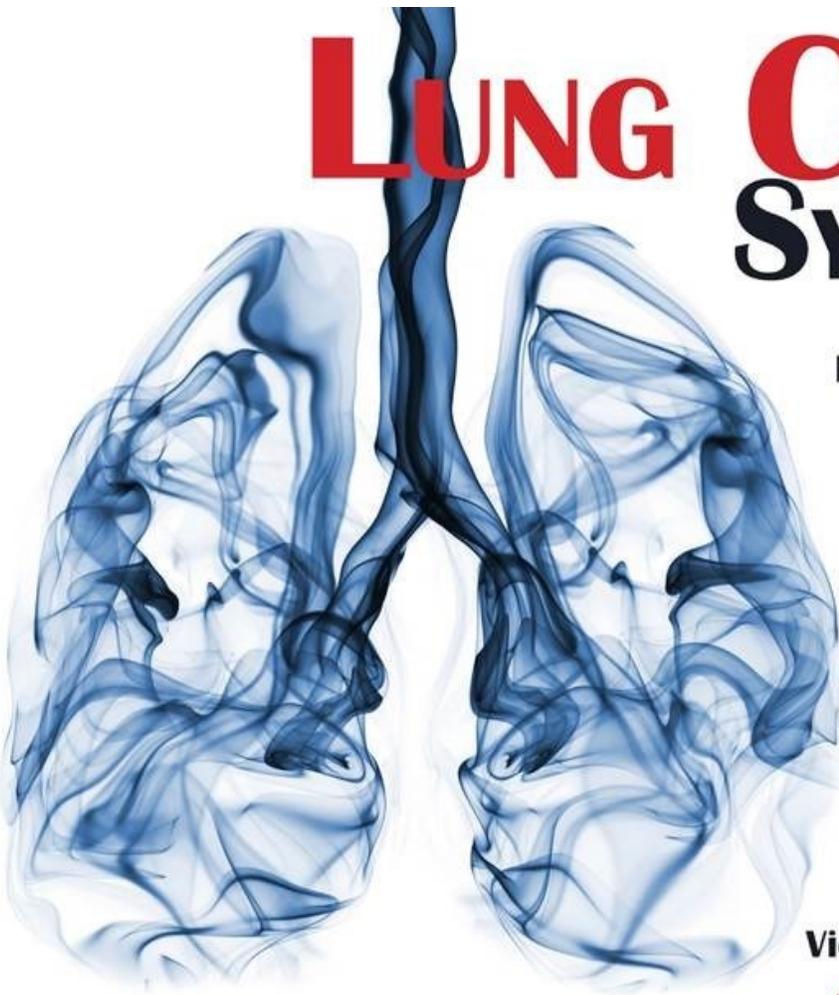
Join Us at the...

# Annual Lung Cancer Symposium!

September 16, 2016

Center for Health Education & Research  
Morehead, KY

- Free CE and Lunch
- Distinguished speakers



# LUNG CANCER SYMPOSIUM

**FOR HEALTH CARE PROFESSIONALS**  
9:00 am - 4:00 pm

Free Continuing Education CEUs

**FOR COMMUNITY MEMBERS**  
10:30 am - 2:15 pm

Gain valuable information on lung cancer screenings, health effects of e-cigarettes, and tips to quit smoking.

View agenda and register at

[WWW.NEAHEC.ORG/LSC](http://WWW.NEAHEC.ORG/LSC)

## SEPTEMBER 16, 2016

Center for Health Education & Research  
Morehead, KY



## **Drs. Krishna Syamala and Aneeqa Idrees Win First Place in Appalachia Research Day Poster Competition**

Led by community faculty and pulmonologist Dr. Firas Koura, and presented by the Eastern Kentucky Family Medicine residents Drs. Syamala and Idrees, the team studied the impact of implementing guidelines to prevent COPD exacerbations on hospital readmission rates. Through the maximization of preventive services and optimizing medication management for COPD patients, the team found a reduction from 21.4% to 10.5% in a cohort of patients with an index admission for COPD at Appalachia Regional Hospital in Hazard, KY.

Drs. Syamala and Idrees presenting their finding at Appalachia Research Day on May 18, 2016 and won first place in the poster competition! Congratulations!

## **East Kentucky Family Medicine Residency surpasses national compliance in 2015-2016 ACGME Resident Survey**

Recognition goes to the UK Department of Family & Community Medicine's East Kentucky Family Medicine Residency (EKFM) for the exponential improvements it has made over the past year. The ACGME Resident Survey assesses family medicine resident perceptions across the US in the area of duty hours, faculty, evaluation, educational content, resources, and patient safety and teamwork. The EKFM surpassed mean scores for compliance in 4 of the 5 listed core areas, while approximately meeting national average in one core area.

Such accomplishments are made through the dedicated work of the faculty, leaders, and staff in the EKFM program. These individuals include Dr. Stacey Johnson (program director), Dr. Wanda Taylor (associate program director), Dr. Jonathan Piercy (faculty), Dr. Joe Kingery (faculty/medical director), Dr. Fraan Hughes (faculty), and Dr. Hobie Dotson (faculty). None of this would be possible if it were not through the dedication of all the staff, especially EKFM program administrator, Heather Pennington. Congratulations to the Hazard EKFM team!

# ***HIGHLIGHTS:* FAMILY MEDICINE RESIDENT RESEARCH PROJECTS**

## **Batty for Baclofen: An Acute Baclofen Withdrawal Encephalopathy**

*Department of Family & Community Medicine,  
University of Kentucky Rural (Morehead) Program  
University of Kentucky, Lexington, KY*

### **Background:**

Baclofen is a GABA agonist and prevalent centrally acting antispasmodic. Providers are unaware about acute oral baclofen withdrawal even though various case reports describe rebound spasticity, rhabdomyolysis, hallucinations, fever, seizures, and rarely death with abrupt oral and intrathecal cessation.

### **Case:**

68 year old female presented to emergency room with altered mental status, increased spasticity of upper extremities, insomnia, and hallucinations for 48 hours. Her medical history was significant for progressive multiple sclerosis for 18 years, with normal cognition, moderate function of upper extremities and current confinement to motorized wheelchair. She was recently moved to a nursing facility for continued care. At presentation patient was disoriented to place and time with audiovisual hallucinations, speech was highly pressured, poorly discernible, and whispering in tone and had athetotic movements of her extremities. Workup included unchanged MRI & CT from baseline, nonepileptiform EEG, and benign laboratory evaluation (CBC, CMP, ammonia, CK, pan culture). Nursing facility reported abrupt cessation of chronic large dose of oral baclofen (120 mg/day) few days prior to admission. Patient did not show any improvement with lorazepam. Hence, Baclofen was resumed at 10mg TID at time of admission with mild symptom improvement within 24hr. Then Baclofen was increased to 30mg QID with sizeable improvement. Mental status returned to baseline and pressured speech, tremors, fine motor coordination gradually improved. Audiovisual hallucinations also subsided and, by hospital day #4, patient was stable for discharge. Baclofen had been stopped prior to admission due to expense (\$250/month), so a dose adjustment to 30mg QID was made to decrease the out of pocket expense for patient and family, at \$40/month. At 1-week follow up the patient reported feeling much better.

### **Discussion:**

Our patient suffered acute withdrawal within few days of discontinuation of high doses of baclofen. A slow taper of the medication under medical supervision over many months was highly recommended if drug was to be discontinued in future.

### **Conclusion:**

In patients with such life threatening withdrawal, careful coordination with pharmacy and nursing facility for continual access to the medication and education regarding the necessity of indefinitely continuing baclofen to avoid withdrawal is important.

# ***HIGHLIGHTS:* FAMILY MEDICINE RESIDENT RESEARCH PROJECTS (cont.)**

## **Using Patient Education to Improve Hypertension in Rural Family Medicine Clinics**

Dennison, M; Murphy, K; Ramey, A  
*Department of Family & Community Medicine,  
University of Kentucky Rural (Morehead) Program  
University of Kentucky, Lexington, KY  
St. Claire Family Medicine Osteopathic Residency Program,  
St. Claire Regional Medical Center, Morehead, KY.*

### **Background:**

1 of 3 U.S. adults have hypertension (HTN), yet only 81% with HTN are aware of their diagnosis. Among these, 75% are treated with only 53% being controlled. Appropriate hypertension management is multifaceted, requiring lifestyle modification, dietary changes, and frequently, pharmaceutical intervention. We believe education is paramount for compliance and successful management with each treatment modality employed.

### **Project Question/Hypothesis**

Can clinical processes that increase the delivery of patient education improve hypertension control in rural family medicine clinic patients?

### **Methods**

We conducted chart reviews on patients from 2 rural family medicine clinics-one in Morehead, KY and one in Sandy Hook, Ky. Percentages were calculated for patients in each clinic, with blood pressure at goal (<140/90) and for those that weren't at goal. We also determined whether or not any intervention was completed. After our initial review, we met as a group and decided to use a patient education delivery intervention to improve blood pressure control in our rural clinics. This intervention focused on educating patients on what their blood pressure should be, why it's important, and how to improve it. The education material used was the patient education module for hypertension available in the EHR and we made sure this information was easily accessible in the EHR on the short lists. Dissemination was focused on educating providers in the clinics to use the patient education material in the EHR for all patients with a diagnosis of hypertension. The project end date was August 1, 2016. We are currently conducting post-chart reviews to assess whether our intervention improved the study outcomes of our patients.

### **Conclusion**

This ongoing study aims to improve hypertension outcomes through impacting clinic processes focused on point-of-care patient education delivery.

# Get Engaged with KAN and the Division of Community Medicine

We often hear the question, “We are primary care, why should we be involved with 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 the medicine 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, and may even benefit you in your daily practice. **We welcome your ideas and engagement with the numerous resources and opportunities that we offer!**

## Contact Us

Give us a call for more information about our program and research.

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Visit us on the web at  
[www.familymedicine.med.uky.edu/family-medicine-about-division-community-medicine](http://www.familymedicine.med.uky.edu/family-medicine-about-division-community-medicine)

Community. Medicine. Research.

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