

CINCINNATI PEDIATRIC RESEARCH GROUP
Minutes of the Meeting
April 16, 2002

IN ATTENDANCE:

Jeralyn Bernier, MD, MPH	Evelyn Joseph, MD
Kim Daly, MD	Sandy Mendel, MD
Jim Davis, MD	Willie Ng, MD
Tom DeWitt, MD	Randall Schlievert, MD
Emanuel Doyne, MD	Bob Siegel, MD
Michael Gerber, MD	Mary Allen Staat, MD, MPH
Catherine Hughes, MD	Therese Zink, MD, MPH
Jill Huppert, MD	

I. ADMINISTRATIVE

1. Meeting reminders:

- PAS May meeting in Baltimore, MD
Dr. Siegel will be presenting the Otitis Media abstract in Baltimore on Monday, May 6 at 4:30 p.m. The abstract was selected to be presented under the Presidential Plenary Session. It was one of the best studies submitted to the APA. This is a great honor for the CPRG. Dr. Doyne will be chairing a Special interest group for community based physicians on Tuesday, May 7.
- Regional “network of networks” meeting at Cincinnati Children’s Hospital, July 1st. Guest speakers Mort Wasserman, MD, Kurt Stange, MD and David McCormick, MD are expected.

2. Dr. Bernier suggested that CPRG members consider research themes that the group might be interested in taking on. She will send out an e-mail with some suggestions. This is also attached. AHRQ and other granting agencies are looking for networks to take leadership in certain areas such as patient safety, preventive services, information technology in primary care, improving clinical practice. We can build upon these areas, develop an area of research expertise. Please give us your thoughts.

3. Randy Schlievert from the Mayerson Center for Safe and Healthy Children joined our group tonight. Randy is doing a fellowship in child abuse and will be returning to Toledo in July.

4. Dr. Bernier reported that we are submitting a grant May 14 to AHRQ for funding CPRG infrastructure development. If funded, the CPRG would receive \$50,000 each year for two years to develop electronic communication tools that would facilitate office-based research. She passed out a computer usage survey regarding any problems the group has had and how we can overcome them.

One application of the new infrastructure is to collect and feed back data about clinical practice in real-time. We could do a weekly or biweekly computer survey that would take about 10-15 minutes describing different aspects of practice for research purposes, and also surveillance of community symptomatology for epidemiologic purposes. This surveillance project is described further below.

5. Parents for the Community Advisory Board—If you have parents that may be interested in advising our group and can meet for a quarterly lunch here at Children’s, please let Debbie or Dr. Bernier know.

6. Most present stated they would rather receive minutes by e-mail. If you have a preference, please let us know.

II. STUDIES UNDERWAY

1. ADD/ADHD

We are approved for funding from the AAP for this project. Drs. Doyne and Davis hope to start data collection from CPRG practices around July 1st. The first phase of this study has approximately 48% responses from two mailings to the community providers. We will do either a third mailing or telephone surveys of non-responders to improve our response rate to over 60%.

2. PRINS

The PRINS study is still in progress. We are in the 11th week of collecting data. If you are interested in doing the PRINS study, please contact Dr. Siegel at 209-0124 to sign up. The summer weeks from July 1-August 26, 2002 still have openings if you have not participated.

III. NEW/PROPOSED STUDIES

1. Surveillance Project

Michael Gerber, MD and Mary Allen Staat, MD, MPH joined our group to talk about the 'surveillance project'. This will have applications both to local epidemiology and to bio-terrorism surveillance. The events of the past year have heightened the concern for strengthening links between front line providers and public health infrastructure, and we can serve a role as sentinels for changes in community symptomatology while we also serve our own purposes of enhanced interactions and data collection. The immediate relevance could be to detect infectious diseases in the community (e.g., influenza, shigella) and disseminate management information before epidemics develop. Dr. DeWitt mentioned that one of the important mechanisms of bio-terrorism surveillance is early identification of unusual peaks in symptoms. We may have to start with a simple question like "have you seen anything out of the ordinary coming through your office this week?" to get used to the survey system. We can layer on other sophisticated or more complex screening questions once the program is in place. Dr. Mendel is interested in a listserv or bulletin board for providers to review one another's clinical impressions in real time. We plan to develop a program with the help of experts in the area to analyze data and give real time feedback.

3. Obesity Study

Dr. Mendel is circulating a draft of her proposal outline for phase one of the study to evaluate obesity diagnosis and current management. She invites input from other CPRG members on this project. Dr. Joseph is working on developing an intervention to prevent obesity with other community experts.

4. Children's Self-reporting of Asthma Symptoms

Dr. Siegel reminds the group of a funded study of childrens' abilities to report their own symptoms, to begin in the coming winter. You will be hearing more about this study as it gets closer to our time to collect data.

5. Domestic Violence

Dr. Zink presented a proposal to interview mothers regarding domestic violence issues in community offices. Discussion of timing and location for these interviews are underway, and her survey instrument is attached. There is a \$20.00 cash incentive for mothers interested in participating in the study. She hopes to interview 400 mothers over a period of one year starting in May or June.

Attachments: Obesity draft proposal, Domestic Violence instrument, Themes list