

June 2021

Message from the Director Mark Holmes, PhD



June marks Pride Month, an opportunity to stand in solidarity with our colleagues, family, and friends in the LGBTQ

community. It's important to remember that the LGBTQ population was not always considered a priority population by AHRQ; the enabling legislation (the [Healthcare Research and Quality Act of 1999](#)) did not specifically include LGBTQ as a priority population. Over the decades since, AHRQ has included LGBTQ as a population of interest in specific reports, but the list of priority populations remained unchanged from the 1999 list (low-income, minority, women, children, the elderly, people with special health-care needs, and inner-city and rural).

However, in this year's Executive Order 39895 (Advancing Racial Equity and Support of Underserved Communities Through the Federal Government), President Biden specifically identified LGBTQ people as an underserved community. This led to an updated [AHRQ Policy](#) last month that expanded the list of priority populations to include the LGBTQ community. Personally, I was surprised that its inclusion was so recent; it is a reminder that health services research has a lot of work ahead of it on advancing equity.

Advancing equity is about providing everyone the opportunity to achieve their fullest health potential and not disadvantaging any group (whether based on race/ethnicity, sexual orientation, gender identity, etc.) from achieving this. Sheps has a long tradition of conducting research and synthesizing evidence to advance health equity.

Studying Type 2 Diabetes & Food Insecurity

As a primary care doctor, Sheps Center researcher Seth A. Berkowitz, has seen many patients with food insecurity—insufficient or uncertain access to enough food for an active, healthy life.



For patients with Type 2 diabetes, food insecurity can make management both less effective, as it presents a barrier to enacting healthy lifestyle change, and more dangerous, as it increases the risk for hypoglycemia.

To address this common problem, Dr. Berkowitz has teamed up with Sheps Center Researcher Dr. Kathie Ricks and collaborators at Massachusetts General Hospital (led by Linda Delahanty) and Community Servings (led by Jean Terranova) to conduct two studies that address food insecurity for people with Type 2 diabetes and food insecurity.

Community Servings was founded in Boston in 1990 to provide home-delivered meals to individuals living with HIV/AIDS. The organization has since grown into a regional program serving medically tailored meals, providing nutrition education, and supporting advocacy. The organization's work impacts health policy, and in 2020 they served their 9 millionth meal.

These studies will address two different questions related to food insecurity and diabetes. The first study, called FAME-D (Food As MedicinE for Diabetes) will compare delivery of medically tailored meals along with lifestyle intervention to a healthy food subsidy. Study outcomes are hemoglobin A1c and patient-reported outcomes including food insecurity, depressive symptoms, and health-related quality of life.

The second study includes participants

In this newsletter, we will highlight such research in the areas of race/ethnicity and socioeconomic status, among others, by profiling some of the clinical research conducted at the Sheps Center. Clinical research, including how patients access clinical care, is a key component of health services research, and the Sheps Center has a long history in this area. This newsletter highlights ADAPTABLE, a large pragmatic trial on aspirin dosing (spoiler alert: 81 mg is as effective as 325 mg); work by a primary care research fellow with Black Americans on hypertension; and developing evidence through practice-based research networks and systematic reviews – two of the larger projects in the Center.

Plus, we catch up with Dr. Gordon DeFriese, director of the Sheps Center from 1973 to 2000. Gordon is always inspiring and is still giving back to the Center after 50 years. His legacy will continue for decades; this is the Center that he built. I hope you enjoy reading these updates as much as I did.

with food insecurity, Type 2 diabetes, and HIV. Given the chronic cardiometabolic effects of HIV and its treatment, diabetes has emerged as a key health threat for those living with HIV. This study, called FAME-H (Food As MedicinE for HIV and diabetes) will compare receipt of standard medically tailored meals to a program of medically tailored meals combined with intensive lifestyle intervention, with study outcomes including hemoglobin A1c, weight loss, and patient-reported outcomes.

Research News

NEJM Publishes ADAPTABLE Results

The Sheps Center's work on the [ADAPTABLE Aspirin Study](#) was published this month in *The New England Journal of Medicine*. ADAPTABLE stands for Aspirin Dosing: A Patient-centric Trial Assessing

Benefits and Long-Term Effectiveness. The purpose the study was to find the best dose of aspirin, 81 mg or 325 mg, for people with known or existing heart disease to prevent death or another heart attack or stroke. There were no differences in rates of death, hospitalization for a heart attack or stroke, and bleeding between participants who took 81 mg and those who took 325 mg.

From Spring 2017 to Fall 2020, the Sheps Center partnered with the School of Medicine and TraCS to participate in a large pragmatic clinical trial, funded by The Patient-Centered Outcomes Research Institute (PCORI), run by The Duke Clinical Research Institute (DCRI). Through TraCS, UNC is a part of PCORnet (the [National Patient-Centered Clinical Research Network](#)). ADAPTABLE was the first study conducted through PCORnet. Using the network, ADAPTABLE engaged 40 sites and recruited more than 15,000 participants.

Under the leadership of Dr. Darren DeWalt, principal investigator, Sheps Research Fellow, and Chief, Division of General Medicine and Clinical Epidemiology, Sheps research assistants used four methods to recruit 585 participants from UNC Health. Most participants were recruited *virtually* (over the phone, by email, and through MyUNCCChart messaging). Some participants were recruited in-person with the help of staff at the UNC Hospitals Center for Heart & Vascular Care at Meadowmont and at the UNC Internal Medicine Clinic. Staff at both clinics were key to the success of in-person recruitment. Staff at TraCS also provided invaluable support developing a computable phenotype to target eligible participants, helping to develop and maintain a REDCap database, performing frequent data queries, and inventing the programming that allowed us to recruit participants using MyUNCCChart.

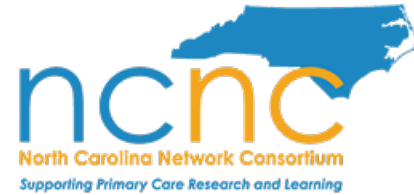


Less exciting, but challenging was the Sheps Center's work in research administration to manage per participant payments, managing IRB and DUA approvals and modifications for a first-time study of this type at UNC, and coordinating with OIC, OSR, DCRI, TraCS, UNC Cardiology, UNC affiliate clinics, and participants. Kristie Thompson, Sheps Project Director, coordinated the teamwork between Sheps, TraCS, and the School of Medicine, to help us make a significant contribution to the method and outcomes found in the study.

Read the *NEJM* article, [Comparative Effectiveness of Aspirin Dosing in Cardiovascular Disease](#), to learn more.

NCNC Focuses on Practice-Based Research

The [North Carolina Network Consortium](#) (NCNC) is a group of practice-based research networks across North Carolina. These networks are centered at UNC, Duke, Atrium Health, ECU/Vidant Health, and the Mountain Area Health Education Center. We focus on advancing outcomes in highly prevalent diseases and perform this research in outpatient primary care practices. We include learners in our projects and provide hand-on experiences to develop the next generation of practice-based researchers. We are committed to designing, implementing, and disseminating our study findings with stakeholders who represent those impacted by our research areas.



Current NCNC projects include:

- Which method for starting buprenorphine for patients with opioid use disorder works best?
 - COVID-19 impact on glucose monitoring in primary care patients with diabetes
 - De-adoption of daily monitoring of blood glucose for patients with non-insulin treated diabetes
 - Centering care for older patients with multiple chronic conditions around patient preferences and values
 - Cost of care for patients discharged to their homes after a stroke
 - Engaging youth stakeholders in advising primary care practice staff on best approaches to working with youth to avoid vaping and treating those who want to quit
 - Understanding the disease comorbidities and patient demographics among people in NC whose deaths were attributable to COVID-19
 - Novavax pediatric vaccine clinical trials
-

RTI-UNC Evidence-Based Practice Center Studies Health Care, Policy



The RTI-UNC Evidence-Based Practice Center (EPC) has been in existence since 1997. The EPC is a collaboration between UNC Chapel Hill and [RTI International](#). The center is one of nine institutions funded by the Agency for Healthcare Research and Quality (AHRQ) to produce original research and update systematic reviews of the scientific evidence on a variety of health care and health policy topics.

The EPC has prepared reports and technology assessments for the [U.S. Preventive Services Task Force \(USPSTF\)](#), the [AHRQ Effective Health Care \(EHC\)](#) and [Technology Assessment Programs](#), the [Drug Effectiveness Review Project \(DERP\)](#), the [Washington State Health Technology Assessment \(WA-HTA\)](#) Program, and other public and private health care organizations.

Reports developed by the EPC have been used to inform and develop insurance coverage decisions, quality measures, educational materials and tools, practice guidelines, and research agendas. EPC staff and investigators have decades of experience in conducting systematic reviews and meta-analyses and have expertise in areas including internal medicine, family medicine, public health, epidemiology, pediatrics, psychiatry, and obstetrics and gynecology. Reports recently published by the EPC include [Screening for Hearing Loss in Older Adults](#),

Okah Studies Intersection of Race and Medicine

Dr. Ebiere Okah is an NRSA Primary Care Research Fellow in the Department of Family Medicine. Dr. Okah's research interests include studying how physicians conceptualize and use race in their clinical care and evaluating the relationship between experiences of discrimination and blood pressure in Black Americans.



She's working on a project assessing the association between physicians' adherence to a colorblind racial ideology and their use of race in medical decision-making. Dr. Okah is also conducting a systematic review assessing physician characteristics and beliefs related to the use of race in clinical care. She's currently completing a book chapter on community-engaged research and working on two papers evaluating hypertension in Blacks. In addition to her research projects, Dr. Okah sees patients at the University of North Carolina's family medicine clinic and is completing a master's degree in clinical research.

Catching Up With...

This issue introduces a new feature "Catching Up With..." that will feature short interviews with prominent members of the Sheps community. Today, we are catching up with Gordon H. DeFriese, Ph.D., former director of the Sheps Center. Please note that the interview was lightly edited for content and style.

Catching Up With Gordon H. DeFriese, Ph.D.

Dr. Gordon DeFriese was the director of the Cecil G. Sheps Center for Health Services Research from 1973-2000. He also held appointments as Professor of Social Medicine and Professor of Medicine at the UNC-CH School of Medicine; Professor of Epidemiology and Health Policy and Administration in the UNC-CH School of Public Health; and Professor of Dental Ecology in the UNC-CH School of Dentistry. From 1986-2000 he served as Co-Director of the Robert Wood Johnson Clinical Scholars Program, co-sponsored by the UNC-CH School of Medicine and the Cecil G. Sheps Center for Health Services Research. From 1996-99 he served as the founding director of the UNC Institute on Aging.



His research interests have included studies in the areas of medical sociology, primary health care, rural health services, health services utilization behavior, child health services, dental care, medical technology assessment, medical self-care, health and aging, long-term care, health status measurement, cost-effectiveness and cost-benefit analysis, medical specialization, and health promotion/disease prevention.

Dr. DeFriese has been involved with many national and international organizations and initiatives. He retired from UNC in 2005 but remains active in health research. He is currently the Acting Director of the Health Promotion Institute of the AARP and the American Federation for Aging Research (AFAR), based in Washington, DC and New York, NY, which focuses on the translation and dissemination of scientific health information affecting older adults. The Gordon H. DeFriese Lecture on Health Services Research is named in his honor, and the Gordon H. DeFriese Career Development in Aging Research Awards were established in recognition of his distinguished 40-year career.

What is your favorite Sheps-related memory?

My favorite memory from my 27+ years as Director of the Center is the day I took a photo of six women, most of whom were employees of the Center. Each was working full-time with children

still at home, who received PhDs (or DrPHs) on the same day and all sitting on the same row at graduation (See photo below). We had so many outstanding people in those days, but these women were most impressive. There were certainly many remarkable people who worked with us, but I was always impressed by what that cohort of women managed to get done every day! They each have achieved widespread recognition for their scholarly work and careers.

What is your current hobby/interest at the moment?

Until recently, during the pandemic, I was still working at a reduced level with a private consulting firm. But, primarily, I spend my time doing woodworking, mainly woodturning, and a little bit of music, particularly playing New Orleans-style traditional jazz on clarinet and soprano sax. I taught a course on that subject in the Duke OLLI Program two or three years ago. Live performance music has taken a backseat lately, but it will return before long, but probably without some of us.

What is the best thing about retirement?

I am not sure there is a “best thing” about retirement. My advice to others: Don’t retire FROM something; retire TO something, but just get up a little later each morning. One good thing is having the time to read two or more newspapers each day, and my stack of un-read *New Yorker* and *Atlantic* magazines is shorter.



Picture taken in 1994: Lucy Savitz, PhD, MBA; Marcia Herman-Giddens, DrPH; Victoria Freeman, DrPH, RN; Rebecca Slifkin, PhD; Shula Bernard, PhD; and Jane Stein, DrPH

Upcoming Events

AcademyHealth 2021 Annual Research Meeting

June 14-17, 2021

[Presented virtually, event information available online.](#)

An important annual milestone for the community, the ARM is AcademyHealth’s biggest and most popular meeting of the year, offering an irreplaceable forum for connection, recognition, reflection, learning and professional networking opportunities. [Find Sheps Center faculty, students, trainees and alumni at presentations throughout the event.](#)

How Inequality Kills: Equity as a Health System Imperative

Presented by the UNC Office of Health Equity & Cecil G. Sheps Center for Health Services

June 22, 2021, 3 p.m. to 4 p.m.

[Register online.](#)

Speaker: Dr. David A. Ansell, MD, MPH

Michael E. Kelly Presidential Professor of Internal Medicine, SVP for Community Health Equity for Rush University Medical Center, Associate Provost for Community Affairs for Rush University

Ansell is a 1978 graduate of SUNY Upstate Medical College. He did his medical training at

Cook County Hospital in Chicago. He spent 13 years at Cook County as an attending physician and ultimately was appointed Chief of the Division of General Internal Medicine at Cook County Hospital. From 1995 to 2005 he was Chairman of Internal Medicine at Mount Sinai Chicago. He was recruited to Rush University Medical Center as its inaugural Chief Medical Officer in 2005, a position he held until 2015. His research and advocacy has been focused on eliminating health inequities. In 2011 he published a memoir of his times at County Hospital, *County: Life, Death and Politics at Chicago's Public Hospital*. His latest book, *The Death Gap: How Inequality Kills*, was published in 2017.

Sheps In the News

- **Jacqueline Nikpour**, graduate research assistant at the Carolina Health Workforce Research Center, discussed the potential for burnout among nurses in the wake of COVID-19 and the looming workforce shortage in this [article from U.S. News & World Report](#).
- Sheps Center Director **Mark Holmes** was quoted about vaccination rates among rural populations in this [NPR piece](#).
- Research from **Thomas C. Ricketts** and colleagues was featured in a recent article entitled, "[Number of Preventive Med Doctors Unlikely to Match U.S. Needs.](#)"
- The Pew Charitable Trusts included the Sheps Center's research on rural hospital closures in this April article, "[COVID Racial Disparities Loom Large in Rural Counties.](#)"
- **Daniel Reuland**, a member of the UNC Lineberger Comprehensive Cancer Center, a professor in the division of General Medicine and Clinical Epidemiology at UNC School of Medicine and a research fellow at Sheps, was quoted in this article, "[Evidence review examines both benefits and harms for lung cancer screening.](#)"
- Sheps Center's **Michelle Hernandez** discusses vaccine trials for kids in this [WRAL piece](#).
- Kaiser Health News quoted **Katrina Donahue** of the Sheps Center and her 2017 study on blood sugar monitoring in "['Painless' Glucose Monitors Pushed Despite Little Evidence They Help Most Diabetes Patients](#)"

Recent Publications

[Lessons From the Feasibility Testing of a Parent-Focused, Life Skills-Based Intervention to Prevent Obesity in Preschoolers From Underserved Families.](#)

Erinosho T, Treadway C, **Wretman CJ**, Hales D, Blitstein JL, Ward DS.
Fam Community Health. 2021 Jul-Sep 01;44(3):206-214. doi:
10.1097/FCH.0000000000000303. PMID: 33999885

[A Prospective Comparison of Evidence Synthesis Search Strategies Developed With and Without Text-Mining Tools \[Internet\].](#)

Paynter RA, Fiordalisi C, Stoeger E, Erinoff E, Featherstone R, **Voisin C**, Adam GP.
Rockville (MD): Agency for Healthcare Research and Quality (US); 2021 Mar. Report No.: 21-EHC008. PMID: 33755394

[A Clinic-Based Quality Improvement Initiative to Increase Screening for Gonorrhea and Chlamydia in Adolescents.](#)

Allison BA, Walters EM, Butler BW, Perry MF.
Jt Comm J Qual Patient Saf. 2021 Apr 28:S1553-7250(21)00099-4. doi:
10.1016/j.jcjq.2021.04.006. Epub ahead of print. PMID: 34074609

[Adherence to Pre-Exposure Prophylaxis in Adolescents and Young Adults: A Systematic Review and Meta-Analysis.](#)

Allison BA, Widman L, Stewart JL, Evans R, Perry M.
J Adolesc Health. 2021 May 28:S1054-139X(21)00169-5. doi:
10.1016/j.jadohealth.2021.04.001. Epub ahead of print. PMID: 34059426

[The Practice Is the Curriculum.](#)

Neutze D, Hodge B, Steinbacher E, Carter C, **Donahue KE**, Carek PJ.
Fam Med. 2021 May 10. doi: 10.22454/FamMed.2021.154874. Epub ahead of print. PMID:
33970470

To see more publications by the Sheps community, visit the PubMed query [here](#).

Subscribe to Other Sheps Center Newsletters:

[Program on Workforce Research and Policy](#)
[North Carolina Network Consortium](#)
[North Carolina Rural Health Research Program](#)

**THE CECIL G. SHEPS CENTER FOR HEALTH
SERVICES RESEARCH**

<https://www.shepscenter.unc.edu/>

