



U.S. Department of Veterans Affairs

Veterans Health Administration
VA Portland Health Care System

VA Portland Health
Care System

Health Services Research
& Development

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Recent Publication Reveals the Values and Preferences of Early Stage Lung Cancer Patients

By: Jacob Dougherty, BA

Early lung cancer patients who have undergone treatment with surgical resection or stereotactic body radiation therapy (SBRT) tend to value quality of life (QOL) and independence more than survival, new research shows.

Early non-small cell lung cancer (NSCLC) is typically treated with surgical resection of the cancerous lesion or SBRT. The former procedure is effective at diminishing the potential for recurrence of the cancer, but carries significant risks to the patient; conversely, SBRT carries a risk for much less severe complications, but the cancer may be more likely to recur after this therapy. In patients who are good operative candidates, the two treatment options could be considered comparable. This necessitates an understanding of early NSCLC patients' values and preferences when determining a treatment, which CIVIC's **Dr. Don Sullivan** and several other collaborators, sought to elucidate.

Participants had undergone either SBRT or surgical resection 4-6 months prior and were to complete a series of questions. Within the first set, participants were to rank pre-written values statements in a prioritization task. Secondly, they answered questions that essentially asked participants to accept a higher chance of immediate death or reduced QOL in exchange for more years of life. Next, they answered discrete treatment choice questions, where they were provided with risks and outcomes of unnamed treatments that mirrored SBRT and surgical reaction. They then completed a measure to elucidate decision-making difficulties and finally completed measures to describe their communication

with their healthcare provider(s).

The researchers found both groups to greatly value independence and QOL, with surgical patients valuing decreased chances of cancer recurrence more than the SBRT patients did. While many participants were willing to accept a higher risk of death in exchange for more years of life, few were willing to accept decreased QOL measures such as assistance with activities of daily living, permanent nursing home placement, or being bed/chair-bound in exchange for more years of life. Finally, there was a 49% rate of discordance between the actual treatment received and the preferred one, per the discrete treatment choice questions.



In summation, the work conducted by the Portland researchers showed that early NSCLC patients may prefer independence and a higher QOL over extra years of survival. These findings highlight the need for involved discussion between such patients and providers when deliberating on treatment options. **[Read the full CIVIC article here](#)**

New Study Shows Tinnitus Measures Don't Always Capture the Experience of Tinnitus

By: Beau Edwards, BS

Common tinnitus measures may fail to independently capture the full experience of patients living with this condition. Tinnitus, commonly known as the perception of "ringing in the ears," is estimated to affect one in every 10

adults. Nearly a quarter of those with tinnitus report that the condition interferes with their daily life, prompting research to focus on interventions to reduce the impact of tinnitus. With this in mind, a team of VA RR&D

investigators led by Dr. Candice Manning and including CIVIC's **Dr. James Henry** aimed to the answer the question: what do common tinnitus measurements actually measure?

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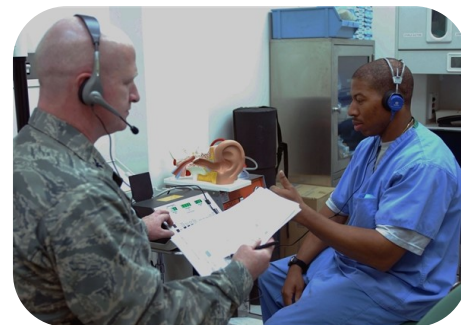
This study assessed participants' perception of and experiences with tinnitus using four common methods. To measure perceptions of tinnitus, participants completed loudness matching (LM) and pitch matching (PM) psychoacoustic tasks as well as the visual numeric rating scale (NRS) questionnaire. Additionally, participant completed tinnitus functional index (TFI) questionnaire to gauge their experiences with tinnitus.

Perceptions of tinnitus as measured by LM and PM psychoacoustic tasks were

poorly correlated to participants' experiences of tinnitus as reported by the TFI. However, NRS and TFI scores were moderately correlated, suggesting that the NRS scale more accurately measures the impact of tinnitus, and not the objective loudness of the condition.

The current study provides evidence for a long-held thought in the field, that objective measures of tinnitus perception may not be related to the impact of tinnitus on one's life. When evaluating the impact of tinnitus interventions, the TFI and NRS should be

used to assess impact on everyday life while LM and PM should assess the objective perception of "ringing in the ears." [Read the full article here](#)



CIVIC's Veteran Engagement Group

CIVIC's Veteran Engagement Group (VEG) is comprised of Veterans from various service eras, branches, and backgrounds who regularly come together to meet with investigators. VEG members provide diverse and individualized feedback to CIVIC investigators at all stages of the research process. The incorporation of VEG member's perspectives, especially as users of the VA healthcare system, can bolster translation to practice and help CIVIC research be more patient-centered.

VEG Member Highlight: Stan Eubanks



Stan Eubanks is a retired Vietnam and Operation Iraqi Freedom (OIF) Veteran. He served in the Army for 3 years, in the Army Reserves for 7 years and in the Oregon National Guard for 17 years. During his time in the military, Stan wore many hats. He was an engineer instructor, a courier, an occupational therapy assistant, a combat medic, and an infantryman. Stan, a newer member of VEG, says that he is motivated to participate because he uses VA health care and believes that his experiences as a patient are valuable. He adds, "as a medical sergeant in the Army, I experienced how the soldiers received the injuries that led to their ability to utilize the VA system." Stan identifies the "professionalism and commitment" of CIVIC investigators as something he has learned about through VEG. When he's not spending his time at monthly VEG meetings, Stan

engages with the Veteran community through his memberships with the American Legion, the Veterans of Foreign Wars (VFW) and the Iraq & Afghanistan Veterans of America (IAVA).

Fun Fact: Stan is a "diehard" Los Angeles Dodgers and Oregon Ducks football fan.

The CIVIC Veteran Engagement Group (VEG) is recruiting new members. If you, or someone you know, is a Veteran and interested in engaging in research at VA, reach out to the VEG Liaison, Rachel Matsumoto (Rachel.Matsumoto@va.gov).

Two Junior Investigators with CIVIC Receive HSR&D Career Development Awards

By: Rachel Matsumoto, MS

Two junior investigators with CIVIC, **Drs. Jessica Wyse** and **Kelly Vranas** were awarded Career Development Awards (CDA) by VA Health Services Research & Development (HSR&D). Drs. Wyse and Vranas's proposals were among a total of 9 funded projects from junior investigators across the country.

The CDA program's mission is to provide the opportunity for junior investigators to be mentored by leading VA researchers. Proposals are evaluated on the applicant's background, the suitability

of their proposed mentors, and the feasibility and merit of the project. CDA awards provide funding for 3-5 years.



The overarching goal of Dr. Wyse's CDA is to develop a strategy that supports the implementation of buprenorphine treatment for opioid use disorder in rural primary care settings.

Dr. Vranas's CDA is titled "Optimizing Critical Care for Patients with Acute Respiratory Failure: A Mixed-Methods Study" and will seek to improve the value of care in VA by reducing intensive care unit (ICU) waste while simultaneously increasing access to critical care.

Upcoming Events

HSR&D CIVIC Research Conferences, Fridays from 9:30am—11:00am

Room 214, Building 6 unless otherwise noted

November 22nd

Drs. Sarah Ono & Travis Lovejoy present:

“Introduction to the VHA Office of Rural Health Resource Center at VA Portland”



December 6th

Drs. David Ellison & Cindy Morris present:

“An Introduction to OCTRI Programs and Opportunities to Collaborate”

January 17th

Dr. Devan Kansagara

presents:

“Cannabis-Related Proposal Ideas”

January 24th

Dr. Jessica Wyse presents:

“K12 Works-In Progress Talk: Expanding the Use of Buprenorphine in VA Primary Care”



CIVIC Announcements:

CIVIC’s associate director, **Dr. Linda Ganzini** is retiring! Join CIVIC in thanking Dr. Ganzini for her years of service and in wishing her a relaxing and carefree retirement! You’ll be dearly missed, Dr. Ganzini.

Welcome to CIVIC! Since our last issue, a number of new folks have joined our team. If you see **Molly Kessner** (Dobscha), **Jacob Dougherty** (Barton, Wyse, Morasco), **Sam Reis** (Lovejoy), **Annabelle Ryerson** (Dobscha), **Megan Lafferty** (CIVIC), **Claire Meunier** (Denneson), **Elaine Miller** (Morasco), or **Lorie Jacob**

(Hynes and the Evidence-based Synthesis Program) in the halls, say “hi”!

VA Office of Rural Health has established two new Veterans Rural Health Resource Centers (VRHRC) in Gainesville, FL and Portland, OR. The VRHRC-Portland is led by CIVIC’s **Dr. Sarah Ono** (Operations Director) and **Dr. Travis Lovejoy** (Clinical Director). To learn more about ORH and resource centers, visit their [webpage](#) or read their most recent [newsletter](#).

CIVIC is proud to announce the launch of its new library! If you’re in need of a book, look for it in the **CIVIC Library** located in room 336. To check out a book, simply fill out the log on the clipboard to the left of the bookshelf. If you have book suggestions to add to our library, send them to Beau Edwards (Beau.Edwards@va.gov).

Brrr! Feeling cold? Just a reminder, CIVIC **Soup Club** meets at 12pm in the 214 Conference Room on the first Monday of each month. The next Soup Club meeting will be January 6th and signups are happening now. You can find sign up sheets in the CIVIC “Social Activities” shared folder.

Join CIVIC in celebrating everyone’s birthday each month! CIVIC **Cake Club** generally occurs the third week of the month at 1pm in the 214 Conference room. Check flyers posted around Building 6 for Cake Club dates and times. Come eat some cake and socialize. Sign up sheets are in the CIVIC “Social Activities” shared folder.

The CIVIC **Veteran Engagement Group (VEG)** is recruiting new members. If you or someone you know would be interested in helping to shape the future of VA research and in helping impact health care for Veterans, please contact Rachel Matsumoto (Rachel.Matsumoto@va.gov).

Are you an investigator looking to incorporate the Veteran perspective in your next research proposal? Have you thought about presenting to CIVIC’s **Veteran Engagement Group (VEG)**? Spaces fill up quickly, so get on the agenda early and often. Contact Rachel Matsumoto (Rachel.Matsumoto@va.gov).

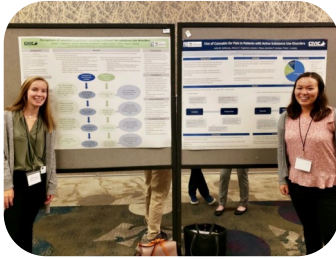
Need to boost your CV? Love reading about new and exciting findings in research? Do you appreciate a well-worded lay summary? Have you thought about joining the **CIVIC Newsletter Workgroup**? Well, now you can. For more information contact the editors, Alan Teo (Alan.Teo@va.gov), Rachel Matsumoto (Rachel.Matsumoto@va.gov), or Beau Edwards (Beau.Edwards@va.gov).

CIVIC has a twitter! Follow [@PortlandCIVIC](https://twitter.com/PortlandCIVIC) and be sure to tag us in your CIVIC research related tweets.

CIVIC's Media Mentions and Accolades

[The Next Avenue](#) highlighted work on social connectedness and video chat platforms done by Dr. Alan Teo.

Dr. Denise Hynes participated in and chaired a panel at the [Academy Health Annual Research Meeting](#) in Washington DC. Pictured from left: Dr. Amy Rosen (Boston), Ms. Kristin Cunningham, (Executive Officer for the Deputy Undersecretary for Health for Community Care); Dr. Hynes; Dr. Kristin Mattocks (Associate Chief Of Staff-Research, Western Massachusetts); Dr. Megan Vanne-man (Salt Lake City)



CIVIC's Dr. Alan Teo was quoted in a recent article by [The Oregonian](#) titled "Cause of death: Heartbreak? For one Portland-area couple, their family thinks so"

CIVIC, along with a local first grade class, wished Veterans a happy Veterans Day! Take a look at the students' letters on our twitter page, [@PortlandCIVIC](#).

Dr. Travis Lovejoy, summer intern Allie Engstrom (left), and Julia Holloway (right) presented qualitative data on the use of cannabis for pain in patients with active substance use disorders at the Research Society on Marijuana in Vancouver, WA.

CIVIC Publications

1. **Carlson KF**, Gilbert TA, **Morasco BJ**, Wright D, Van Otterloo J, Herndorf A, Cook LJ. Linkage of VA and State Prescription Drug Monitoring Program Data to Examine Concurrent Opioid and Sedative-Hypnotic Prescriptions among Veterans. *Health Services Research*; [epub ahead of print, 7 Aug 2018]
2. Yarborough BJH, Stumbo SP, Stoneburner A, Smith NX, **Dobscha SK**, Deyo RA, **Morasco BJ**. Correlates of Benzodiazepine Use and Adverse Outcomes among Patients with Chronic Pain Prescribed Long-Term Opioid Therapy. *Pain Medicine*; e-pub ahead of print: pny179, <https://doi.org/10.1093/pm/pny179>, 2018
3. Kim KK, **Helfand M**. Engagement in PCORnet Research Networks. *Med Care*. 2018 Oct;56 Suppl 10 Suppl 1:S1-S3. doi: 10.1097/MLR.0000000000000958. No abstract available. PMID: 30074945.
4. Manning C, ThielmanEJ, Grush L, **Henry JA**. Perception versus reaction: Comparison of tinnitus psychoacoustic measures and tinnitus functional index scores. *American Journal of Audiology*, 28, 174-180.
5. **Wyse JJ**, **Morasco BJ**, **Dobscha SK**, Demidenko MI, Meath THA, **Lovejoy TI**. Provider reasons for discontinuing long-term opioid therapy following aberrant urine drug tests differ based on the type of substance identified. *J Opioid Manag*. In Press. PMID: 30234926
6. **Hulen E**, **Saha S**, **Morasco BJ**, Zeigler C, Mackey K, **Edwards ST**. Sources of distress in primary care opioid management and the role of a Controlled Substance Review Group: A qualitative study. *Pain Med*. 2018 Aug 1;19(8):1570-1577. PMID: 29099982
7. **Teo AR**, **Marsh HE**, Forsberg CW, Nicolaidis C, **Chen JI**, Newsom J, **Saha S**, **Dobscha SK**. Loneliness is closely associated with depression outcomes and suicidal ideation among military veterans in primary care. *J Affect Disord*. 2018;230:42-49. PMID: 29407537
8. **Adams MH**, **Dobscha, SK**, Smith, NX, Yarborough, BJ, Deyo, RA, & **Morasco BJ**. (2018). Prevalence and correlates of low pain interference among patients with high pain intensity. *The Journal of Pain*, 19(9), 1074-1081. [PMID 29705347]
9. **Vranas KC**, **Slatore CG**, Kerlin MP. (2018). Telemedicine coverage of intensive care units: A narrative review. *Ann Am Thorac Soc*, 15(9), 1110-1113. [PMID 29877728].
10. **Sullivan DR**, Eden KB, Dieckmann NF, **Golden SE**, **Vranas KC**, **Nugent SM**, **Slatore CG**. Understanding patients' values and preferences regarding early stage lung cancer treatment decision making. *Lung Cancer*, 131, 47-57.

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