Reloading Evidence-Based Medicine

The easy livin’ of summertime is winding down and I am ready to jump back into the fray after some intellectual roaming. A battleground still to be conquered is the incorporation of evidence-based guidelines into order sets, clinical pathways and report templates. It is a good time to take a close look at what happened to evidence-based medicine (EBM) and guideline development in the last ten years.

The reaction of clinicians to EBM is not always an enthusiastic embrace, most frequently because “my patient is different.” There is also the perception that EBM-based guidelines lead to cookbook medicine and neglect to individualize treatment plans appropriately. They are right and they are wrong. EBM relies heavily on results observed in randomized control trials (RCT). RCT’s require exclusion and inclusion criteria that are quite rigid and only applicable to a specific patient population, hence “my patient is different” may be right if s/he doesn’t match the trial population.

However, well-designed trials with sufficient statistical power are still the starting point to change practice but are not the end of it any more. There may be situational components (e.g., frequent monitoring, free provision of otherwise expensive drugs) that cannot be replicated outside of the trial. As treatments from the research environment enter widespread practice, these factors influence outcome and at times lead to different conclusions. The greatly increased capacities of public databases now enable analysis of larger data sets to recognize these post-trial variations.

A brand-new example is the comparison of a meta-analysis of RCT’s with the SEER data base on the role and benefits of radiation therapy in women who had breast-conserving surgery and in women who had a mastectomy. While the results of multiple RCT’s favored specific practices with good statistical support, the SEER database questioned those practices with different outcomes in patients outside of the clinical trials (see reference). The discussion on what to do with this information has only begun.

In addition to analyzing larger data sets collected from larger, more diverse populations, there are two exciting tools of a different kind: genomic analysis and Big Data mining. Genomic analysis is already becoming a standard of practice in oncology. We routinely determine genomic alterations in a large number of tumors, matching them with therapeutic agents for ever more indi-
Jam Packed Summer

It's difficult to accept that summer is almost over and school will be starting soon. We have barely stopped sweltering! This summer has been wonderful and I hope that your summer has been as enjoyable as mine. For a change, I will share with you some of my summer milestones.

In addition to my shifts in the Lovelace and UNMH Emergency Departments, I have been quite busy with GAMA and in my personal life. This June I travelled to California to take my 16-year-old daughter, Teanna, to Stanford’s High School Summer Program. It has been an eye-opening, challenging experience for her. Her parents are so proud to say the least!

My 13-year-old son, Sean, has also kept us actively involved this summer. He has been competing in our local Road Runner Quarter Midget auto-racing club. We are part of the larger local racing group that races at Sandia Motor Speedway. The group is small but fiercely committed.

I love the time at the racetrack, where I can set aside the daily stress associated with medicine. Although I am occasionally called upon when an injury occurs, often involving a spectator rather than a racer, it is one place where I get to bond with Sean as we work towards improving our race cars. When we began racing, I had very little knowledge of race cars. It felt similar to when I was in medical school, and was reminded of the infamous “drinking water from a fire hydrant” analogy. Racing has since become a fun hobby and I invite you to check it out.

Additionally, we made the decision to move and recently relocated to North Albuquerque Acres. While the moving process is trying, especially in the heat, we are now getting time to enjoy our new home. I now have many interesting new running paths to experience. Running and working out have become a part of my daily routine, as I have come to understand the importance of appreciating the concept of physician wellness.

I am not familiar with many of the other medical societies, but the American College of Emergency Physicians (ACEP) has done a wonderful job of making its members aware of this often-neglected area of medicine. In fact,
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CME

August 5-6, 2016
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Registration online: www.ofnm.org or call or email: mj@pmplanners.net / 760-807-4974

August 13, 2016
Complex Care: Treatment Trends and Improved Outcomes: A Symposium for Specialists and Primary Care Physicians
Hotel Santa Fe, The Hacienda and Spa, Santa Fe, NM
Register: CMEBaylor.org or cmeregistration@baylorhealth.edu

August 13, 2016
UNM, Maintenance of Certification in Anesthesiology
BATCAVE, UNM North Campus, Albuquerque, NM
Register: http://som.unm.edu/cme/2016/moca.html

August 18, 2016
Youth Sports Concussion
Courtyard @ Monroe Complex, Albuquerque, NM
Register: http://gamaconcussion2016.eventbrite.com

August 19 - 21, 2016
Enhanced Patient Care with Medical Hypnotherapy Training for Health Care Providers
Hypnotherapy Academy of America, Albuquerque, NM
Register: http://som.unm.edu/cme/2016/hyp16.html

CME - con’t

August 27 - 28, 2016
NM Pediatric Society 2016 Fall Wylder Lecture Series
Crowne Plaza, Albuquerque, NM
Register: http://som.unm.edu/cme/

August 27 - 28, 2016
Advanced Life Support in Obstetrics (ALSO)
UNM, Domenici Center for Health Sciences Education, Albuquerque, NM
Register: http://som.unm.edu/cme/2016/also.html

September 16 – 17, 2016
Clinical Neurosciences Symposium
TBA, Albuquerque, NM
Register: http://som.unm.edu/cme/

October 27, 2016
NM Bone Club – New Mexico Bone Club – Hormonal Therapy for Postmenopausal Osteoporosis- Dead or Alive?
Marriott Pyramid, Registration: www.ofnm.org
visualized therapy. Since the effects of genomic alterations is context dependent and not necessarily “mutation X matches therapy Y,” the analytical data are becoming more and more complex. Performing RCT’s on a myriad of unique genomic profiles is impossible; to answer questions of efficacy, new kinds of trials, the so-called umbrella and basket trials, have been conceived with a very different trial methodology. Patients are enrolled based on the genomic profile of their tumors, matching them to potentially active therapeutic agents. The big challenge remains to define statistical validity (and therefore reproducibility of results), comparison groups and control arms. Since ultimately each patient may become a single unique “population”, the old paradigms derived from RCT’s may simply not work for these trials.

A second tool, Big Data analysis, is searching for associations in unstructured data via computational algorithms. An example from a few years ago is the search for factors associated with obesity. One of the most significant determinants that emerged was neither diet nor exercise but the social network of the obese individual. Although Big Data results can be fun they don’t tell you much about cause and effect. Their strength lies in revealing surprising connections and generation of ideas for a fresh approach to unsolved problems.

The complexity of knowledge generated by these tools cannot be handled by leisurely reading the medical literature. To assist practitioners in selecting best practices, medical specialty societies have embarked on creating evidence-based guidelines for frequent or impactful practices. The best guidelines are based on the Institute of Medicine’s principles “Guidelines we can trust.” These principles set the bar very high for transparency of potential conflicts of interest of the guideline writers and statistical strength of observations. Physicians and patients will be served well by adopting these guidelines and do not represent cookbook medicine. Clinical judgment is required to select patients appropriately (i.e., matching them with the patient population for which the guideline is written) and incorporate patient values and preferences.

Plenty of patients remain for whom no guidelines are written. For them we need to construct well-built clinical questions, efficiently search the literature and appraise the quality of the evidence ourselves. Integration of best available evidence with clinical expertise and patient preferences is what constitutes evidence-based practice. With the speed and quality of search engines at our fingertips this is not that hard. I cannot imagine going back to the days of library searching or just relying on knowledge gained during medical training. That would be the equivalent of continuing blood-letting indefinitely, and who wants to do that ?!


Any comments, input or questions are welcome, either directly to my e-mail Cordelia.Sever@tricore.org or to GAMA at gama@gamamed.org
UNM School of Medicine establishes new Office for Community Faculty

For decades, students in the University of New Mexico School of Medicine have gained invaluable experience from spending time with community preceptors – it is an essential part of their medical education and it is what has made and continues to make the University of New Mexico a leader in medical education.

The School of Medicine is creating a new Office of Community Faculty in recognition of the critical role that preceptors play. Nearly 250 community physicians are currently hosting medical students.

“Over the years we’ve increased the amount of time that students spend in the community because it’s not only a fantastic experience,” says Martha McGrew, MD, executive vice dean of the School of Medicine. “but an opportunity to see how medical practice works all over the state in communities with fewer resources. It also gives students the chance to learn about the importance of the old fashioned, long term doctor patient relationship.”

McGrew says the need for community physicians has grown as the student enrollment has increased in recent years. We want to be sure that all of our requests for community faculty across disciplines are coordinated.

“We want to offer them “one-stop shopping” so we can talk about the needs they have,” she says. The new office would offer a kind of concierge service to help physicians receive community faculty status and help them gain access to other resources at UNM, such as research and library privileges which include access to up-to-date.

Preceptors often find they have as much to learn from the students they mentor as they have to teach, McGrew says. Young people have a greater familiarity with new technology, for example. Meanwhile, many preceptors find the experience to be personally rewarding.

The new office may be able to provide other benefits, such as online learning modules and professional development for preceptors, McGrew says. “They do incredible things for us, and we are very grateful to them” she says.

For more information on becoming a preceptor or current benefits for precepting please contact the Office for Community Faculty at 505-272-4129.
CANDIDATES FOR MEMBERSHIP

Michael B. Chang  MD
Dermatology & Skin Cancer Ctr of NM, 6200 Uptown Blvd NE Ste 410, Albuquerque, NM, 87110
Dermatology
Med School: 2011, University of Maryland, Baltimore, MD
Internship: 2011-12, Preliminary Internal Medicine, Mercy Medical Center, Baltimore, MD
Residency: 2012-15, Dermatology, Mayo School of Medicine, Rochester, MN
States License:  NM

Carlos Hernandez Torres, MD
Presbyterian HealthCare at Home,  8100 Constitution Place NE Ste 400, Albuquerque, NM, 87110
Med School: 2008, Universidad Autonoma Ciudad Juarez, Juarez, Mexico
Internship: 2009-10, Family Medicine, Memorial Medical Center, Las Cruces, NM
Residency: 2010-12, Family Medicine, Memorial Medical Center, Las Cruces, NM
States License:  NM, NY

Maria Hizon  MD
PMG Cedar Pediatric Endocrinology, 201 Cedar SE Ste 4660, Albuquerque, NM, 87106
Pediatric Endocrinology
Med School: 1986, Far Eastern University, Manila Philippines
Internship: 1986-87, General Medicine, Veterans Memorial Medical Center, Quezon City, Philippines
Residency: 2007-09, Pediatrics, Flushing Hospital Medical Center, Flushing, NY
States License:  NM
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401 San Mateo Blvd. SE, Albuquerque, 87108 (505) 462-7333
200 Emilio Lopez Rd. NW, Los Lunas, 87031 (505) 866-2700
2400 Unser Blvd. SE, Ste. 28400, Rio Rancho, 87124 (505) 253-3000

Our women’s health specialists provide care close to home throughout Albuquerque, Rio Rancho and Los Lunas.
ACEP has a dedicated Section and I hope that we can initiate something similar on a local level within GAMA. Sometimes I wonder if we are always trying to reinvent the wheel instead of building on foundations that have already been poured.

While my summer has been packed, I am looking forward to the upcoming months. In addition to anticipating the Denver Broncos return to the field, I am excited about the scheduled events with GAMA and ACEP. The GAMA leadership team continues with the planning of our upcoming Behavioral Health Summit, as well as our educational programs. On August 18 we will host our Youth Sports Concussion CME and on August 25 we will host the Medical Cannabis Program (no samples will be available). Registration links for both programs can found on GAMA’s website.

NM ACEP is currently working with four of the local MCOs to implement EDIE (Emergency Department Information Exchange). EDIE is promoted as “a web-based communication technology that enable intra- and inter-emergency department communication.” The implementation of EDIE in other states has significantly improved the delivery of healthcare, especially emergency healthcare. There are few states that have implemented EDIE, or a similar program, so it is exciting that New Mexico is leading in this area and will hopefully have a system other states will model.

We are immensely grateful that Sophia Waara has been remotely assisting during the transition to our new Deputy Director, Sylvia Lyon. Sylvia has hit the ground running. We are excited she is here to serve our members and please reach out to welcome her to GAMA!

Classified Ads & Updates


Family Practice Outpatient Primary Care in Albuquerque is seeking Nurse Practitioner/MD or DO, Bilingual (Spanish is desirable). Positive work environment, work/family balanced, established, independent private practice. Flexible substantial part time or full time hours, must be available most Fridays, benefits very light call. Fax CV/Resume to 505-242-1221 or email at qocarr@yahoo.com

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Albuquerque Pediatric Associates, Ltd. (APAL) is seeking a pediatrician(s) who is/are interested in serving the Albuquerque Community. We are also interested in seeking Nurse Practitioners. APAL is a well established practice having been incorporated since 1972. We would like any candidates to be Board Certified or Board Eligible. Hours are flexible - part-time to full-time. Please call 293-1333x32 for further information.

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Dr. Daffern is the primary Allergist at Sinus and Allergy Specialists of NM, the newest service being offered by Head & Neck Surgeons of NM. She has over 20 years experience treating allergies both in Albuquerque and Richmond, VA. She was recently added to the directory of Best Doctors in America, which represents the top 5% of physicians that other physicians would seek care from.

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Albuquerque Community Sports Medicine Kicks off the Current Season

Please join us...
When: Wednesday, August 10 from 6:30 to 8:00 PM
Where: First Citizens Bank,
4701 Lang Ave. NE
(off Jefferson and Paseo del Norte)

Free and open to APS trainers and those Physicians interested in volunteering at APS football games.

There will be food and libations along with a short talk from APS Sports and GAMA/APS Sports Medicine.

Please RSVP to sylvia.lyon@gamamed.org.
YOUTH SPORTS CONCUSSION CME

When: Thursday, August 18th, Registration @ 5:30 PM, Program @ 6:00 – 8:00 PM

Where: PMP Conference Center, Courtyard @ Monroe Complex Building B-
4600 Montgomery Blvd, Building B, Albuquerque, NM  87109

Cost: $30 Payable via Eventbrite

CME: 2 CME Hours

Registration Link: www.gamaconcussion2016.eventbrite.com

Agenda Topics:

- Introduction
- Case Presentation
- Definition of sports concussion
- Epidemiology of youth sports concussion, with emphasis on ABQ/NM
- Review of state sports concussion law and recent revisions
- Basics of acute management of concussion
- Return to play & Return to Learn
- CTE and SIS
- Q and A

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The Greater Albuquerque Medical Association designates this live activity for a maximum of 2.0 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.
GAMA Calendar of Events

2016 Save the Date

**Sports Medicine Kick-Off Mixer**
Wednesday, August 10 from 6:30 to 8:30 p.m.
First Citizens Bank
4701 Lang Ave. NE, off Paseo and Jefferson

**Youth Sports Concussion CME**
Thursday, August 18 from 6:00 PM to 8:00 PM
PMP Conference Center Courtyard @ Monroe;
4600 Montgomery Blvd., Bldg. B

**Medical Cannabis Education**
Thurs. August 25 from 2:30 to 5:30 p.m.

**GAMA EXPO**
Thurs. August 25 from 5:30 to 8:00 p.m.

**Speakers Series**
Wednesday, Sept. 14, 2016, site TBD
David A. Hovda PhD, Director of the UCLA
Brain Injury Research Center,
“Traumatic Brain Injury”