

# Supporting Primary Care Research and Learning Winter 2021

Research for Me at UNC – A resource for patients who are interested in research studies

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### Research for Me

join a study, make a difference Research for Me @ UNC is a resource for patients and members of the public to learn more about research and discover research opportunities. As public promotion of this resource increases, clinicians may hear from patients about studies they find on the website. Here's what you should know:

- Research for Me was created to improve awareness, accessibility, and transparency of the research happening at UNC-Chapel Hill and the UNC Health System. All studies are approved by the UNC Institutional Review Board.
- Research for Me is listed as a resource on UNC
   MyChart (a patient communication e-portal linked to
   their electronic health records) and UNC Health
   "Find a Doctor".
- If a patient comes to you asking about a specific study, you can look up the listing to learn more about the study. Search for specific studies by visiting the <u>Find Studies</u> page and opening the advanced filter. Search by IRB number, National Clinical Trial number, principal investigator, contact name, or UNC department.
- The Find Studies page can also be used to help identify clinical trials for patients. You can use filters to narrow down available studies by topic area.
- The <u>educational resources</u> pages can be used to assist in helping people understand what research is and what research opportunities are available. If you have any questions about *Research for Me*, please reach out to the team at <u>research for me@unc.edu</u>.

## PREVENTABLE study focuses on preventing dementia in the elderly PREVENTABLE

PRagmatic EValuation of evENTs And Benefits of Lipid-lowering in oldEr adults

Primary Care clinics at Duke, UNC, Atrium, and across the US a participating in the NIH-funded PREVENTABLE trial. Investigators will study whether statins help prevent dementia or physical disability. PREVENTABLE is the largest pragmatic, placebo-controlled trial to date, and the first statin trial with a noncardiovascular primary outcome. Statins have been shown to effectively reduce the risk of cardiovascular events for both primary prevention populations and patients with known coronary artery disease (or secondary prevention). Unlike most statin studies in primary prevention, this one includes individuals aged 75 or older, hoping to answer some of the many unanswered questions for older adults. The Duke Clinical Research Institute and Wake Forest School of Medicine will be coordinating centers for this study.

Eligible participants will be 75 years or older, not taking a statin, and without existing heart disease or dementia. They will be randomized to Atorvastatin (brand name Lipitor®) or placebo and be followed over the course of five years. For more information, visit the main PREVENTABLE website.

## UNC and Wake Forest study: Can phlebotomy improve diabetes and liver disease?



## SCHOOL OF MEDICINE

UNC School of Medicine and Wake Forest University are recruiting patients with prediabetes and diabetes to determine if phlebotomy can prevent disease progression.

**Study Background:** Iron is a risk factor for diabetes and one of its principal complications, non-alcoholic fatty liver disease (NASH). Study groups at UNC and





Wake Forest are currently enrolling patients in a randomized controlled trial to explore whether phlebotomy (blood donation like in a community blood drive) improves blood sugar control in patients with prediabetes and type 2 diabetes. The study will involve 9 research visits. Five out of nine studies will involve phlebotomy or a sham procedure, where an IV is placed and no blood is taken. Patients will be compensated for their time.

## Wake Forest® School of Medicine

**Study population:** Research participants need to be between the ages of 40-75 and have prediabetes or type 2 diabetes mellitus with hemoglobin A1c 5.7-8.5% and on 0-2 diabetes medications. Research subjects for this study <u>cannot</u> be currently treated with sulfonylureas, insulins, or glinides. If you have patients that might be interested, please direct them to Sarah Adams: <u>sarah adams2@med.unc.edu</u> or (984) 974-3015.

#### **Published Research**

MAHEC and UNC-CH researchers have published a paper called *COVID-19 Needs Assessment and Support for Primary Care Practices in Western North Carolina* in the HCA Healthcare Journal of Medicine. The manuscript outlines a recent rapid COVID-19 needs assessment initiative that also provided practice supports and interventions for primary care Practices in a 16-county region in Western North Carolina.

#### See the paper here

It is vital for clinicians in primary care to serve their patients during a pandemic. Rapidly assessing needs of clinics can "allow for immediate and ongoing support that matches regional and practice-specific

needs. Rural practices may require more assistance than their urban counterparts. Our rapid survey process jumpstarted a statewide system". This system will enhance communications with clinicians in future emergencies (see NC Responds article that follows).

#### NCNC COVID-19 News

#### **NC Responds**



NC Responds was developed in response to the need for a comprehensive state-wide emergency response system for primary care practices. In July of 2020, the Sheps Center received funding from NC AHEC via Campbell University to create an emergency response system that enables the State of NC (or other approved entities) to deploy an email-based needs assessment to healthcare practices of any specialty (including Pharmacies and Health Departments) within 72 hours, or an email announcement within 24 hours during a declared state of emergency. NC Responds utilizes a web-based tracking system that regularly monitors changes in primary care practice statuses (clinic closures, name changes, contact information changes, etc.) and when necessary, can be used for emergency communications and then by a pool of callers to enable follow up with non-responding practices to increase awareness and response rate.

A prototype system was implemented during the early days of the COVID-19 crisis and provided assistance with things such as filling out applications for loans, personal protective equipment deliveries, and help with telemedicine services and billing. Almost all of the practices expressed interest in participating in a future state-wide emergency response system which would allow them to be contacted to coordinate response and assess needs during emergencies.





#### **COVID-19 Research at Atrium Health**

#### **COVID-19 Community Research Partnership**

The Atrium Health Family Medicine Research team is continuing their participation in the COVID-19



Community Research Partnership, along with the Department of Health and Human Services, Wake Forest Baptist Health, and

other medical centers and universities in the country, to conduct this study which is designed to learn about the spread of the coronavirus disease 2019 (COVID-19) in our communities. Participant data related to symptoms, exposure, and healthcare visits is being collected to help understand who is becoming infected and why. A sample of participants will also be sent a kit to do an at-home finger prick test to see if they have COVID-19 antibodies.

Funding for this study is provided by the CDC and the state of North Carolina. The state funding is now expected to continue for an additional calendar year due to the recent extension of the Coronavirus Aid, Relief, and Economic Security (CARES) Act. State serology testing is tentatively planned to extend through Summer 2021, allowing for the wrap up of study data collection in the Fall.

#### **COVID-19 Community Research Partnership**

As part of Atrium Health's COVID-19 response, Atrium is evaluating the rapid expansion/implementation of ambulatory virtual care visits with the aim of examining utilization of virtual care and better understand the patient, provider, clinical team's experience with virtual visits, focusing on vulnerable patient populations at four Atrium practices.

### Provider's Perceptions around COVID-19 Care and Self-care

Atrium Health's researchers are qualitatively exploring the perceptions of healthcare workers to the COVID-

19 pandemic by addressing the research question "What are the perceptions of providers, including barriers and facilitators, to caring for patients and caring for themselves during this COVID-19 pandemic?".

### PBRN researchers with new roles and Positions

Congratulations to Michelle Hernandez, MD, associate

professor in the UNC
Department of Pediatrics, on
being elected Secretary of
the Environmental &
Occupational Respiratory
Diseases (EORD) Interest
Section of the American
Academy of Allergy, Asthma



and Immunology. Hernandez will begin serving as EORD Secretary effective March 1, 2021. Since this is a progressive position, in 2023 she will then serve as Vice Chair and from 2025 to 2027 she will serve as the Chair of the EORD section



Hazel Tapp, PhD, is the current Chair of the North American Primary Care Research Group (NAPCRG) Program Committee. This committee is responsible for organizing the NAPCRG conferences, which includes selecting of the

plenary speakers for the annual meeting of this leading global research organization for primary care researchers.

#### Acknowledging our supporters:

NCNC would like to thank UNC's <u>Cecil G. Sheps Center</u> <u>for Health Services Research</u> and the <u>NC Translational</u> <u>and Clinical Sciences Institute</u> for all they do that make our work possible.