

A monthly newsletter dedicated to informing and strengthening the VA Research Community - July 2021

Message from the CRADO

Dear VA Research colleagues,

Like many of you, our mission to serve Veterans is one of the primary reasons I was thrilled to join VA. When we unite in that mission as an enterprise, we can do so much more than what we can do as individual people and medical centers. Our response to COVID-19 both demonstrated that clearly and taught us about some of the things we need to do to make it easier to work as a team.



When we first started doing research on COVID-19, there was a lot of coordination to be done. From my vantage in central office, I was able to see you, my colleagues across the country, rising to the occasion in these unprecedented circumstances. Local research offices worked closely

with ORD in the initial months to ensure we had a complete and accurate picture of who was doing what in any area related to the pandemic. We created new systems to begin to track both ongoing work and reports of results. Across our large system, we noticed that several teams were working on the same question, e.g., the effectiveness of a particular drug to treat COVID-19. In the case of drug effectiveness, HSR&D stood up a collaboratory where these teams could collaborate to generate the "gold standard" VA analysis and shared resources, such as curated data.

One of the resulting <u>publications</u>, "Early initiation of prophylactic anticoagulation for prevention of coronavirus disease 2019 mortality in patients admitted to hospital in the United States: cohort study," was published by the *British Medical Journal* in February of this year. The list of the authors' affiliations is a wonderful illustration of the power of VA as an enterprise:

- 1. Christopher T. Rentsch, Farah Kidwai-Khan, Melissa Skanderson, Joseph T. King Jr., Janet P. Tate, and Amy C. Justice of the VA Connecticut Healthcare System
- 2. Walid F. Gellad of the VA Pittsburgh Healthcare System
- 3. Yuk-Lam Ho of the VA Boston Healthcare System
- 4. P. Michael Ho of the Rocky Mountain Regional VA Medical Center
- 5. Paul A. Heidenreich of the VA Palo Alto Healthcare System
- 6. David Atkins, director of HSR&D
- 7. Matthew S. Freiberg of the VA Tennessee Valley Healthcare System

For each one of the names listed above, there are many other VA Research team members who made the work possible: study coordinators, regulatory specialists, administrators, finance officers, and VAMC research office staff, just to name a few.

Unfortunately, COVID-19 continues to impact our nation, our Veterans, and members of the VA Research family, in the form of both new infections and the lingering effects of prior infections. One of the major findings to come out of VA's research into COVID-19 was the extent to which "long COVID" affects the body after infection. Dr. Ziyad Al-Aly of the VA St. Louis Health Care System and his team <u>published a study</u> in *Nature* in April that found significant chronic conditions in some people who had recovered from the virus. This well-designed study has received wide attention in both the media and the medical world, and rightly so.

One of our goals moving forward will be to integrate research streams across the enterprise to address long COVID and to ensure that we are helping to meet the needs of the broader VHA health care system, such as those of the Office of Geriatrics and Extended Care and the Office of Mental Health and Suicide Prevention. This effort will include funding additional projects by Dr. Al-Aly and his team, as well as studies by other groups.

We are also looking into coordinating efforts involving the genomic sequencing of the virus. Through programs like <u>MVP</u> and <u>CIPHER</u>—VA's centralized phenomics library—we are in a unique position to contribute important knowledge on this front.

This extraordinary time has not been easy in either our personal or professional lives. I, myself, lost my mother back in October due to the secondary effects of COVID-19; she had become deconditioned after spending so much time at home and suffered a fall. In addition to our mission, I have found that another extraordinary thing about our research community is how supportive colleagues are of one another. Many thanks to all of you for the work that you do and the people you are. I am fortunate to work alongside you.

With gratitude,

Rachel

Rachel Ramoni, DMD, ScD Chief Research and Development Officer (14RD) Department of Veterans Affairs



Achievements and Milestones

Policy/Admin Updates

Updated travel restrictions and guidance — The Office of the Chief Human Capital Officer updated employee travel restrictions and guidance based on changes published by the Safer Federal Workforce effective June 24, 2021. Updated guidance from the Safer Federal Workforce Taskforce provides clarification on official travel for employees, as follows:

- **Fully Vaccinated:** There are no longer government-wide limits on official travel for federal employees who are fully vaccinated. Approval of travel requests should be made by the employee's supervisory chain of command, in accordance with procedures established by administration or staff office heads.
- Not Fully Vaccinated: Official domestic travel for federal employees who are not fully vaccinated remains limited to mission-critical trips. For those employees, international travel should also be avoided if at all possible, unless it is mission critical.

Employees are encouraged to check the Centers for Disease Control and Prevention (CDC) website regularly to determine when updates to <u>travel guidance</u> are made. CDC's travel guidance will supersede VA's guidance except in situations specific to VA.

Be on the lookout for fraud, waste, and abuse—The VHA Office of Integrity and Compliance (OIC) has launched a communications effort to raise awareness about fraud, waste, and abuse. These issues potentially apply to VA research, as they do to virtually every area of the agency. According to OIC:

- **Fraud** involves attempting to gain something of value by intentionally misrepresenting a situation. Fraud is intentional misconduct.
 - Research example: Knowingly falsifying research data to obtain funding or personal gain, or to damage another individual. This can include altering existing records, deliberately distorting undesired data or results, or fabricating data or documents. Fraud may also include deceptive practices such as the deliberate concealment of a conflict of interest or inclusion of deliberately misleading statements in research proposals or other documents.
 - Waste is misusing money or resources, even if not explicitly illegal or intentional.
 - Research example: Intentional, unauthorized use; disclosure; or removal of or damage to researchrelated property, including equipment, materials, writings, or devices used in or produced by research.
 - **Abuse** is behaving improperly or unreasonably, or misusing one's position or authority.
 - Research example: Fabrication, falsification, plagiarism, or deception in proposing, carrying out, or reporting results of research or deliberate, dangerous, or negligent deviations from accepted practices. Possible abuses include failure to follow an investigational plan, inadequate or inaccurate records, inadequate drug accountability, inadequate completion of informed consent forms, failure to report adverse drug reactions, failure to obtain and/or document subject consent, failure to notify an

institutional review board (IRB) or ethics committee (EC) of changes/progress, or failure to obtain or document IRB approval.

All suspected criminal activity should be reported to the VA Office of Inspector General (OIG):

- Email the VA OIG Hotline: vaoighotline@va.gov
- Fax the VA OIG: (202) 565-7936
- Call the VA OIG: (800) 488-8244

Non-criminal instances of fraud, waste, and abuse can be reported to:

- Immediate Supervisor
- Local Integrity and Compliance Officer (ICO)
- VHA Office of Integrity and Compliance (OIC) Helpline:
 - O Phone: (866) 842-4357 (VHA HELP)
 - Email: <u>vhacbihelpline@va.gov</u>

More information about FWA is available by watching the Fraud, Waste and Abuse Overview video.

Resources and Opportunities

Supporting diversity, inclusion, and equity in Office of Research and Development hiring-

ORD is committed to promoting a diverse, inclusive workplace with fair and equitable treatment for all employees. In support of this goal, the ORD Diversity, Equity, and Inclusion Workgroup has developed a job-posting database and accompanying instructions to complement and augment the general guidance provided in VA Handbook 5005 ("Staffing"). The database lists dozens of online job boards and other resources that ORD hiring officials can use to extend the reach of job postings to communities currently under-represented within research, to help ensure a diverse pool of well-qualified applicants.

ORD is requiring a good-faith effort on the part of all ORD-based hiring officials to use one or more of the resources listed in the database, as appropriate for the position being filled. ORD plans to eventually extend this policy and the associated resources to the VA research community at large, pending an evaluation of its effectiveness at the ORD level.

Employment

- (06/30/21) Health Sciences Research Assistant/Research Specialist-Seattle, WA
- (06/24/21) Research Assistant- Pittsburgh, PA
- (06/24/21) Programmer/Analysts- Pittsburgh, PA
- (06/24/21) <u>Research Assistant</u>- Pittsburgh, PA

• (06/14/21) Project Coordinator- West Haven, CT

More VA Research opportunities can be seen on the <u>ORD website</u>. Members of the VA Research community who are interested in advertising their available positions here can submit requests to <u>ORD.Web@va.gov</u>.

Noteworthy Publications

Below is a small sampling of noteworthy studies published by VA researchers within the past month. This list is intended to reflect the broad spectrum of VA research, but is in no way inclusive of all VA researcher topics or projects. Visit the <u>VACO</u> <u>Library</u> website to sign up for alerts on published VA studies on many different topics.

<u>Rural-urban disparity in mortality in the US from 1999 to 2019</u>. Cross SH, Califf RM, Warraich HJ. The disparity between rural and urban deaths tripled from 1999 to 2019. JAMA. 2021 Jun 8;325(22):2312-2314.

<u>TCF1 in T cell immunity: A broadened frontier</u>. Zhao X, Shan Q, Xue H. The article summarizes key findings on TCF1 across the fields of T cell immunity. Nature Reviews. Immunology. 2021 June 14. Online ahead of print.

Sudden cardiac death and myocardial fibrosis, determined by autopsy, in persons with HIV. Tseng ZH, Moffatt E, Kim A, Vittinghoff E, Ursell P, Connolly A, Olgin JE, Wong JK, Hsue PY. The rates of presumed sudden cardiac death and myocardial fibrosis were higher among HIV-positive persons than among those without known HIV infection. New England Journal of Medicine. 2021 Jun 17;384(24):2306-2316.

Integrating single-cell and spatial transcriptomics to elucidate intercellular tissue dynamics. Longo SK, Guo MG, Ji AL, Khavari PA. The article reviews efforts to integrate single-cell RNA sequencing with spatial transcriptomics, including emerging integrative computational methods. Nature Reviews. Genetics. 2021 Jun 18. Online ahead of print.

<u>Molecular mechanisms underlying nucleotide repeat expansion disorders</u>. Malik I, Kelley CP, Wang ET, Todd PK. The review discusses the four major mechanisms by which expansion of short tandem repeats in the human genome causes disease. Nature Reviews. Molecular Cell Biology. 2021 Jun 17. Online ahead of print.

<u>Common genetic variation influencing human white matter microstructure</u>. Zhao B, Li T, Yang Y, Wang X, Luo T, Shan Y, Zhu Z, et al. This large-scale, tract-specific study advances the understanding of the genetic architecture of white matter and its genetic links to a wide spectrum of clinical outcomes. Science. 2021 Jun 18;372(6548).

Daratumumab-based treatment for immunoglobulin light-chain amyloidosis. Kastritis E, Palladini G, Minnema MC, Wechalekar AD, Jaccard A, Lee JC, Sanchorawala V, et al. Among patients with newly diagnosed AL amyloidosis, the addition of daratumumab to bortezomib, cyclophosphamide, and dexamethasone was associated with higher frequencies of hematologic complete response and survival free from major organ deterioration or hematologic progression. New England Journal of Medicine. 2021 Jul 1;385(1):46-58.

<u>Rituximab versus mycophenolate mofetil in patients with pemphigus vulgaris</u>. Werth VP, Joly P, Mimouni D, Maverakis E, Caux F, Lehane P, Gearhart L, et al. Rituximab was superior to mycophenolate mofetil in producing sustained complete remission at 52 weeks in patients with pemphigus vulgaris. New England Journal of Medicine. 2021 Jun 17;384(24):2295-2305.

<u>Use of total neoadjuvant therapy for locally advanced rectal cancer: Initial results from the pembrolizumab arm of a phase</u> <u>2 randomized clinical trial</u>. Rahma OE, Yothers G, Hong TS, Russell MM, You YN, Parker W, Jacobs SA, et al. Pembrolizumab added to chemoradiotherapy as part of total neoadjuvant therapy was suggested to be safe. However, neoadjuvant rectal score difference does not support further study. JAMA Oncology. 2021 July 1. Online ahead of print.



Social Media Highlights

On June 16, the main VA Twitter account tweeted to its over 600,000 followers about a study from VA Portland on COVID-19 antibodies in previously infected patients.



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#VAResearchNewsBrief: Most adult #COVID-19 patients develop antibodies, according to a review by @vaportland researchers bit.ly/35vhXPk

@VAResearch #VeteransHealth #COVIDResearch



8:30 PM · Jun 16, 2021 · Salesforce - Social Studio

5 Retweets 2 Quote Tweets 15 Likes

On June 21, VA tweeted about the development of better-fitting artificial limbs by VA researchers, in recognition of VHA's 75th anniversary.



Did you know VA established the standard for developing better-fitting, lighter artificial limbs through studies of human locomotion, enhanced surgical techniques, and modernized design and manufacturing methods in 1947? #VHA75 #DidYouKnowVA

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To learn more about VA, visit **www.VA.gov**.



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15 Retweets 1 Quote Tweet 35 Likes

If you would like to submit a post to go on the VA Research Facebook, Twitter, or Instagram pages, please do so via email at ORDMedia@va.gov.

Please include the following information:

- Desired platform: Facebook, Twitter (240 character max), or Instagram
- Post content
- Image
- Link

After the above are submitted, the request will be forwarded to the ORD Communications team for approval and scheduling. Posts may also be added to a library of potential stories to be picked up by other VA social media accounts, such as the main VA pages.

VA Research in the News

In "The VA never stops its search for treatments for PTSD," Dr. Terri Gleason was interviewed by *Federal News Network* on June 24 about VA's work to develop and test new treatments for PTSD. Dr. Gleason explains how ORD's PTSD research includes preclinical through clinical studies, ranging from looking at the biological basis of PTSD to how to implement treatment in clinical practice. She explains how VA research into PTSD depends on Veteran volunteers, and reviews some of the areas being researched, including how to improve psychotherapies and the search for new medications. Dr. Gleason also touches on the importance on multi-site trials and how to disseminate findings across the nation.

Research Photo of the Month



Dr. Madeleine Hackney of the VA Center for Visual and Neurocognitive Rehabilitation in Decatur, Georgia, demonstrates an adaptive tango intervention. Her studies focus on the use of dance to enhance the well-being, cognition, and coordination of geriatric patients and those with Parkinson's disease.

Do you have photos of VA researchers in action or interesting science images from your lab? Share them with us! Send you photos to ORD Field Update editor Tristan Horrom at <u>tristan.horrom@va.gov</u>.



The next ORD Monthly Field Call will be held on July 19, 2021, at 1:30 EST on Microsoft Teams.

Achievements and Milestones

We are looking for VA researchers who served in the military to feature in a series called <u>VA Researchers Who Served</u>. The profiles explain the critical work that VA researchers do for the Veteran community and at the same time highlight and recognize their military service.

If you know a VA researcher who would be a good candidate for this series, please contact Mike Richman (Michael.richman1@va.gov).

Awards

Dr. Rory A. Cooper, director of the Human Engineering Research Laboratories (HERL), <u>has received</u> the 2022 IEEE Technical Field Award for Biomedical Engineering "for his extensive contributions to wheelchair technology that has expanded mobility and reduced secondary injuries for millions of people with disabilities." The Institute of Electrical and Electronics Engineers (IEEE) is the world's largest technical professional organization dedicated to advancing technology for the benefit of humanity. Each year, IEEE selects awardees whose exceptional achievements and outstanding contributions have made a lasting impact on technology, society, and the engineering profession. <u>HERL</u> is a collaboration between VA and the University of Pittsburgh.

History Corner



Inventing the CT scan—Dr. William Oldendorf, who is credited with pioneering the theory behind the computed tomography (CT) scan and other forms of medical imaging, was a neurologist at the Los Angeles VA Medical Center in the late 1950s when he received a \$3,000 grant from the hospital to pursue his research. He used part of the money to build a prototype of a CT scanner in his home—using, among other things, tracks from a model train set. Oldendorf won the prestigious Lasker Award in 1975, and was later nominated for a Nobel Prize.

Anyone interested in receiving general news updates about VA research is invited to <u>sign</u> <u>up</u> for our VA Research Currents and VA Research Spotlight monthly emails.



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