

PHYSICIAN PROFILE

#### **Service to others**

Giving back is central to Eric Ryan, MD, the Medical Society of Metropolitan Portland's new resident trustee.

#### FOCUS ON MEN'S HEALTH

### Improvements in prostate care

Area physicians are employing new treatments for prostate health.

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July 2019

## The Scribe to move to all-digital format in August

Accessibility, growth at root of change for publication, which has connected, informed area's medical community for three-plus decades

#### **By Cliff Collins** For The Scribe

The history of *The Scribe* during the past 36 years is a record of the history of local medicine over that same period.

In January 1983, when what is now the **Medical Society of Metropolitan Portland** launched the publication, managed care was starting to spread, a development not to all physicians' liking. Some derided it as "cookbook medicine."

The town and medical community were smaller then. Many physicians referred to Oregon Health & Science University as "the school," where a large percentage of MSMP's membership trained.

Most doctors were still independent, and a common theme stressed during

#### NOTE TO OUR READERS

Welcome to the electronic version of *The Scribe* newspaper. Please make note of some of the interactive features of this publication. Articles that jump between pages have hyperlinks on the continuation line for your convenience. We have also linked advertisements and other web references to their respective websites.

You can double-click the page to zoom in or out, and grab and drag when zoomed in, to navigate around.

If you would prefer a print version of this paper, we encourage you to subscribe by calling 503-222-9977 or emailing *Janine@MSMP.org*.

We welcome your feedback, and appreciate your readership.

Thank you.

the mid-1980s was the importance of preserving the private practice of medicine. Consolidation was becoming evident in the Portland area by the late 1980s, as medical groups grew bigger and hospitals began merging and vertically integrating into larger health systems.

Into the 1990s, the paper covered the apex of capitation, when specialists felt marginalized and hospitals got dubbed "cost centers." The Scribe also documented the creation and growth of the Oregon Health Plan and the development of a statewide trauma system, organ transplant centers and ambulatory surgery centers. The paper reported on the "arms race" of hospitals competing to buy expensive diagnostic equipment; Medicare's implementation of prospective payment; the still-increasing trend of physicians being employed by health systems; and the state's formation of CCOs. These and many other significant topics were described in detail in The Scribe's pages.

The newspaper itself, which has gone under the official title The Portland Physician Scribe for most of its existence but colloquially was, and now formally is, known as *The Scribe*, was a principal source for local and regional health care information in general, not just news for MSMP members. Government and hospital administrators, too, turned to it to keep up with fast-changing events as health care began undergoing rapid change.

In more recent years, *The Scribe* has continued to strive to serve as a positive force for connecting the medical community – including providers of all ages and areas of emphases, from new doctors and physician assistants to retired physicians – delivering general medical news, wellness information and resources, and continuing educational opportunities.

In addition, *The Scribe* has been there all along to tell readers about interesting individuals' lives, both inside and outside of work, people whose profession is devoted to taking care of others.

None of this is going to change. From its beginnings, *The Scribe* was, and remains, the principal physicians' newspaper in the

Portland metropolitan area. The paper plans to continue to be the voice of health care providers into the future – only now, after this month, it no longer can be considered a paper, per se. Like much of the rest of the journalistic world, *The Scribe* is converting to an all-digital format, beginning with the August issue.

In doing so, *The Scribe* is on pace with what is happening with many other publications, and it intends to be even more convenient for members and readers, allowing them to access *The Scribe* on computers, tablets or mobile devices. It also gives readers the option to download a mobile app to optimize readability, view interactive flipbooks with clickable links, and read select highlighted articles plucked from each edition that can be

See **THE SCRIBE,** page 10



A longtime writer's perspective

I began as a contributing writer for *The Scribe* in June 1984, 18 months after the Medical Society of Metropolitan Portland founded the paper.

Of the total 17 editors who have helmed *The Scribe*, I've worked with all but the first. I feel really fortunate to still be involved. A number of talented people have written for the paper over the years, and still do. My tenure has not been an unbroken stream: I left for two separate periods, once for a year and another time for eight months. But all told, I've been a contributing writer to the paper for just over 33 years. Thus, I calculate that I've penned articles in approximately 750 editions.

Coming from a clan sprinkled with editors and writers, I was raised with an affinity for newspapers, and value the tradition of newsprint. Back then, I observed the impact of television on my kinfolks' industry. Similarly, *The Scribe*, created in the pre-internet era, increasingly has faced the challenges related to the dramatic growth of online consumer use and advertising.

Therefore, I took philosophically MSMP's decision to cease publishing *The Scribe*'s print version; I've been somewhat expecting that the print edition wouldn't last a lot longer. The change to all-digital seemed inevitable and fits with what is occurring in the rest of the world in terms of journalism and advertising.

I am honored and grateful that MSMP and *The Scribe*'s editors have had enough confidence in me to continue to use me as a contributor for all this time. I'm optimistic knowing that the Medical Society's leadership still believes strongly in the value of having *The Scribe* as a member benefit, and as contributing to MSMP's mission.

Starting next month, the way we all access and view *The Scribe* will change, but the dedication everyone involved with the publication brings to delivering timely, relevant news to area physicians and other providers will continue.

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#### SCRIBE Staff

Barry & Melody Finnemore, Editors Scribe@MSMP.org • 360-597-4909 Sarah Parker, Advertising Sales Sarah@MSMP.org • 503-944-1124 Heather White, Graphic Design Heather@Pixel37design.com

#### SCRIBE Contributors

Jon Bell, JonTBell@comcast.net Cliff Collins, tundra95877@mypacks.net John Rumler, Rumler@hevanet.com

#### SCRIBE Subscriptions

Janine Monaco Caswell Janine@MSMP.org

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10 a.m. – 11:30 a.m. , Friday, July 26 1221 SW Yamhill St., Ste. 410, Portland

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We hope to see you on Friday, July 26 at 10 a.m. for our next gathering.

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with volunteer work at homeless shelters, soup kitchens and various safety-net programs in and around Colorado Springs.

By John

Rumler

For The Scribe

While still in

grade school, Eric Ryan was

already assisting his parents

"Reaching out to others has been on my radar since I can remember," says Ryan, MD, the **Medical Society of Metropolitan Portland's 2019–'20 resident trustee.** "From a medical standpoint, I think it's our duty to help those who are most vulnerable. While it does present unique challenges, that just makes it more rewarding."

Upon graduating from high school in 2009, Ryan joined a mission to Kenya, where he helped set up computer labs and assisted in several building projects throughout the summer. During his college years at the University of Colorado in Boulder – where he graduated with a degree in molecular biology – Ryan took

"Reaching out to others has been on my radar since I can remember. From a medical standpoint, I think **it's our duty to help those who are most vulnerable.** 

While it does present unique challenges, that just makes it more rewarding." – *Eric Ryan, MD* 

trips to Uganda and worked alongside both volunteer and local physicians.

Now a regulatory compliance attorney in Denver, Jeremy Adair has known Ryan almost since kindergarten, and has watched him grow into a terrific friend,

doctor and community advocate, he says. "I first became aware of Eric's deep level of commitment and selfless nature

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## Service to others central to new MSMP Resident Trustee Eric Ryan, MD

when he volunteered for multiple medical missions to Africa. He contracted malaria there while caring for others, and he was completely undeterred even though he was hospitalized."

While earning his MD at the University of Colorado School of Medicine, Ryan participated in other volunteer and research projects aimed at helping low-income populations, decreasing harm from opiates, and providing effective, safe pain management.

His mom was an obstetriciangynecologist for many years, and his dad is still a family doctor in Breckenridge.

His dad, Steve Ryan, noted Eric's ability to develop caring relationships and an "innate desire to go wherever he could to help those in need."

"His first volunteer work was going with our church's youth group to go to camps around the country to build and repair their facilities," Steve Ryan wrote via email. "It was a great 'giving' opportunity, and the kids also learned valuable work and construction skills. When he was in college, and medical school, he would work with us at Urban Peak, a shelter in Colorado Springs for homeless youth

up to age 21. We cooked meals and tried to help them feel cared for and protected. As a young man himself, he related particularly well and it was great to see him establish a terrific caring relationship."

Ryan wanted to be a doctor early

on, partially inspired by his parents but also due to his love of science. Early in medical school, he became attracted to cardiothoracic and trauma surgery, yet something was missing.

Later, during his internal medicine and ICU rotations, he enjoyed building relationships with patients, their families and members of the health care team. These



experiences instilled the desire to work as a hospitalist, and serve as the "quarterback" for the patients' hospitalization and overall health, he says.

"I'll most likely spend at least a few years as a hospitalist, but I'm also very interested in both critical care and nephrology."

Ryan says MSMP Trustee Eric Burgh, MD, the previous resident trustee, was instrumental in his becoming the current resident trustee. The two met at Providence Portland Medical Center, where both are internal medicine residents.

"Eric planted the seed, he inspired me," Ryan says. "He made it sound like such a unique opportunity to work with an amazing group of people that I had to try it."

One thing he hopes to accomplish, Ryan says, is to help out with challenges around opioids, something that's been on his radar for several years.

He's completed training to prescribe the much heralded Suboxone, a combination of buprenorphine, a partial opioid agonist, and naloxone, a pure opioid antagonist, as helping his patients safely manage their pain is one of his most important challenges, he says.

"Opioid-based problems seem to be bad everywhere," he says. "From what I've seen, I think it might be worse in Oregon than it was in Colorado."

His overseas missions, at a relatively young age, have helped shaped his worldview. The trip to Kenya and to Uganda twice were made possible by one of his mothers' colleagues, who led medical volunteer trips every summer from Colorado Springs.

"In 2011, I met a surgeon, Dr. Opio, who invited me back to Uganda the next summer, so I went again in 2012 and stayed for seven weeks," Ryan says. "Although I was still in college and didn't learn much applicable medicine, I got to see, in a very profound way, how we can interact with the people and the world around us for the betterment of all."

One area of indulgence for Ryan is attending rock concerts.

Eric Ryan, MD, MSMP's new resident trustee, shown here with his dog, Beckham, says serving on the organization's board represents a "unique opportunity to work with an amazing group of people." Photo courtesy of Kimberly (abral, MD

"I go to a ton of shows," he says. He's flown all over the country to see various Grateful Dead spin-offs and has seen Phish upwards of 30 times. He also has visited dozens of big-city zoos.

Growing up in the shadows of the Rocky Mountains, with 300-plus days of sunshine annually, Ryan spent many weekends skiing, snowboarding, rock-climbing, bicycling and hiking.

As he wanted to live in a location that offered similar activities, Oregon seemed a good fit. He moved to Portland in June 2018 to begin his internal medicine residency at Providence.

After one year, he's feeling at home in the City of Roses and relishing his challenges as a resident. Emma White, MD, is a senior resident in the same internal medicine clinic as Ryan. The two have worked together on many occasions with patients who are often underserved and sometimes struggling with opioid addiction.

"Eric is truly a special human being. He has a great personality and a penchant for sparking joy in almost any situation," White says. "He works tirelessly to serve, support and advocate for patients and to find the best medication-assisted treatment option to fit their needs and help them through the tricky induction process."

Adair also thinks that Ryan has the abilities, skills and pragmatism needed to help stem opioid addiction.

"Eric understands the multifaceted nature of opioid addiction, how it's tied to mental health and a host of issues. He's neither naive about the challenges people face, nor is he blindly optimistic about treating addiction. His uncanny ability to provide succinct and pertinent counsel is a skill that's difficult to teach and a hallmark of an effective provider."

## Breast cancer, methamphetamine addiction focus of 2019 Circle of Giving research grants

Triple-negative breast cancer and methamphetamine addiction are the focus of two Oregon Health & Science Universityled research efforts that received funding support recently from the **OHSU Center for Women's Health Circle of Giving**.

The projects, one by **Milky Kohno**, **PhD**, and the other by **Wassana Yantasee**, **PhD**, **Amanda Lund**, **PhD**, and **Shiuh-Wen Luoh**, **MD**, **PhD**, each received a \$125,000 Circle of Giving 2019 grant.

Kohno's project is titled "A Clinical Trial for Women with Methamphetamine Use Disorder: Addressing the Critical Need to Identify Functional Brain Differences and Treatment Effectiveness."

Previous research shows that women are particularly vulnerable to the addictive properties of meth, and are more likely to have severe withdrawal symptoms. But there is little understanding of how women are more vulnerable to methamphetaminerelated inflammation caused by the drug's extreme toxicity, OHSU said in announcing the grant recipients.

Neuroimaging data compiled by Kohno, an assistant professor of psychiatry in the OHSU School of Medicine, indicate that female meth users exhibit more inflammation than their male counterparts because of stronger connections between brain regions that process reward and emotion.

The Circle of Giving grant to Kohno will reduce barriers for women to participate in an existing clinical trial of ibudilast, an anti-inflammatory drug to treat methamphetamine use disorder. By recruiting more women, this study has the potential to identify sex-specific abnormalities in inflammation, brain dysfunction, and the efficacy of treatment to limit drug dependence and withdrawal.

"In order for science to promote the development of tailored treatment approaches, it is imperative that more women are recruited to participate in clinical studies. This funding from the Circle of Giving will allow us to do this," Kohno said. "Through a comprehensive in-depth analysis of sex-specific abnormalities, and the identification of biological difference that have substantial brain impact, our forthcoming work has the potential to reduce the barriers that women face when trying to obtain, or stay in, drug treatment, as well as extend treatment approaches for a number of neuropsychiatric and neurodegenerative disorders that disproportionately impact women.

The National Institute on Drug Abuse estimates that about 965,000 Americans reported methamphetamine use disorder in 2017.

A goal to increase

survivorship

More than 268,000 U.S. women are expected to be diagnosed with invasive breast cancer this year. About 20 percent of the cases will be triple-negative breast cancer, or TNBC, the highly aggressive form of the disease that doesn't contain any common breast cancer receptors. As it stands, TNBC is treated by surgery,

chemotherapy, radiation and some immunotherapies, but because it is highly aggressive, it has a higher recurrence rate and a lower rate of overall survival.

With the Circle of Giving grant, School of Medicine faculty Yantasee, an associate professor of biomedical engineering, Lund, an assistant professor of cell, developmental and cancer biology, and Luoh, associate professor of medicine with the OHSU Knight Cancer Institute and medical oncologist at the VA Portland Health Care System, will work to develop a vaccine strategy to boost anti-tumor T cells in TNBC patients. Using a mouse model, and a novel delivery mechanism, their goal is to train women's own immune systems to fight cancer in a more personalized, efficacious and cost-effective way.

"This generous grant from the Circle of Giving not only allows us to extend our cancer vaccine work, but it inspires us to work even harder and faster toward our goal to translate our research into a viable therapeutic that will increase TNBC survivorship across the globe," Yantasee said.

During its 13 years, the Circle of Giving has awarded more than \$2.5 million in support of 22 OHSU-led pilot studies. Each \$125,000 grant, which comprises members' philanthropic donations, allows researchers to obtain the pilot data required to apply for larger grants such as those from the National Institutes of Health. Previously funded projects focused on everything from ovarian cancer to women's cardiac disease and beyond. Circle

of Giving support also helped start the breakthrough gene-editing research of OHSU's Shoukhrat Milalipov, PhD, Paula Amato, MD, and colleagues.

#### *Immunization conference for providers set for mid-August*

The 2019 Northwest Immunization Conference, which in part will feature clinical skill building, vaccination best practices, strategies to communicate with parents about vaccine concerns, the CDC Pink Book course and more, will be held Aug. 13–15 at Portland's Sentinel Hotel.

The event, hosted by the coalition Immunize Oregon, will feature the Epidemiology and Prevention of Vaccine-Preventable Diseases (Pink Book) course, which will be presented by Centers for Disease Control & Prevention experts.

Providers may attend one, two or all three days of the conference, for which Legacy Health – a partner agency to Immunize Oregon – is offering as many as 22 CME credits for the three days.

The first day will feature clinical skill building, vaccination best practices and communication strategies as well as opportunities to learn about community health advocacy.

Day two and three will provide a comprehensive review of pediatric, adolescent and adult vaccinations, including recommended vaccination schedules, vaccine ingredients, effectiveness and safety, and the diseases the vaccines prevent. The CDC Pink Book course, a nationally recognized training, is designed for physicians, nurses, medical assistants, pharmacists, immunization providers, program managers, and nursing and medical students seeking the most comprehensive and current knowledge around immunization.

For more information, and to register, please visit www.immunizeor.org/nwic.

### Late OHSU researcher/educator described as 'brilliant,' admired friend and colleague



Mark Asquith, PhD, investigated microbiome and immune system, establishing research collaborations worldwide

**Mark Asquith, PhD**, research assistant professor in Oregon Health & Science University's Department of Medicine, Division of Arthritis and Rheumatic Diseases, died June 6 of a brain aneurysm. He was 36.

Asquith was described as a promising young scientist investigating the microbiome and immune system. He had established research collaborations all over the world and became an admired friend and colleague everywhere he worked or studied. Tributes have poured in from the United Kingdom, Italy, Australia, Canada, China and throughout the United States, OHSU said.

Asquith earned his BSc from the University of Nottingham, in the United Kingdom, in 2004, his MSc from the London School of Hygiene and Tropical Medicine at the University of London in 2005, and his PhD from the University of Oxford School of Pathology in 2010.

He joined the OHSU faculty in 2013, following a postdoctoral fellowship in the lab of James Rosenbaum, MD, professor of ophthalmology, medicine and cell biology, OHSU School of Medicine. Rosenbaum is the Edward E. Rosenbaum Professor of Inflammation Research and head of the Division of Arthritis and Rheumatic Diseases.

Asquith established his lab under Rosenbaum's mentorship with a focus on better understanding the role of the microbiome

in the development of chronic inflammatory diseases such as ankylosing spondylitis, inflammatory bowel disease and uveitis. His goal was to identify novel diagnostic and therapeutic approaches based on the microbiome for these inflammatory diseases.

Just prior to his death, Asquith had completed the submission of his first completely independent, National Institutes of Health R01-funded project with Rosenbaum, marking a major milestone in the young scientist's career.

"Mark was brilliant," Rosenbaum said. "He always knew more than I did, and he always shared this information modestly. He was working on a fundamental puzzle in human biology: What is it about a specific gene called HLA B27 that made it more likely to develop arthritis of the spine? The puzzle was recognized 46 years ago and remains unsolved, but Mark was closer to the solution than anyone in the world. I hope that the lab we shared can honor his legacy by continuing his work."

Asquith was a recipient of grant awards from the National Institutes of Health, Collins Medical Trust, The Medical Research Foundation, the Spondylitis Association of America and the Rheumatology Research Foundation. He was a recipient of the Jane Bruckel New Investigator Award from the Spondylitis Association of America, recognizing him as one of the country's most promising investigators of ankylosing spondylitis.

A private memorial service was held June 9.

Asquith is survived by his family, including his mother, Jo, and three brothers. At the request of his family, the OHSU Foundation has created the Dr. Mark Asquith Fund to honor his work, continue his legacy and support future research in the rheumatology field.

For more information about making a donation in his honor, please contact Chelsea Benedict, director of development at the OHSU Foundation, at benedicc@ohsu.edu.



Each month, *The Scribe* focuses on a health topic, providing a deeper look into issues and advances that impact the area's medical community and patients. In August, we'll focus on Medical Education.

## Area urologists employ new techniques to treat prostate disorders

**By Jon Bell** For The Scribe

Advances in health care are happening all the time. New treatments for cancer, robotic surgeries and the latest and greatest pharmaceuticals seem to constantly be pushing the field forward. It happens across medicine in general, but also in very specific fields, including urology.

The three physicians at **Providence Urology Clinic East – John Gunselman, DO, Nicholas Boncher, MD**, and **Joseph Gillespie, MD** – have been employing some of the most advanced tools and



treatments for prostate health in recent years and seeing solid results. For years, a biopsy on the prostate to test for cancer has long been a standard procedure. It's usually done in the office setting with an ultrasound probe and a needle that goes

through the rectal wall to access the prostate. That last part of the description often requires physicians to administer antibiotics to prevent infection.

"Traditionally the procedure has been very safe and it's well tolerated by patients," Gunselman said. "The downside is that we have to give antibiotics because we are doing it through the rectal wall and there's lots of bacteria in there."

Over the years, however, infection

rates have increased thanks to the rise in drug-resistant bacteria. Where once there used to be about a 1 percent risk of infection, now that's grown to between 2 percent and 4 percent. On top of that, Gunselman said a larger percentage of those infections require hospitalization and antibiotics administered by IV.

That reality prompted Gunselman and his colleagues to look into a new procedure called transperineal prostate biopsy. The procedure uses a needle to biopsy the prostate through the skin of the perineum, which has a much lower risk of infection than the more standard procedure. In fact, Gunselman said the infection rate is less than .5 percent, but of the 25 or so biopsies done via the procedure at Providence Urology Clinic East so far, there have been zero infections.

Gunselman said the 20-minute procedure, which is done under local anesthesia, also allows for a more thorough biopsy of the prostate, including the anterior prostate, which can occasionally be missed through the other approach. The clinic has been performing the procedure since about March and may be the only one in the metro region doing so. He added that the only reason the new procedure couldn't be used on a patient is if the patient had a skin rash or infection in the area.

"Overall, we have found that patients are doing well with it," Gunselman said. "They are getting good biopsy results, we've had zero infections and the procedure

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#### Don't miss this article!

In 2018, the Cleveland Clinic released a survey that found that many men simply aren't proactive about their health. Other surveys bear this out.

Given that reality, clinics such as Northwest Primary Care have developed a strategy to draw in, and maintain, males young and old as patients. Trudy Suski, the organization's corporate communications and marketing director, said its strategy combines everything from paid advertising and blogging to its physicians volunteering to support high school athletes and the area's free clinics.

#### To read more, please visit www.MSMP.org/MembersOnly.

was quick to learn, so it's a win-win for everyone."

Another relatively new technique the clinic has been using is for patients who are receiving radiation for the treatment of prostate cancer. While radiation can be effective in treating prostate cancer, traditional approaches subject nearby structures to the same radiation, which can impact and damage them. One solution is to inject SpaceOAR hydrogel, a bio-absorbable gel, in between the prostate and the rectum to provide a buffer so there's less radiation exposure to areas around the cancerous prostate.

"Most patients who are getting radiation for their prostate cancer are eligible for that," Gunselman said, adding that multiple double-blind trials have shown promising results.

There have also been some advances made in the world of benign prostatic hyperplasia, also known as prostate enlargement. The common condition finds the prostate becoming enlarged to the point that it constricts the flow of urine in the urethra. Boncher said early symptoms include more frequent urination and also the inability to empty the bladder completely. Many men, he said, are reluctant to talk about it and think they can live through it, even if that means waking up multiple times throughout the night and disrupting their partners.

"They tend not to bring it up and think, I'm getting up four times a night, I can live with that," Boncher said. "Well, you know what? I have a two-year-old and if I only get up two times a night, I'm lucky. Four times? Dude, this is not viable."

Several treatments have been developed over the years to relieve the constraint. The most common is known as transurethral resection of the prostate, which Boncher described as essentially a "scraping out" of the core of the urethra. While it's effective, he said it's not comfortable and comes with a range of possible side effects, including up to six weeks of pain during urination, incontinence, erectile dysfunction and infection. "It's miserable," Boncher said. "It's a

rough procedure."

Several drugs have proven effective at treating BPH, as well, but Boncher said their efficacy decreases over time and they may really only delay the TURP procedure by five or 10 years. Additionally, two drugs, Flomax and Hytrin, have been linked to symptoms of dementia, so Boncher said he and other physicians can no longer prescribe them in good faith.

A new procedure that has emerged in the past five or six years is called UroLift. Developed by a company called Teleflex Incorporated, the procedure essentially involves compressing the tissue of the



"Overall, we have found that patients are doing well with it. They are getting good biopsy results,

> we've had zero infections and the procedure was quick to learn, so it's a win-win for everyone."

– John Gunselman, DO, on transperineal prostate biopsy

enlarged prostate and securing it with a tiny, stainless-steel clamp. Doing so on either side of the urethra opens up the canal and eases the constraint.

"It's like opening up the curtains and securing them with a sash," Boncher said.

He said the procedure is done in the hospital and the recovery time is about a week. There is little risk of the side effects that accompany TURP, and though the results don't appear to be quite as effective as TURP, most patients report substantial improvements on the International Prostate Symptom Score, a screening tool used to assess BPH. Boncher said patients who get TURP often improve by about 15 points; with UroLift, he's seen improvements of between 10 and 12 points, which still shows substantial improvement in patients.

"I have been really impressed with the company. They're putting safety first; there's lot of patient training," Boncher said. "I think as more and more people go this route, we'll see increasing numbers of good results."







## **Studies: Patient-centered messaging improves** rates of colorectal cancer screening among Latinos

Though colorectal cancer is the second-leading cause of cancer death among U.S. men and women, more than 60 percent of deaths could be prevented each year through screening.

Despite this, one-third of adults are not up to date with their colorectal cancer screening, and the numbers are markedly lower for certain underserved populations, including Latinos, the uninsured and recent immigrants, the Kaiser Permanente Center for Health Research noted.

Gloria Coronado, PhD, an investigator with the Kaiser health research center in Portland, has conducted several research studies on preventing colorectal cancer, particularly among Latino populations. Most recently, she led an investigative team on a large Participatory Research to Advance Colon Cancer Prevention trial testing the effectiveness of outreach and messaging for mailed colorectal cancer screening programs among Latino patients at community health clinics.

The results of the so-called PROMPT study, along with companion research exploring the use of culturally relevant communications using Boot Camp Translation (BCT), appeared in the May/June 2019 issue of the Journal of the American Board of Family Medicine.

Compared with 60 percent of non-Latino

white men and women, only 42 percent of Latino men are up to date with colorectal cancer screening guidelines. Coronado and her team noted that a contributing factor to the low screening rate is the difficulty Latinos encounter in understanding health information and taking preventive health actions.

"Language, literacy and cultural factors are critical to address if screening rates are to improve," Coronado noted in a news release.

In the two side-by-side studies, researchers compared the effectiveness of automated and live prompts and reminders as part of a mailed fecal immunochemical test outreach program at Latino-based health clinics operated by a large Los Angeles community health center. They also evaluated the literature on colorectal cancer screening interventions among Latinos to characterize intervention components effective in increasing screening and used BCT, the patient engagement approach in which complex medical information is translated into concepts, messages and materials that are meaningful and engaging to targeted community members.

"Boot Camp Translation provides a novel way to work directly with patients early in the research process, ensuring that study messages and materials are not only relevant to participants, but also culturally relevant," said Jamie H. Thompson, MPH, lead author on one of the studies. "This patient engagement approach honors the local and cultural aspects of a community within the context of evidence-based health care."

The PROMPT pilot study included 1,767 adults, 50 to 75 years old, who were not up to date with the colorectal cancer screening recommendations of their L.A.area community health center. In addition to a mailed FIT kit, participants were randomized to receive a text message prompt and two automated phone call reminders; as many as three live call reminders; or a text message prompt, two automated call reminders and up to three live reminders.

Results of the study, funded by the National Institutes of Health National Institute of Minority Health Disparities, show that nearly one-third of participants completed a FIT within six months, with completion rates higher in those adults who received live call reminders or the automated calls combined with live call reminders. Both outperformed automated calls alone.

The study was designed based on patients' preferences for the timing and content of messages obtained from BCT. These included personalized messages, such as using "I" and "we" statements, that stress the urgency of colorectal cancer screening and the importance of family, and that are delivered within two weeks of the FIT kit mailing.

"Our ultimate goal is to help community health centers, which are the largest providers of primary care to our most vulnerable and culturally diverse communities, increase the effectiveness of the reminders by ensuring they meet the specific needs of their clients," Coronado said. "With such a large number of individuals receiving care in the safety-net setting, an improvement in CRC screening rates of even a few percentage points can have a major impact in terms of cancers detected and lives saved."



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the likelihood of developing physical impairment by about 25 percent The study's senior author said the findings are exciting because

of the "notion that we have some influence over our physical independence as we get older." A news release about the results noted that although a person's ability to maintain independence and

to care for themselves are essential to healthy aging, few studies have looked at how a person's diet may allow some aging people to maintain physical function, completing everyday tasks such as bathing, getting dressed or negotiating stairs, while others' abilities diminish.

The research, by investigators from Brigham and Women's Hospital, involved examining data from more than 12,600 men from the Health Professionals Follow-Up Study, tracking them from 2008 to 2012. At the beginning of the period, all men were assessed for their ability to perform such activities as bathing/dressing themselves, walking one block, walking several blocks, walking more than a mile, bending/kneeling, climbing one flight of stairs, climbing several flights of stairs, lifting groceries, and moderate and vigorous activities. Men also filled out a food frequency questionnaire, with responses ranging from "never or less than once per month" to "six or more times per day."

Criteria from the Alternative Healthy Eating Index-2010 were used to assess the quality of each of the men's diets and assign an individual score. Researchers found that high diet scores, meaning better diet quality, were strongly associated with decreased odds of physical impairment, including a 25 percent lower likelihood of developing impairment in physical function with aging. An overall healthy diet pattern was more strongly associated with better physical function than an individual component or food. But researchers did see that greater intake of vegetables and nuts and a lower intake of red or processed meats and sugar-sweetened beverages each modestly lowered risk of impairment.

## From student athlete to Timbers Army member, sports play key role for Andrea Buckler, DO

#### **By Melody Finnemore** For The Scribe

Andrea Buckler, DO, was born into a family of athletes. Her grandfather was a track coach, her mom coached tennis and volleyball, and her dad coached basketball.

"I've spent most of my life learning to play sports in a gym somewhere," she said. "It was great, and my sister and I were always on a play structure or running around and having fun."

For Buckler, involvement in athletics helped shape her childhood, contributed to her pursuing a medical career, and has led her to participate in one of the ultimate fan experiences, the Timbers Army.

Buckler, who grew up in Vancouver, Wash., started playing T-ball and soccer in kindergarten, took dance lessons, and tried several sports as a young girl. In seventh grade, she settled on basketball and volleyball. Buckler said the camaraderie she built with her teammates blossomed throughout her school years.

"Those people were my best friends, especially my high school volleyball team. They were my best friends on and off the court. Several of us played year-round and went on to play in college as well," she said, adding they supported each other in putting in long hours of practice and competition while avoiding alcohol, drugs and other potential pitfalls for teens. "All of us wanted to be recruited and knew that good grades were important to get to the next level."

By the time Buckler entered Prairie High School, however, she had traded basketball for golf because she needed an outdoor sport that wasn't so hard on her body. She was 13 when she started having problems with her knees. She recalls an urgent care visit in which a physician looked at her X-rays and cited a bunch





Andrea and Evan Buckler Photo courtesy of Andrea Buckler

of jargon she didn't understand. Buckler asked her dad to translate – he is a former college basketball player who has had more than a dozen knee surgeries over the years – and he took her to the library to learn about the anatomy of the knee.

That experience, as well as high school biology and chemistry classes, inspired an interest in anatomy and physiology that led Buckler to pursue a career in medicine. "I think the body is the most amazing piece of equipment," she said. "It fueled my desire to look after the body and how I can help the body perform better."

While attending Seattle Pacific University on a volleyball scholarship, Buckler helped set up and dismantle experiments in the lab. She said she appreciates all of the great professors she had, particularly the biology and chemistry professors who understood the demands placed on student athletes and how it impacts their schedules.

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–Andrea Buckler, DO, on being a member of the Timbers Army

Buckler went on to earn her medical degree from Kansas City School of Medicine and Biosciences in Kansas City, Mo. She then completed her family medicine residency at Spartanburg Regional Hospital in Spartanburg, S.C., and a sports medicine fellowship with Family Medicine Residency of Idaho in Boise.

#### **Personal experience propels trust building with patients** While she was, in part, inspired to become a doctor after experiencing knee problems as a student athlete and chose family medicine with sports medicine to help people understand their bodies and empower them to take control of their health, Buckler said a negative experience drove her as well.

"Over the years I had some very positive interactions with physicians and I had some very negative ones. I had one guy tell me, 'Why don't you just quit sports?'" she said. "One reason I worked so hard to have good grades and didn't party or date a lot was because it was really important to stay on the straight and narrow. I didn't want to lose that opportunity to go to college and play sports. So, it was pretty soul crushing and like he was telling me to give up on my dream."

Buckler said her loss of trust in that physician plays a crucial role in the trust she builds with her patients at Providence Medical Group – Mill Plain in Vancouver. She noted that they are not going to follow her recommendations if they don't trust her.

"It's very important that my patients trust me and have faith that I have their best interest at heart," she said, adding she uses easy-to-understand language when talking with them about their conditions and often draws pictures to explain why they are in pain. Buckler also makes a point of being sensitive to student athletes.



"I do try to talk with an athlete about, 'What are your goals? How can we keep you active? And is it better to rest you now?" she said. "There are some situations where I have to pull a kid out no matter what, but maybe there are things they can do in practice to keep their skills up and still be part of the team and I'm not taking away what is important to them."

In addition to sports medicine, Buckler is board certified in osteopathic family medicine and specializes in treatments for a variety of ailments, including back and neck pain, headaches, sinus congestion and asthma.

And, while her knees and parenthood have sidelined her from playing volleyball, Buckler and her husband, Evan, a former soccer player, are avid members of the Timbers Army and devoted fans of the Portland Thorns. The Bucklers have owned season tickets since the Timbers joined the MLS. Being members of the Timbers Army has become a family tradition, as they participate with her inlaws in the fan group which, on its official website, describes itself as "(p)art carnival, part mosh pit, part revival meeting, part Christmas morning, filled with people from every part of the community and every walk of life ... (turning) each game into a celebration of its love of Portland, of soccer, and of the Timbers."

"Sometimes there is face paint involved and we are the crazy people who stand and sing," Andrea Buckler said. "It's such a fun time and there is so much energy. People are so excited to be there."

The Thorns' matches are especially fun for Buckler's 5-year-old daughter. "She loves seeing girls just like her on the field," she said. "When I was growing up the professional athletes who were women were tennis players and the WNBA was starting up, but there really weren't that many women playing at the professional level so it's great for her to see that."

Buckler also enjoys baking cookies, pies and other desserts in her free time. She has created elaborate cakes that she bakes in stages and then pieces together for birthdays and other celebrations. She made a Wonder Woman cake for her daughter's birthday and, in late June, was preparing to create another for her son's birthday celebration.

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### OHSU, UO plan joint center to study cancer through data science

Oregon Health & Science University and the University of Oregon in June said they plan a joint center in biomedical data science, with a focus on cancer and other lethal diseases.

The partnership brings together researchers at the UO's Phil and Penny Knight Campus for Accelerating Scientific Impact and the OHSU Knight Cancer Institute to detect and fight deadly forms of cancer and other diseases in a joint facility. The new center will develop new approaches to quickly and efficiently ana-



lyze large groupings of data, allowing researchers to "listen in" on cell development for early detection of lethal diseases, according to a news release. "Breakthroughs in early detection

and precision medicine require expertise in a variety of areas such as engineering, bioinformatics and genomics," said Brian Druker, MD, director of the OHSU Knight Cancer Institute. "By lever-

DRUKER, MD

aging each institution's strengths, we can maximize our combined research efforts and, ultimately, make the greatest impact for patients." The initiative, along with UO graduate programs in

#### THE SCRIBE, from page 1

easily shared on social media.

Just as MSMP has done in the past, it will continue to e-mail all members and subscribers a digital copy of the publication, which also can be accessed at MSMP.org on the second Tuesday of each month.

The Medical Society considers the transition to an all-digital format as not so much an ending but a new beginning.

'MSMP views the conversion of The Scribe to all-digital as simply a change to the method of delivery," said Executive Director Amanda Borges. "We will miss the physical, tangible medium, but members and readers can rest assured that The Scribe will continue to be a reliable, informative source of news that physicians depend on."

Moreover, most publications rely on advertising revenue to be sustainable, and The Scribe is no different. In response to generational and cultural changes, advertisers are moving away from print and gravitating to digital.

"Converting to digital allows us to reach a wider audience, build a sustainable, profitable future for The Scribe, and have the flexibility to cover important stories with fewer time restraints under the strict printing deadlines we faced previously," Borges said.

Inspire, educate and connect The move to 100 percent digital serves as an appropriate milestone to celebrate what The Scribe is and has been.

At the paper's birth, MSMP executives generally modeled the paper after the American Medical Association's American Medical News, which for many years was a tabloid-format periodical that concentrated on socioeconomic and political news for doctors. The Scribe took on these topics, with an emphasis on the local and regional, but it also broadened its approach, devoting monthly focus sections to specific subjects such as physical therapy or the business of medicine that are useful to doctors' practices. In addition, it covered new developments in local research, along with personal achievements by physicians and contributions they make to medicine and the community.

areas such as computer science, math, life sciences, ethics and soon-to-be bioengineering, will combine with OHSU's large-scale efforts in precision medicine to identify more quickly cell abnormalities that lead to cancer and other diseases. Earlier detection of lethal cancers represents the greatest opportunity to boost survival

> rates, and has been a priority for the cancer institute. 'This Knight-to Knight partnership

> is one of the many ways we're putting

Oregon on the national map in how

we translate discovery into impact,"

said Robert Guldberg, PhD, vice presi-

dent and Robert and Leona DeArmond

Executive Director of the UO's Knight



GULDBERG, PhD

inter-institutional center recognizing that conquering complex diseases like cancer requires a team effort and effective integration of laboratory science with big-data analytics."

Druker said the partnership will give the Knight Cancer Institute, as well as OHSU more broadly, a critical opportunity to engage the UO's Presidential Initiative in Data Science and initiatives to build capacity in

machine learning, computational genomics and images. He said the tools and expertise emerging from the partnership can be applied to research areas at both institutions beyond oncology.

The two universities said the collaboration reflects the vision of Penny and Phil Knight, lead donors for both the UO's Knight Campus and the OHSU Knight Cancer Institute. In 2013, the Knights pledged \$500 million to the cancer institute, contingent on OHSU raising a \$500 million match. Donors worldwide stepped up, and the campaign was completed in June 2015.

The UO's Knight Campus, announced in 2016, is made possible by a \$500 million lead gift from the Knights. In addition, \$70 million in state bonds support the \$1 billion initiative that aims to integrate research, training and entrepreneurship into a single interdisciplinary enterprise, with a first building scheduled to open next year.

The "Knight-to-Knight" partnership stems from a larger UO-OHSU collaboration that dates to 2017. Ten OHSU-UO research teams examining things such as health disparities and bio-inspired fractal implants were awarded funding to begin research as part of the program.



MSMP's leadership consciously crafted The Scribe to be as much of a true newspaper, not just a newsletter, as possible. It emphasized fair and balanced coverage, while still adhering to its dual role of serving as an advocate for physicians.

On the occasion of The Scribe's 25th anniversary in January 2008, then-Executive Director Rob Delf explained: "The plan and purpose have never changed: to be the reliable, readable, accurate and informed source of contemporary news about the profession of medicine in our community; to celebrate the successes of the profession; to inform the community about new strategies, advances and, yes, challenges; and to keep the readership connected to the community of medicine.'

Brenda L. Kehoe, MD, a past president and current trustee of MSMP, says these qualities are what make The Scribe so valuable, because it brings news specific to medicine, with a local focus, and 'speaks to us" as physicians, PAs and nurse practitioners. "We are privileged to read stories that inspire us, educate us, let us reach out to friends and peers; stories that offer insight, direct us to educational resources, and let us get to know our fellows, our peers, our compatriots even better."

The paper originally was produced inhouse using what was known as a wet process, with every page manually typeset and pasted on large sheets of paper. The internal designer then sent each edition to a contracted printing company. It was a highly labor-intensive process, and making corrections required a manual reformatting of a whole page, or even at times an entire edition.

With the advances of computers, word processing and publication software, production took far less time, resulting in improved graphics capabilities and easier editing.

Two years after The Scribe's creation, the paper altered its publication schedule from monthly to twice a month, in order to deliver more timely news. In July 2012, it returned to monthly release in order to increase its page count and advertising base in a challenging economic environment. In recent years, each issue of The Scribe has been available both in print as well as online at MSMP.org.

The people who produce The Scribe combine many decades of experience.

Current co-editors Melody and Barry Finnemore, a married pair of veteran journalists, have led The Scribe for more than six years, the longest stint of any editors who have filled that important role. Freelance graphic designer Heather White's redesign of the layout and banner of The Scribe will remain in its digital version, as she draws from her many years in the field to make the publication look its best.

Also still in place are longtime contributing reporters Cliff Collins (see accompanying story): Jon Bell, an Oregon writer for two decades who has contributed to The Scribe for a combined total of 14 years and spent a brief spell as interim editor; and John Rumler, a Scribe contributor since 2012 with 27 years of journalism experience.

"We still have the same outstanding team working on The Scribe," Borges said. 'l cannot overstate how wonderful it is to work with the dedicated people associated with The Scribe. They make this change easy to accomplish."





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