

ANNUAL MEETING UPDATE: PART IV

Meeting Briefs

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Dr. Horowitz is the editor of SGIM Forum, and Drs. Frank, Wong, and Santos are members of the editorial board.

Interest Group Activities

Toronto! Another outstanding SGIM meeting! While I could share many highlights from the colorful spectrum of exciting topics and experiences from Toronto's meeting, I will share with you my yellow theme: Interest Groups.

It never ceases to amaze me how alike we all are. We deal with similar patients, political and financial barriers, and intricate academic promotion pathways among other challenges. The necessity for guidance and mentorship continues to occupy the junior academician's mind no matter where he/she practices.

As the co-chair for the Academic Hospitalists Task Force (AHTF), I had the privilege of leading our interest group meeting. Despite the many amazing competing talks at 8 am on Thursday, attendance exceeded 30 people. Interest groups offer a venue to discuss common challenges of the profession. The AHTF members meet annually to share personal or institutional experiences that may help members network, seek collaboration, and triage "hot topics" that may need to be undertaken by a representing entity, such as the AHTF.

During our meeting, each attendee introduced him/herself and reflected on a personal or institutional challenge. Forty minutes into our conversation, after everyone had shared experiences, we grouped challenges by topic, and with the help of all attendees, identified the most important. Important topics were those that affected most members; posed a research question; aligned with the SGIM mission; and were not already being addressed by a task force, SGIM, or other representing society. The top

three topics selected were: 1) how to efficiently round at the bedside with a multidisciplinary team; 2) how to buy down time or obtain access to funding for academic/scholarly projects and research; and 3) how to optimize communication with other divisions, departments, or project leaders. These three topics have been added to the AHTF agenda. Additional topics currently being addressed via other avenues included the need for leadership and faculty development tracks, access to mentorship, standardization of job descriptions with performance metrics, and creating alternate or innovative promotion pathways.

I enjoy interest groups and attended many during the SGIM conference. Although interest groups may vary in their format or agenda, the ones I have attended provided me with a deeper understanding of the issues that pertain to that specific area of general internal medicine (GIM). Interest groups open the door to a network of possible future mentors, collaborators, and colleagues at SGIM.

—*Maria (Gaby) Frank, MD*

Pearls from April 23 Plenary Abstracts

Aligning with the meeting theme of teams, the MARQUIS study supports the use of trained staff, such as pharmacy techs for medication reconciliation on admission and pharmacists for discharge medications, in reducing potential medication errors at discharge. We learned that teamwork experiences can begin early in medical training, even for medical students learning from community health workers.

Open proposals using crowd sourcing can be a way to identify

potential quality improvement ideas from the ground up but still require infrastructure and expertise for further selection and implementation of projects.

From the clinical vignette we learned that *Staphylococcus lugdunensis* is a pathogenic coagulase-negative staphylococcus that behaves like *S. aureus*; endocarditis can be particularly morbid and lethal with this organism.

—*Chris Wong, MD*

Award Presentation Highlights

Nicole Lurie, MD, winner of the Robert J. Glaser Award, urged members to live a "whole life" as opposed to a siloed work-life balance concept. She reminded us that although we are in a time of chaos in health care, "there is a lot of opportunity in chaos."

Nancy Rigotti, MD, winner of the John M. Eisenberg National Award for Career Achievement in Research, was inspired by treating patients when their disease was at an advanced stage, leading to lifelong research in interventions to reduce smoking. She inspired us not to be discouraged if we had good ideas that were not initially supported. Dr Rigotti noted the successes of women "getting in the door" and the challenges of supporting women in academic medicine and enabling them to reach high levels of achievement. It is clear to Dr. Rigotti and to SGIM members that this year's awardees (including Drs. Donna Washington, Susana Morales, Carolyn Clancy, Julia Arnstein, Vineet Aurora, and Hollis Day) are an encouraging demonstration that this trend is being reversed.

—*Chris Wong, MD*
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Update in Women's Health

These sessions highlighted a number of important findings in women's health:

1. Ulipristal is a highly effective method of emergency contraception.
2. The newer HPV vaccine appears to be promising, but the improvement in efficacy over the current vaccine is incremental—small in comparison to the larger problem of overall low vaccination rates.
3. Menopausal vasomotor symptoms can persist for many years (median: 7.4 years). The widely quoted “two years” is not consistent with current data.
4. Estradiol (low dose) and venlafaxine show similar efficacy for menopausal vasomotor symptoms.
5. Risk factors for osteonecrosis of the jaw include duration of bisphosphonate exposure, age, diabetes mellitus, and rheumatoid arthritis.

—Chris Wong, MD

International Participation in the SGIM Annual Meeting

I was pleased to know that the meeting this year was to be held in Toronto, Canada, and I became even

more excited when I saw that several other countries, in addition to the United States and Canada, were actively participating with posters and workshops.

As would be expected, Canada had the largest delegation with 63 participants. The next largest representation was from Japan with 28 participants. There were also nine participants from Switzerland; two from the United Kingdom and Argentina; and one each from Singapore, India, and Australia.

I traveled to Toronto with five Japanese residents who were presenting posters. My residents were very impressed with the academic rigor of the meeting, and they returned inspired by the “Proud to be GIM” message. Many posters reflected the fact that we share similar challenges across our borders. For example, several posters from Japan described the challenges of caring for the elderly and end-of-life care, and a poster from Switzerland challenged the validity of the Vienna prediction model for recurrent venous thromboembolism in specific populations.

I congratulate the leadership for understanding that the SGIM goal of “increasing the visibility and status of primary care and general internal medicine” requires both national and international collabora-

tion. I believe that the 2015 Annual Meeting was a complete success in meeting this goal!

—Sadia Santos, MD

The SGIM PCORI Initiatives

Patient-centered, patient engagement, meaningful outcomes—these are the buzzwords in medical research and funding initiatives today. The PCORI Research Engagement Initiative at SGIM was in full swing and took center stage at this year's annual meeting. It began with the PCORI Keynote Address by Joe Selby, MD, and continued with workshops on learning health care systems and practices, pragmatic and patient-centered clinical trials, patient engagement in the PCORI process, and PCORNet big datasets. The SGIM Working Group on Engaging Primary Care Researchers in PCORI Research, lead by Jennifer Kraschnewski, MD, presented a balanced toolkit for GIM physicians new to this exciting area of research. The workshops were videotaped and will soon be posted on the SGIM Website. For more information on engaging in PCORI initiatives, contact Jennifer Kraschnewski or Leslie Dunn, SGIM director of project management, at dunnel@SGIM.org.

—Karen Horowitz, MD

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