

Family & Community MEDICINE

Summer 2001

PROMOTING EXCELLENCE IN GERIATRIC CARE AND RESEARCH

Family Physician Works to Improve Health and Care for Geriatric Patients

DR. DAVID MEHR is a nationally recognized expert in geriatrics today, a reputation he has earned because of his commitment — both as a clinician and a researcher — to improve health and medical care for geriatric patients. His concern for the health care needs of older people began 20 years ago, shortly after he completed his residency at MU. He was in private practice at that time, and many of his patients were elderly.

"I realized then that there was a huge group of people who weren't getting very good care," Dr. Mehr says. "I felt I could make a difference in their lives, so I trained myself in geriatrics."

He passed the certification exam in geriatrics before he completed a fellowship in geriatric medicine, an accomplishment achieved by very few physicians. It was while studying at the University of Michigan that Dr. Mehr discovered how much he enjoyed research, so after finishing his fellowship, he accepted a research faculty position there. Two years later, MU family medicine needed a geriatrician and contacted Dr. Mehr about the job. Confident that he would have more opportunities to pursue his specific research interests at MU, Dr. Mehr returned to Columbia in 1992.

In addition to his clinical and teaching assignments at MU during the past 10 years, Dr. Mehr has devoted much of his time to research aimed at providing better and more cost-effective care for nursing home residents with lower respiratory infection (LRI).

"LRI is a problem I saw frequently while in private practice, and as a clinician, I always wondered if I was treating it the right way," he explains.

"Every patient was different, but the decisions I faced were the same: Should I hospitalize the patient? What antibiotics should I use? Should I treat the infection aggressively?"

After looking to the research for answers, Dr. Mehr learned that everything published suggested pneumonia in older patients should be treated in the hospital. But very few physicians paid attention to this advice, he says.

"The opinions I read had no basis in fact," he says. "I concluded no one really knew the best way to deal with LRI, and this presented a perfect situation for me to start my research."

All of his papers begin with the statement: LRI is a leading cause of morbidity, mortality, and hospitalization in nursing home residents, and his hypothesis is that low-risk patients are better off if they are treated in the nursing home. Testing the validity of this hypothesis has been the goal of most of Dr. Mehr's research.

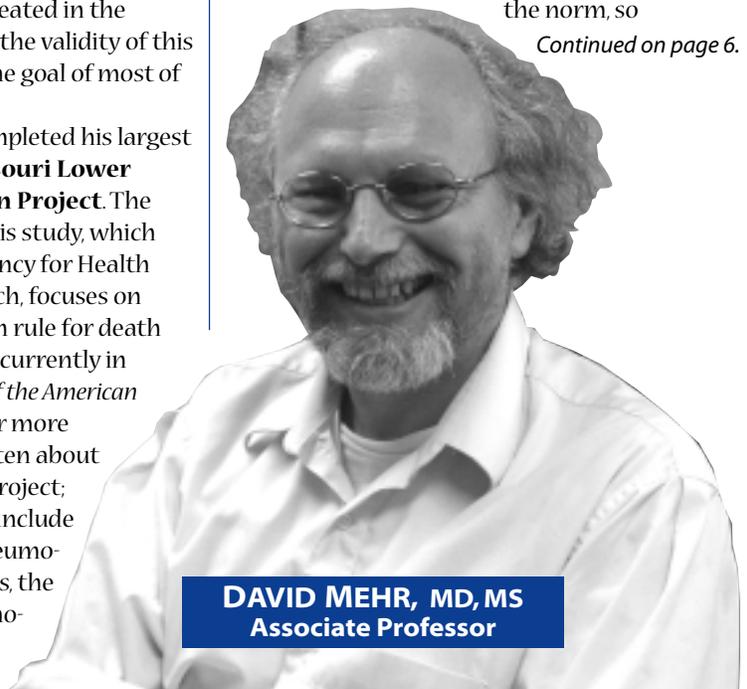
He has recently completed his largest study to date, the **Missouri Lower Respiratory Infection Project**. The principal analysis of this study, which was funded by the Agency for Health Care Policy and Research, focuses on developing a prediction rule for death from LRI. This paper is currently in review at the *Journal of the American Medical Association*. Four more papers have been written about data collected in this project; topics of these papers include how to distinguish pneumonia from other illnesses, the cost of treating pneumonia in nursing homes, advance directives in

nursing homes, and the functional decline of people with LRI.

LRI as a Terminal Event in US and Dutch Nursing Homes is the title of Dr. Mehr's current research project, and for the past year he has been on sabbatical in The Netherlands, serving as a visiting professor at the Vrije Universiteit Medical Center in Amsterdam, where colleagues have collected the Dutch data used in this study. Funded by the National Institute for Aging, this project compares how physicians in The Netherlands treat nursing home patients who have advanced dementia and develop LRI to how physicians in the United States treat comparable patients.

"People with LRI get treated more aggressively in the United States," he says. "Physicians in The Netherlands have a very different attitude. Comfort care is the norm, so

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DAVID MEHR, MD, MS
Associate Professor

FAMILY AND COMMUNITY MEDICINE

Chair's Message

WELCOME to another edition of our department newsletter. As I read the stories in this issue, I was reminded of how proud I am to be a family physician. It is a privilege to know and work with so many doctors, researchers, and teachers who are committed to making life better for large and diverse groups of people.

Life has improved for many geriatric patients, thanks to David Mehr's hard work and persistent efforts during the past 20 years (pg. 1). Nursing home patients with LRI are sure to benefit from his latest research.

Patients are the best part of their jobs, agree Drs. Kirsten Maakestad and Stan Dorst, and their positive attitude is reflected in the good care they are providing as the newest staff members at the Green Meadows Family Practice Clinic (pg. 3).

MU fellow Brian Alper is using his skills in information management to help develop the Family Practice Inquiries Network project (pg. 7). Brian is planning for a career that will help family physicians provide better and more effective care to patients.

It's exciting for us when married couples like Heather and Greg Sharp, whose values are so closely aligned with the department's values, train together in our residency program (pg. 5). They are concerned about the health care needs of underserved populations and plan to open a family practice in rural Colorado after residency training.

Patients' needs have always come first for former MU residents Jim Turner, Tim Long, and Kim Colter, so it's not surprising that the family practice they started in Washington, MO, 20 years ago has experienced such tremendous success (pg. 4). We feel fortunate that we had the opportunity to train these dedicated physicians.

Former MU resident and fellow Joe Stanford has always had an interest in academics (pg. 6). Today he is at the University of Utah, and even though much of his time is focused on research and teaching, he remains strongly committed to his patients and his role as their family physician.

We are pleased to share the stories of these special individuals whose work is truly making a difference.

HAL WILLIAMSON
Professor and Chair

FAMILY MEDICINE

Department News & Events

BETSY GARRETT was elected president-elect of the Society of Teachers of Family Medicine (STFM) at the 2001 STFM Spring Conference in Denver. She attended medical school and completed her residency and fellowship at the University of Missouri-Columbia (MU), and currently, Dr. Garrett is a professor of clinical family medicine at MU. As director of the family practice clerkship and the required ambulatory clinical experience for first and second year medical students, she has a major impact on predoctoral training at the University of Missouri.

A STFM member since 1983, Dr. Garrett served on the Society's Board of Directors as member-at-large from 1992-95 and as representative to the Association of American Medical Colleges Council of Academic Societies from 1995-99. She has been active in many other projects and committees, and in 1999, she received the President's Award from STFM.

"STFM brings together passionate, dedicated, talented, and diverse teachers of family medicine," Dr. Garrett says. "I am proud to serve as STFM president and look forward to working with the Board as we continue to define how to best lead and serve our members and the people and passions we represent."



Betsy Garrett, MD, MSPH

PRACTICAL IDEALISM: A BLUEPRINT FOR CARING was the theme of STFM's 2001 conference, and several MU family medicine faculty members participated in this year's program activities.

Dr. Dan Vinson presented "Alcohol and the Risk of Injury: A Case Cross-Over Study," the primary paper from his recently completed five-year alcohol and injury research project.

Dr. Erika Ringdahl, residency program director, and **Dr. John Delzell**, assistant director, presented "Evaluation of Interns by Faculty and Senior Residents on a Family Practice Inpatient Service" at the peer session on residency training.

Drs. Bernard Ewigman, Jim Stevermer, and Brian Alper participated in a number of program events, including planning and directing activities for one of the theme days. The theme of this all-day session was "Involving Every Family Physician in Using and Generating Knowledge."

James Campbell, PhD, presented a poster on one of his research projects titled "A Qualitative Study of Patients' Views Concerning Discussing Spiritual Issues With Family Physicians."

DR. JACK COLWILL, MU family medicine professor emeritus, and **Dr. Mike LeFevre**, MU family medicine professor and director of clinical services, are currently serving on an Institute of Medicine committee *Gulf War and Health: A Review of Literature on Pesticides and Solvents*. This 40-member committee, chaired by Dr. Colwill, includes toxicologists, epidemiologists, and physicians specializing in neurology, internal medicine and family medicine from across the nation. They are conducting an 18-month study on the potential hazards of pesticides and solvents used by the United States during the Gulf War, and after the study is complete, the committee will submit a report of their findings to Congress.

FAMILY AND COMMUNITY MEDICINE PROFESSOR DAN LONGO, ScD, was selected for inclusion in *Who's Who in the 21st Century*, a comprehensive guide for researchers of all levels. The guide will be published and distributed internationally later this year.

OUR MISSION TO HEAL

Since the early '70s, MU family physicians have been committed to providing excellent care and service. Today, the department manages four clinics, where annual patient visits total nearly 80,000. While the growth of family medicine's clinical program has positively impacted health care in many mid-Missouri communities, it has also presented new challenges for physicians whose number one goal is patient satisfaction. Under the leadership of Green Meadows Family Practice Center Medical Director **Dr. Anne Fitzsimmons** and Clinic Manager **Pam Mulholland**, the department is examining current clinic policies and procedures and recommending changes that will help family physicians in their ongoing efforts to provide patients with comprehensive, cost-effective, and high quality care.

OUR MISSION TO DISCOVER

Two new assistant professors have joined MU's family medicine research faculty.

Kevin Everett, PhD, has a joint appointment with the Department of Family and Community Medicine and the Department of Psychology. He completed his graduate work in clinical psychology and has additional training in cognitive-behavioral therapies. Currently Dr. Everett's primary research interest is in tobacco issues, and he will be working with other MU researchers involved in the Collaborative Alcohol and Drug Research Enhancement program.

Wen-Chieh Lin, PhD, is coming to Columbia to join MU's Team for Interdisciplinary Gerontologic Research, which is a collaborative program sponsored by the Department of Family and Community Medicine and the School of Nursing. Dr. Lin's doctoral degree is in health services research, policy, and administration, with a minor in gerontology.

OUR MISSION TO TEACH

Family and Community Medicine faculty have always maintained a strong interest in predoctoral education at the University of Missouri. They were leaders in the development of the innovative problem-based learning curriculum, which was implemented for first and second year students in 1993. Earlier this year, the School of Medicine decided to conduct a comprehensive re-evaluation of the third and fourth year curriculum, and **Dean William Crist** has assigned a task force to undertake this project. Four family medicine faculty members, **Drs. Hal Williamson, Steve Zweig, Jack Colwill, and Betsy Garrett**, will serve on the Task Force for the Evaluation and Redesign of the Clinical Curriculum.

FAMILY PRACTICE CLINIC EXPANDS STAFF

Strong reputation of department draws two new family physicians to MU

TWO NEW FAMILY PHYSICIANS

recently joined the staff at the Green Meadows Family Practice Center.

Associate Professor **Dr. Stan Dorst** previously served as associate director of the family practice residency program at Western Pennsylvania Hospital. He accepted the position at MU because it was more patient-care focused, more academic, and less administrative.

"I was looking for a job that would give me plenty of time to do the things I truly enjoy — caring for patients and teaching," he says. "Plus I wanted time to explore academic research interests."

In addition to his clinical duties, Dr. Dorst is working with Medical School Assistant Dean of Curriculum Michael Hosokawa to develop an ethics course for medical students. His interest in this topic focuses on end of life care and advance medical directives.

Developing strong doctor-patient communications and relationships is important for physicians, especially when they are providing end of life

care. We can teach these skills through role modeling and by using the Socratic approach with students, Dr. Dorst says.

Clinical Instructor **Dr. Kirsten Maakestad**, who completed her residency training at St. Mary's Hospital, Grand Junction, CO, last year, came to MU because of the opportunities it offered.

"Since I was right out of residency, I realized there was still lots for me to learn," she says. "The fact that this department offers faculty members opportunities to continue their education — through seminars, journal club, noon conferences, and other organized activities — was very appealing to me."

Dr. Maakestad spends most of her time at the clinic, caring for patients and training residents. She has developed a strong interest in women's health issues and in performing several procedures offered at the clinic, including colposcopy, flex sig, and ob ultrasound.

When not in the clinic, she hopes to complete a research project she began as a resident. Her study is focused on the treatment and prevention of acute

mountain sickness.

Teaching and research are rewarding to both physicians, but nothing is as important to them as their patients.

"When I see patients, it picks me up," Dr. Dorst says. "I enjoy interacting with people and feeling like I'm having a positive impact on their lives."

Dr. Maakestad agrees. "My patients are great. They're motivated to improve their health, and this makes caring for them a very enjoyable part of my job."



DR. KIRSTEN MAAKESTAD AND DR. STAN DORST

TLC: A Valuable Community Resource

Former MU Residents Establish Vital Family Practice Clinic in Washington, Missouri

As graduates of MU's Family Practice

Residency Program, Drs. Jim Turner, Kim Colter, and Tim Long care about medically underserved populations and are committed to improving health and expanding services in these communities. That's why when they decided to start their own primary care clinic 20 years ago, they chose to hang their shingle in Washington, MO, a small community 25 miles west of St. Louis.

"When we were looking for a place to go, we identified Washington as an area of need," explains Dr. Turner. "So we came here, nosed around, and agreed this would be a great place to work and live."

They called themselves Family Health Care, but for many the group became known as TLC, a name given to them by Dr. Sherwood Baker, professor emeritus at MU family medicine. "Sherwood was the first to recognize that the initials of our last names made up the acronym TLC," Dr. Colter says. "Before we got here, he made us a wood plaque with the letters TLC carved in it. The plaque is special to us and still hangs in our office."

The group opened a second office in Marthasville at the same time they opened their Washington office. Marthasville, a rural community just north of Washington, was designated a physician shortage area at that time.

"When Family Health Care first opened, we had concerns about how we were going to make it work, given the diverse backgrounds and needs of our patients," Dr. Long says. "But things have worked out for us — and much better than we ever expected."

Since 1981, they have added seven physicians — four are former MU residents —

and four nurse practitioners. They have opened two more clinics, one in Sullivan and another in New Haven. The doctors deliver 300 babies a year, and they provide health care at four nursing homes in the area. Their patient population totals nearly 35,000, and that number continues to grow. After 20 years, the pioneers of Family Health Care feel fortunate and proud; they have achieved their mission to enhance health and expand primary care services in Washington and its surrounding communities.

Teaching is another important part of the group's mission. They train residents from MU's family practice program, as well as medical students from Washington University, St. Louis University, and UMKC.

"We are very committed to teaching, and we do it to help ourselves as much as the students and residents," says Dr. Turner. "If you want to know if you understand something, see if you can teach it. Teaching keeps us fresh."

All of the doctors at Family Health Care are enthusiastic about family medicine and the rewards of their jobs.

"Being a family physician is more consuming than I ever imagined," says Dr. Keith Ratcliff, a former MU resident who joined the practice in 1993. "When you offer a broad range of services like we do, it's an unending challenge, but it's also more fulfilling than I ever anticipated."

"We have opportunities to do a variety of procedures and see a variety of patients in our Washington practice," explains Dr. Kelly Bain, another MU resident who joined the group in 1997. "I really enjoy the variety and the opportunities to use my mind and my hands."

The doctors agree that the key to running a successful practice is having a good hospital located across the street. "St. John's Mercy Hospital allows us to provide obstetrics services and special procedures," says Dr. Thom Davis, an MU resident who joined the group in 1994. "Without it, our experiences as family physicians would be greatly diminished."

Having strong ties to the community strengthens their experiences, too, both at home and in the office. "All of us have established roots in the area. It's hard to imagine a better place to work or to live," Dr. Long says. "This is a great place to raise a family and get involved."

"Our patients are like family," Dr. Colter says. "We see them all over town, and that's turned out to be one of the most fulfilling parts of practicing here."

Dr. Turner feels passionate about his patients and his role in the community.

"There will be days that if you'd ask me, 'Do you like this job?' I'd say, 'Nah, I think I'm going to quit and raise hogs' — because this can be a very consuming job

and sometimes more than I bargained for," he says.

"But that being said, most days I find myself saying,

'Wow! I can't believe I get paid to do this.' I get to

meet a lot of wonderful

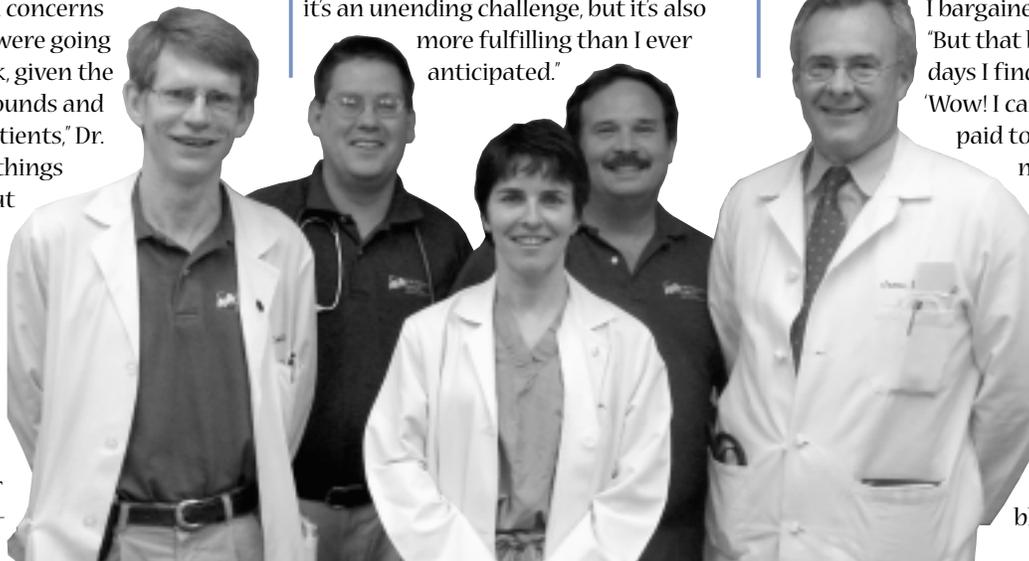
people, and I get a chance

to do some-thing produc-

tive in their lives. And that's pretty

neat. I consider myself richly

blesed."



Family Health Care physicians and former MU Family Practice residents (left to right): Drs. Kim Colter, Thom Davis, Kelly Bain, Keith Ratcliff, and Jim Turner. Not pictured are Dr. Tim Long and Dr. Jean Hertz, a 2001 MU resident graduate who will join the group in September.

A SHARP COUPLE OF RESIDENTS

Greg & Heather Sharp: Living, Playing, and Working Together as Family Physicians

GREG AND HEATHER SHARP met and married while attending medical school at Washington University five years ago. Today, they are still very much together, personally and professionally, as they train to be family physicians in MU's residency program. The strong and deeply rooted values they share make them well suited for each other as well as for a career in family medicine.

Greg, who grew up in a village called Stanton in rural New Jersey, is the son of a family physician. "My father practiced family medicine out of our house when I was a child, so when I decided to become a doctor at an early age, a family doctor is what I had in mind," he says. "I want to specialize in an area that offers diversity, challenge, relevance, and balance."

The diversity of family medicine appeals to Heather, too. She wants to help people in ways that really matter, she says, and as a family physician she will be able to do this. "I have an interest in public health and a conviction about how assuring the health of an individual assists his/her contentment and ability to contribute to society."

The couple plans to practice medicine in a small mountain town in rural Colorado after they graduate, and they

are taking advantage of every opportunity they can as residents to prepare for the challenges that small, rural family practices present. Heather, who just completed her first year of residency, sees patients at the Family Health Center, a clinic that serves many indigent families in Columbia. Greg, who is starting his third year of training, works at the Fayette Medical Clinic, a rural practice that serves a largely geriatric population.

Preparing for family practice is an intense experience for every resident, but it can be especially stressful for married couples who must coordinate two busy schedules to find quality time for themselves. Heather and Greg are fortunate, however, because as limited as it is, they really enjoy and make the most of their time together. Their relationship is strong, and they always look to each other for support and encouragement as they deal with the ups and downs of their training.

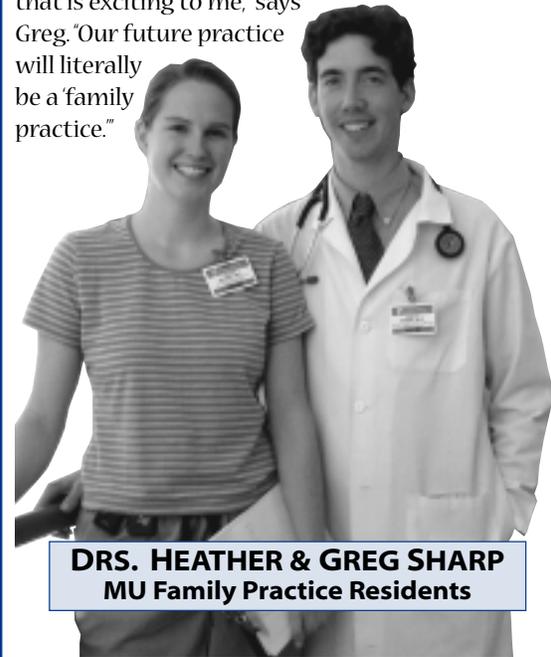
"If we're stressed, we don't have to explain much because we already know what each other is going through," explains Greg.

"One of the benefits of being married to a doctor is that Greg truly under-

stands the multifaceted demands of my job," Heather says. "He's a constant source of strength for me whenever I need it."

Heather and Greg are anxious to complete their residencies. They look forward to the future and the happiness that living and working together will bring them.

"Some day we will be able to play, work, and raise a family side by side, and that is exciting to me," says Greg. "Our future practice will literally be a 'family practice.'"



DRS. HEATHER & GREG SHARP
MU Family Practice Residents

A NEW CLASS OF RESIDENTS COMES TO MISSOURI

Residency Director Dr. Erika Ringdahl and Assistant Residency Director Dr. John Delzell Jr. are proud to welcome these new first-year family practice residents:

STUDENT

Aimo Berger
Daniela C. Bichianu
Jennifer A. Bowe
Herman A. Damek Jr.
Lawrence L. Dybedock
Anthony Kory Jackson
Jeffrey D. Vogel
Mary B. Weick
Raymond M. Weick
Cari M. Worley

UNDERGRADUATE SCHOOL

High School, Berlin
George Bacovia High School, Bucharest
University of Missouri-Columbia
University of Texas-Austin
Purdue University
Stanford University
University of Nebraska-Lincoln
University of Missouri-Columbia
St. Louis University
University of Colorado-Boulder

MEDICAL SCHOOL

Humboldt University of Berlin, Germany
Carol Davila University, Romania
University of Missouri-Columbia
University of Texas Southwestern
University of Sint Eustatius
Emory University
University of Nebraska
University of Missouri-Columbia
University of Missouri-Columbia
University of Colorado

EXTERNS IN THE INTEGRATED RESIDENCY PROGRAM

Erek Van Riessen
Ernest Wallace

University of Missouri-Columbia
University of Missouri-Columbia

THE ACADEMIC TRACK

Former MU Resident & Fellow Serves on the Faculty at University of Utah's Department of Family and Preventive Medicine

DR. JOSEPH STANFORD values research and ranks it high among his current responsibilities at the University of Utah Department of Family and Preventive Medicine. When he joined the faculty at Utah in 1993, his job was half-time clinical, but today his role and responsibilities are focused on academics. Dr. Stanford likes the way his job has changed.

"My job has evolved in a way that is very well suited for me," Dr. Stanford says. "I have more teaching assignments, and research has become my number one responsibility."

He credits the valuable training and experiences he had at MU — both as a resident and a fellow — for preparing him to be a successful family medicine physician and scholar.

"After finishing my fellowship, I was sure I wanted a job that focused on academics," he explains. "I accepted the faculty position at the University of Utah



JOSEPH STANFORD, MD, MSPH
University of Utah

For information about Dr. Stanford's research, you may e-mail him at: jstanford@dfpm.utah.edu

because, in addition to clinical assignments, it offered me opportunities to teach and do research."

Dr. Stanford's primary research interest is fertility, and since going to Utah, he has been working with fellow researchers to examine the psychosocial and biomedical aspects of fertility issues. His current research is in two broad

areas: fertility awareness methods, and intended and unintended pregnancy.

As he anxiously awaits funding approval from NIH, Dr. Stanford is preparing for a major project in which he will study the use of natural family planning to achieve pregnancy. He is excited about this project and hopes that couples who struggle with fertility problems and concerns will benefit from the results of his research.

While research has become a priority in his career, Dr. Stanford is strongly committed to his role as a physician. He speaks positively about family medicine and the rewards of this specialty.

"Being a family physician allows you to put your medical knowledge in the service of really meeting your patients' needs," he explains. "Having the broad picture of your patients' health system and having a relationship with them and their families gives you continuity in care and a global picture of their needs."

MU Family Medicine Hosts The Missouri Research Workshop

Another Missouri Research Workshop was held March 11-14 at MU. Many Department of Family and Community Medicine faculty members, including Chair **Harold Williamson, MD, MSPH**, Research Director **Bernard Ewigman, MD, MSPH**, Professor Emeritus and Project Co-Director **Jack Colwill, MD**, Associate Professor and Project Coordinator **James Campbell, PhD**, Professor **Daniel Longo, ScD**, and Associate Chair and Professor **Steven Zweig, MD, MSPH**, participated in the three-day event. The workshop is

designed to help participants develop strategies that will enhance the level of research in family medicine departments across the country.

UNIVERSITY OF TORONTO Chair and Professor **Walter W. Rosser, MD**, served as consultant for this year's workshop. Chairs and research directors from six universities attended the event.

DUKE UNIVERSITY: **Lloyd Michener, MD**, **Truls Ostbye, MD**, and **George Parkerson, MD**.

EAST TENNESSEE STATE UNIVERSITY: **Jim L. Wilson, MD**, **Forrest Lang, MD**,

and **Jack R. Woodside Jr., MD**.

TULANE UNIVERSITY: **Richard H. Streiffer, MD**, and **Rebecca A. Meriwether, MD, MPH**.

UNIVERSITY OF TEXAS SOUTHWESTERN MEDICAL CENTER: **Shelley Roaten Jr., MD**, and **Mark J. DeHaven, PhD**.

WAYNE STATE UNIVERSITY: **Maryjean Schenk, MD**, **Richard Severson, PhD**, **Kendra Schwartz, MD, MPH**, and **Cathy Simpson, MD, MPH**.

WRIGHT STATE UNIVERSITY: **Mark E. Clasen, MD, PhD**, **F. Syed M. Ahmed, MD, PhD**, and **Jeanne P. Lemkau, PhD**.

GERIATRIC CARE AND RESEARCH: *Continued from page 1.*

many more patients are intentionally not given antibiotics. And the mortality rate is higher in The Netherlands, even among patients who are treated with antibiotics."

Even though the study won't be complete for another year, Dr. Mehr is already enthusiastic about the information he is collecting and how it will benefit doctors, patients, and families who must make decisions relating to the care and treatment of LRI. He is also enthusiastic about returning to the states at the end of the summer.

"My stay in The Netherlands has been a very interesting and positive experience for me. I'm happier now, and I have more energy and a better attitude about life," he explains. "Being on sabbatical has given me time to reflect on where I am and what direction I want to go in terms of my research. I've become more and more interested in end of life care — particularly end of life care for patients with dementia, and when I get back, I plan to explore several new projects in this realm."

JACK M. COLWILL ACADEMIC ENDOWMENT

Supporting Continued Excellence and Innovation in Family Medicine Education

Nearly a year ago, we created the Jack M. Colwill Academic Endowment to help sustain the growth of family medicine education at MU. Since that time we have maintained regular communications with our friends and supporters in order to share information about this new endowment and how well the campaign to build it is going.

As we enter the second year of our fund-raising campaign, we're happy to report that the latest news about the Colwill Endowment is very good. Nearly 70 percent of our own faculty and more than 30 of our former residents have donated to

the endowment during the past year, with pledges totaling nearly \$680,000. Our goal is to raise \$1.1 million – enough to establish an endowed chair for our department, and we feel confident that we will reach this goal, thanks to the generosity of our many friends. Colwill donors can be sure their gifts will be used to expand and enrich the exemplary programs that have become such an integral part of what we do.

The *US News and World Reports* Best Graduate Schools 2002 rankings were released in April, and we finished in the #2 spot. We are honored to be considered one of the top

family medicine departments in the country and realize that our commitment to excellence and innovation in family medicine education must be strong and constant if we want to maintain this distinguished leadership role. We look to the Colwill Endowment to fuel this commitment and become an essential funding source for our future academic endeavors.

We hope you will give serious consideration to supporting the continued excellence and success of family medicine at MU. Your donation is important to us and will be greatly appreciated.

For information about the Jack M. Colwill Academic Endowment, please contact:

Dr. Steven Zweig, at 573/882-4991 or zweigs@missouri.edu, or

Kathy Boeckmann, at 573/884-7916 or boeckmannk@health.missouri.edu.

MU FELLOW FOCUSES HIS CAREER ON

MEETING THE INFORMATION NEEDS OF FAMILY PHYSICIANS

As a second year medical student

at Hahnemann University, Dr. Brian Alper made an important realization: to practice medicine, he would need to know a lot more information than he could ever remember. Instead of trying to memorize all of it, he says, he began organizing his notes in a space and way that would be easy to access when he needed it. Using Word Perfect, he developed a template that stored specific information for every disease that was covered in school.

He planned to use his notes during medical school, and he hoped they would be an important resource for him later on as a practicing physician. But Dr. Alper never realized how much more valuable these notes would become until his fourth year of medical school, when he was training with family physicians in rural Tennessee. Few resources were available to him there, so he put his notes on a computer and used them daily. The other doctors also used them to help diagnose and treat their patients' illnesses. His notes, he says, made a major difference in their practice.

"I left that rotation convinced I had something that doctors needed. I decided then that I had to convert my notes into a database," he says.

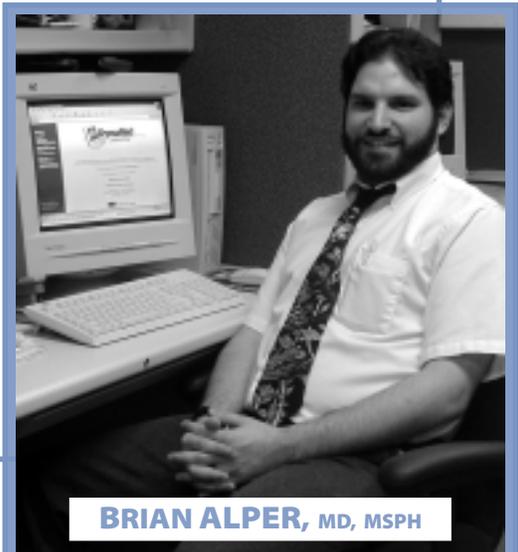
And for the next year, that's what Dr. Alper did. He created Dynamic Medical Information System (Dynamed), an online database targeted primarily for family physicians. Information about more than 2,000 diseases is available through Dynamed, and for the past five years, keeping this information current and accurate has been an ongoing job for Dr. Alper. Dynamed is a free service and with close to 19,000 registered users, it has become one of the most popular online resources used by health care professionals today.

The success of Dynamed has been huge in changing the direction of Dr. Alper's career. After completing his residency, Dr. Alper decided that although he liked teaching, research, and patient care, he wanted to add a fourth pillar to his role — information management. To prepare himself for a career that included work in all four areas, he enrolled in MU's fellowship program.

"My decision to come to Missouri was

an easy one for me," he says. "After meeting Dr. Bernard Ewigman, MU family medicine research director, I realized that my interests really fit with the department's interests."

Dr. Alper is especially interested in helping develop the MU Center for Family Medicine Science's Family Practice Inquiries Network (FPIN). FPIN is a revolutionary project designed to provide online information to family physicians at point of care. "The goal of FPIN overlaps so much with my own personal goals," he says. "I'm glad to be able to contribute to this project."



BRIAN ALPER, MD, MSPH

*To learn more about Dr. Alper's work,
please e-mail him at alperb@health.missouri.edu*



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Harold A. Williamson Jr., MD, MSPH

Associate Chair:

Steven C. Zweig, MD, MSPH

Administrative Manager:

Sandra Scherff, MPA

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UNIVERSITY OF MISSOURI-COLUMBIA



FAMILY AND COMMUNITY MEDICINE

Our Vision is to be leaders in creating and imparting
knowledge and providing service that will improve
human health and well-being.

Our Values include collaboration, scholarship, integrity,
compassion, humor, and respect for self and others.
We are committed to providing excellent care and
service to our patients and community and
fostering professional and personal growth.

Our Mission is to enhance health and primary care
for our communities, emphasizing rural and underserved areas,
through leadership in education, scholarship, and service.