

Brown Celebrates 30th Anniversary of Center for Alcohol and Addiction Studies

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Dr. David Lewis, founding director of CAAS

PROVIDENCE — Brown University celebrated the 30th anniversary of the Center for Alcohol and Addiction Studies with a daylong colloquium on Sept. 21.

Keynote speaker **DAVID ABRAMS** came to Brown in the late 1970s as a clinical psychology intern interested in behavior therapy treatment of tobacco and alcohol addiction. Here he found a stalwart cadre of empathetic academics and clinicians who didn't see addiction as a question of immorality or bad habits. Among them were founding director **DR. DAVID LEWIS** and the CAAS current director, **PETER MONTI**. Dr. Lewis saw drug addiction this way: "Drug misuse is a complex social, economic, and physiological problem in which the actual substances play only one part."

In the '70s, Brown's medical school and community health department had just begun, and interest in addiction was scattered around Brown and area hospitals. But in 1976 **DR. STANLEY ARONSON**, Brown's inaugural dean of medicine, recruited Dr. Lewis from Harvard to develop an addiction studies program at Brown. With substantial

support from President Howard Swearer and key donors, Lewis launched CAAS in the 1982-83 school year. Monti joined the following year.

Under Dr. Lewis and Monti, who succeeded Lewis in 2000 as the Donald G. Millar Professor of Alcohol and Addiction Studies, CAAS has grown from a small office in Arnold lab with a budget of \$1,500 into a prolific center with 28 full-time faculty members, \$13.3 million in grant awards this year, and an enduring influence in research, medical and postdoctoral training, and local and national policy.

"From very small beginnings it became a national leader," said Abrams. After he left Brown in 2004, he served

as director of the Office of Behavioral and Social Sciences Research at the National Institutes of Health and now serves as a professor at Johns Hopkins University.

Teaching and training

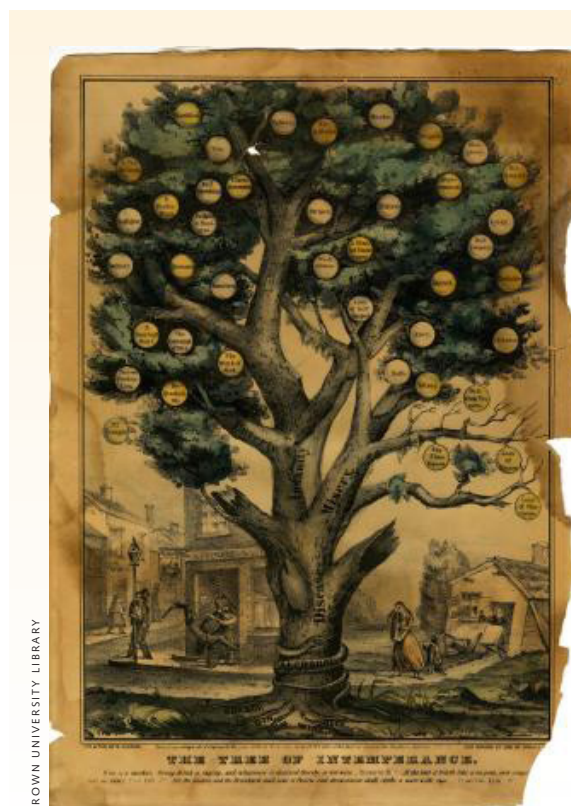
Dr. Lewis had been medical director of the Washingtonian Center for Addictions in Boston, then the nation's oldest addiction treatment center. Dr. Aronson asked Dr. Lewis to convene a committee to develop a medical curriculum on addiction. Dr. Lewis, a Brown undergraduate alumnus, invited social science and humanities professors to join.

He sought connections to the College to ensure the relevance of the center's

Hay Library collection on alcoholism and temperance

Dr. David Lewis's connections with the College also yielded a scholarly treasure: a rich and deep series of special collections at the John Hay Library on alcoholism and temperance. The collection preserves tens of thousands of items – documents, artifacts, advertisements – of both medical and sociological significance.

The Tree of Intemperance
Fruit on the "Misery" branch:
Alms House, Imprisonment,
Idiocy, Rags, Delirium Tremens,
Idleness, and A Bloated Countenance.
The tree is rooted in alcohol. (Lith. and Pub. by N. Currier, 1849)



research to students, the community, and policy development. He taught an undergraduate course titled "Addiction in the American Consciousness" and was chair of the Department of Community Health, which had a joint undergraduate concentration with sociology: "Health and Society."

CAAS also built a program in postgraduate training that would go on to become its signature achievement. The program, which continues today, has trained about 150 postdoctoral researchers in its 27-year history.

Decades of research

Faculty and trainees created influential ways of developing and evaluating various addiction treatments, which allowed them to inform federal and state policymakers about the value of

treatment. Dr. Lewis' strong clinical research foundation and passion for applying research to policy allowed him to serve many national and international committees and organizations. He became an adviser in the Clinton administration and worked with former U.S. Rep. Patrick Kennedy on legislation to ensure equal coverage by health insurers for addiction and mental illness.

From Dr. Lewis' perspective, the rapid advances in addiction genetics, neuroscience and psychology are bittersweet. "The scientific understanding of what addiction is has changed phenomenally," he said. "But the way that's been able to be applied to prevention and treatment is very discouraging still. The science has moved much faster than its application.

"We do have good treatments, we do have good results, and the public understands the need for it better than they ever did," he said. "We're moving in the right direction but much too slowly."

Over the next 30 years it will be advances in science and empirically based treatments, rather than enforcement, that will likely advance the fight against addiction, Monti said.

"I would hope that the emphasis is placed more on treatment and away from the supply side of the equation. We've had so many years of failure with respect to this War on Drugs." ❖

CAAS Areas of Research: Teen Addiction, Alcohol/HIV

Many CAAS researchers have made their mark in other areas of research. David Abrams and Peter Monti, both psychologists, studied how people respond to contextual cues that might make them relapse to smoking or drinking, for example, and worked to help patients develop coping skills.

Monti and center colleagues have written a book on a coping skills model of addictive behavior, currently undergoing its third revision. Monti has also worked to advance and expand the technique of the motivational interview (MI), a psychosocial intervention that helps patients understand their behavior and how it could change. He has also extended the MI to adolescents.

"When our four children were teenagers there was an epidemic of alcohol-related deaths



Peter Monti, CAAS director

in East Greenwich," Monti said. "After the third funeral the kids went to, they said, 'Dad, this is something you know a whole lot about. How can we help?'"

Work on teen addiction continues in the center. One of the center's major current grants is "iSay," a five-year project led by Kristina Jackson, to survey middle school students around Rhode Island in hope of determining what motivates some kids

to experiment with drinking while others don't.

CAAS has several other major projects. One is the Alcohol Research Center on HIV (ARCH), in which researchers led by scientific director Christopher Kahler are studying the physiological and psychological interplay of alcohol, sex risk, the virus, and antiretroviral medications; and SAFER, a study now in its

17th year of testing psychological interventions in community hospital emergency rooms to affect the combination of alcohol and risky sexual behavior. Monti leads those two projects and is co-PI with Damaris Rohsenow of the famed postdoctoral training program.

Another long-lived project, in its 18th year, is the Addiction Technology and Transfer Center of New England, headed by Daniel Squires. The ATTC provides distance learning and continuing education programs, sustains regional organizations to support the recovery community, and works with Rhode Island College to support its Bachelor of Science degree in Chemical Dependency and Addiction Studies. ATTC is a model for the dissemination component of the ARCH, Monti said.

In recent years the Center has accelerated its studies to identify genetic factors that might predispose people to addiction, or that might help predict who would be more or less responsive to different treatments. ❖

Lifespan Surgeon First in Region to Perform Single-Site Robotic Gynecologic Surgery

Advanced technology offers new surgical option for hysterectomy

PROVIDENCE – **W. SCOTT WALKER, MD**, an obstetrician and gynecologist with Ob/Gyn Associates, which recently partnered with Lifespan and the Women's Medicine Collaborative, has become the first surgeon in Rhode Island and Massachusetts to perform a robotic hysterectomy that uses only a small, single abdominal incision.

Walker has performed more than 300 traditional three to five incision OB/GYN robotic procedures, including ovarian cystectomy and surgery for endometriosis, making him one of the region's most skilled and experienced robotic surgeons. Last month, he became the only surgeon in the region to operate using an innovative new approach to hysterectomy, one of the most common surgeries in the United States.

Known as a single-site hysterectomy, this delicate and complex surgery, which involves the removal of a woman's uterus, is performed using a tiny incision approximately one inch long in a woman's bellybutton. Because the incision is hidden by the navel, the procedure is virtually scar-free.

Walker is one of only a handful of surgeons across the country who received training to perform single-site



W. Scott Walker, MD

robotic surgeries using the daVinci Surgical System.

"We've been performing hysterectomies using robotic technology for over three years, but the single-site procedure takes it to the next level, offering women a state-of-the-art surgical option that is safe and less invasive, and now does it with a better cosmetic result," said Walker.

"I am honored to be the first physician in our region to perform this procedure and excited to offer my patients

the most advanced, minimally invasive surgical options," he added.

Increasing numbers of hysterectomies have been performed laparoscopically or using multiple incision robotic technology, and some even continue to be done through one large incision in an open surgery, despite recommendations by national organizations that open abdominal hysterectomy should only be performed as a last resort. Single-site hysterectomy offers all the benefits of robotic surgery, including a shorter recovery time, low blood loss, minimal pain, a shorter hospital stay and high patient satisfaction.

However, having just a single incision means less scarring both externally and internally, minimizing the risk of surgical complications. The surgery can be performed in about one hour and patients typically stay in the hospital less than 24 hours. Women are generally able to resume most normal activities within several days.

Currently, this single-incision approach to hysterectomy has only been approved by the FDA to treat non-cancerous conditions requiring a hysterectomy and removal of the ovaries and fallopian tubes. ❖

CharterCARE signs asset purchase agreement with Prospect Medical Holdings

Prospect to provide a total of \$95M to CharterCARE over next four years

PROVIDENCE – CharterCARE Health Partners (CharterCARE), the corporate parent of **ROGER WILLIAMS MEDICAL CENTER, ST. JOSEPH HEALTH SERVICES OF RI** and **ELMHURST EXTENDED CARE**, has entered into an agreement with Prospect Medical Holdings (Prospect) that will create an innovative joint venture. The transaction is expected to be complete by the early part of next year, subject to regulatory and Church approval.

Prospect has agreed to provide a total of \$95 million to CharterCARE over the next four years. Forty-five million will be provided upon regulatory approval and will be used for debt reduction and short-term working capital. An

additional \$50 million will be provided over the next four-year period to provide capital for physician network development, facility improvement and technology acquisition.

Both CharterCARE and Prospect will be equally represented on the organization's governing board. After the closing, Prospect will serve as the manager of the hospital joint venture under a management contract.

The asset purchase agreement will now be submitted for review simultaneously by the Rhode Island Department of Health and the Rhode Island Attorney General, under the provisions of the State's Hospital Conversion Act. ❖

Landmark acquisition moves ahead

WOONSOCKET – The Health Services Council of the Department of Health recommended the approval of a request by for-profit Prime Healthcare Services of California to acquire the Landmark Medical Center, which has been in receivership since 2008. The vote was 12-0 with two abstentions.

The “change of effective control” application will now go to Dr. Michael Fine, director of health, for review. A second process, a review of the acquisition under the state’s Hospital Conversion Act, reviewing Landmark change from non-profit to for-profit operation, also needs approval by Dr. Fine and Attorney General Peter Kilmartin for the acquisition to be completed. ❖

Miriam opens Kidney Stone Center

PROVIDENCE – The new Kidney Stone Center has officially opened its doors at The Miriam Hospital, bringing together a team of nephrologists, urologists and dietitians under one roof in a collaborative effort to evaluate, diagnose and treat patients suffering from kidney stones. It is the only center of its kind in Rhode Island.

According to urologist **GYAN PAREEK, MD, FACS**, director of the Center, “Our team-based approach to kidney stone treatment will streamline and ease treatment for patients, who will now be evaluated by a urologist, nephrologist and dietitian in a single visit,” he said. “Our goal is to not only treat existing kidney stones, but to also prevent new stones from forming. Because most kidney stones are diet-related, tailored nutrition and dietary management are critical to providing the best treatment and follow-up care.”

Dr. Pareek is joined by assistant director **JOHN O'BELL, MD**, a nephrologist at Miriam, and **MARY FLYNN, PHD, RD., LDN**, the hospital's chief research dietitian. ❖

RIH Opens Center for Wound Care and Hyperbaric Medicine



LIFESPAN

Vascular surgeon Edward Marcaccio, MD is co-medical advisor for Rhode Island Hospital's new wound care center in East Providence.

EAST PROVIDENCE – Rhode Island Hospital has opened the Center for Wound Care and Hyperbaric Medicine for the treatment of slow-healing and non-healing wounds. Located at 950 Warren Avenue Suite 103 in East Providence, the center will be open from 8 am to 6 pm Monday–Friday.

The wound care center will offer the newest and largest hyperbaric chamber in Rhode Island and will employ state-of-the-art wound healing technologies, including negative pressure, techniques to control edema, hyperbaric oxygen, skin substitutes, debridement of infected and chronic wounds, and advanced therapies including revascularization and tissue transfer, as well as patient and family education. The center's multidisciplinary team will provide limb preservation and limb salvage treatments

to patients with acute and chronic wounds resulting from a wide variety of conditions, including diabetes, arterial and venous insufficiency, radiation and surgery or injury.

“These slow- and non-healing wounds are often very painful and even debilitating. By providing our patients with a comprehensive approach to wound care, we strive to relieve the pain and discomfort, heal the wound and get our patients back to normal life and activity as soon as possible,” said **EDWARD MARCACCIO, MD**, co-medical advisor and a vascular surgeon at Rhode Island Hospital.



Kerri Kern, RN, BSN, shown with patient by the hyperbaric chamber, is the clinical manager for the new center.

The Wound Care center will be staffed with board-certified surgeons, plastic surgeons, vascular surgeons and podiatrists. It will offer hyperbaric oxygen therapy as part of its overall wound care program. This therapy involves exposing the body to 100 percent oxygen at high pressure. Exposing a wound to 100 percent oxygen can speed up the healing process and can be used for a variety of wounds, including delayed radiation injuries, soft tissue infections, thermal burns, some skin grafts and flaps, crush injuries and diabetes-related wounds. ❖

Kent introduces Advanced Valvular Heart Disease Clinic

WARWICK – Kent Hospital's Division of Cardiology recently announced a new Advanced Valvular Heart Disease Clinic, to be directed by **ALICE Y. KIM, MD, FACC**, a new member of the Brigham and Women's Cardiovascular Associates at Kent.

Dr. Kim is a board certified physician who specializes in consultative and noninvasive cardiology including cardiovascular medicine; transthoracic, transesophageal and stress echocardiography; nuclear cardiology; and vascular interpretation. Dr. Kim is also an attending physician in the departments of cardiology at both Memorial Hospital

of Rhode Island and Brigham and Women's Hospital.

"The addition of a new clinic is a huge gain for the patients of the community who have valvular heart disease and are in need of high quality care, which includes access to the best in medical technology, clinical trials and complex treatment plans," said Chester Hedgepeth, MD, PhD, executive chief of cardiology at Kent Hospital.



KENT HOSPITAL

Dr. Alice Kim will serve as director of the new clinic.

The clinic will offer services such as:

- Comprehensive evaluation, diagnosis, and treatment planning for patients who may be candidates for advanced valve intervention
- Access to expertise with interventional cardiologists and cardiac surgeons at the advanced valvular and structural heart disease clinic at Brigham and Women's Hospital
- Appropriate multi-modality imaging including echocardiography, cardiac catheterization, and computer tomography
- Access to national research protocols for advanced valve disease



KENT HOSPITAL

Jeffrey D. Manning, MD, will direct the sports medicine program.

Kent Hospital announces new Sports Medicine Program

WARWICK – Kent Hospital recently announced the addition of Affinity Sports Medicine, an affiliate of Kent Hospital, which will be directed by **JEFFREY D. MANNING, MD**, and will offer specialized treatment and prevention of injuries and illness for all ages and abilities.

Dr. Manning is a board certified family physician with a certificate of added qualification in sports medicine. He specializes in primary care sports medicine, focusing on treating illness as well as injury.

He is a faculty member at the Alpert Medical School at Brown University and the University of Massachusetts. Prior to medical school, Dr. Manning was a high school science teacher and coached football and lacrosse.

"You do not have to be an athlete to benefit from sports medicine services," says Dr. Manning. "For an individual who wishes to become active and begin an exercise program or someone who has musculoskeletal problems, sports medicine can be extremely beneficial. I am looking forward to bringing my sports medicine training and expertise to the local community."

The program will offer clinical services such as:

- Concussion treatment
- Management of acute injuries (such as ankle sprains, muscle strains, shoulder and knee injuries, fractures)
- Management of overuse injuries (such as tendonitis and stress fractures)
- Splinting and casting
- Braces
- Throwing programs
- Customized physical therapy programs
- Coordination of care with primary care physicians, athletic trainers, physical therapists and surgeons (as needed)
- "Return to play" decisions following illness
- Counseling regarding nutrition and supplements
- Onsite X-ray and musculoskeletal ultrasound
- Access to MRI and CT scans

URI's Rothman hits NIH jackpot with another \$10M

Grant will increase capacity for vaccine research

PROVIDENCE – A University of Rhode Island biomedical researcher, Research Professor **ALAN ROTHMAN** at URI's Institute for Immunology and Informatics, who was awarded a \$11.4 million grant last month for his research on dengue fever, has been awarded another grant of nearly \$10 million to expand research efforts on vaccines and immunotherapeutics at the Providence campus.

The National Institutes of Health's Institutional Development Award (IDeA) Center of Biomedical Research Excellence, which builds research capacity in states that historically have had low levels of NIH funding, awarded the grant to support basic, clinical and translational research, faculty development, and infrastructure improvements.

Rothman said the grant will enable the Institute to build capacity for basic immunology research on global health issues, with an orientation toward the development of vaccines and therapeutics. "There are common themes in infectious disease, so what we learn about malaria and dengue also applies to infectious diseases that affect Rhode Islanders. We are conducting basic research on important public health problems, which will set the stage for determining the next steps for preventing and treating these diseases," he said.

According to Rothman, a major aim of the five-year grant is to "build a cadre of junior investigators toward independence" by providing them with funding for new research projects. One of the junior investigators supported by the grant is **CAREY MEDIN**, an immunologist at the Institute, who will work on innate immune responses to dengue virus. In addition, the Institute has used grant funds to recruit **BARBARA PAYNE**, an immunologist with 10 years of experience working in Kenya on HIV exposure in developing fetuses, to the Institute. At least one more faculty member will be hired with the new funding.

The grant will also support the development of new partnerships and pilot projects, particularly a collaboration with **JONATHAN KURTIS**, **JENNIFER FRIEDMAN** and colleagues at the Center for International Health Research at Lifespan in Providence, where the grant will support Ian Michelow, a junior researcher who is working to develop vaccines against malaria.

Institute Director and URI Research Professor **ANNIE DE GROOT** is also enthusiastic about the new grant. "Dr. Rothman is a visionary scientist who is committed to training the next generation of vaccine developers," said De Groot. "I am grateful to URI for supporting his move to Providence, and I am pleased that the iVAX suite of vaccine design tools will be put to use for basic research; that is exactly what we had in mind when we established the Institute just a few years ago. I look forward to working with the



PHOTOS BY JOE GIBLIN

new faculty members on their vaccine research programs."

A resident of Framingham, Massachusetts, Rothman came to URI in 2011 from the University of Massachusetts Medical School in Worcester, where he was awarded an \$11 million grant from the National Institutes of Health in 2008 for additional studies of the dengue virus. ♦



URI Research Professor Alan Rothman (left) briefs Rhode Island's Congressional delegation, from left, Sen. Sheldon Whitehouse, Sen. Jack Reed, Rep. David Cicilline, and Rep. Jim Langevin, about his research on dengue fever in August. Rothman was awarded a research grant of \$11.4 million from the National Institutes of Health in August and another \$10 million this month.

Searchable Website Links Researchers, Sites

PROVIDENCE — Academic and medical institutions from around Rhode Island recently unveiled CoresRI.org, a Web directory of publicly shared core science facilities and services that officials said could accelerate research collaboration for the benefit of the entire state.

CoresRI.org readily serves up detailed information on more than 500 lab instruments and services available in more than 30 core facilities and laboratories at 12 institutions. Site visitors — scientists, engineers or physicians — can search by institution, facility, general application or

as the start of a new era of inter-institutional support and cooperation to grow our research activities and to bring new grants and contracts to our state.”

Scientists, engineers and physicians do not need to work at any of the inaugural partner institutions — Brown University, Lifespan, Care New England, the University of Rhode Island, the Providence V.A. Medical Center, the Rhode Island School of Design, Providence College, Bryant University, Community College of Rhode Island, Rhode Island College, Salve Regina University and Roger Williams University — to use the site or arrange access to facilities listed there. A state environmental researcher, for example, could use CoresRI to find the spectrometer needed to test for an unusual chemical in a water sample, or a physician at an independent hospital could seek space in an ultracold freezer for a tissue specimen.

Benefits

Hawrot said the site’s partners anticipate many benefits from the new site beyond the most obvious one of facilitating researchers’ access to needed equipment. CoresRI.org can make state researchers more competitive in applying for grants, he said, because they’ll be able to show that they have access to relevant instruments even if they aren’t at their home institution. The site also can help inspire new research collaborations as researchers discover what each other can do.

Another benefit, Hawrot said, will be in recruiting researchers to the state because they can see the full spectrum of available resources within the state’s small geography.

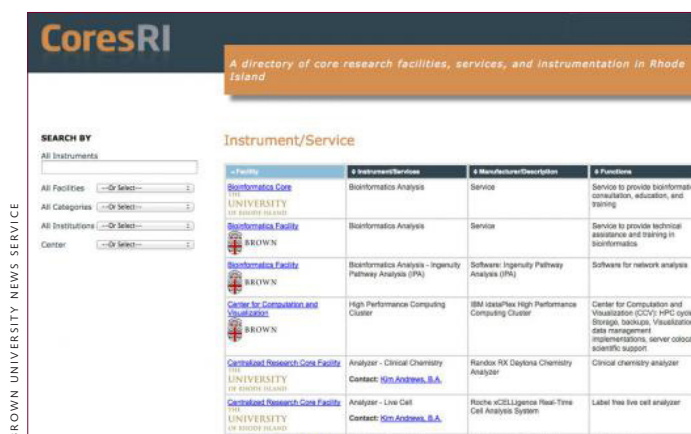
CoresRI could also aid long-term economic development by helping scientists at a startup companies accomplish research and development tasks, said **PAM SWIATEK**, director of research operations in Brown’s Division of Biology and Medicine.

DR. JAMES PADBURY, a pediatrician and researcher at Women & Infants Hospital and professor of pediatrics in the Warren Alpert Medical School, said CoresRI.org will also help the state’s researchers make the most of the resources they share.

“Additional benefits beyond knowledge of and access to this equipment are coordination of shared equipment grants among investigators, avoidance of duplication on equipment purchases, and conservation of valuable resources to sustain these core labs at each of our institutions,” Dr. Padbury said. “In these days of tight federal and foundation budgets, collaboration across core laboratories in equipment use and sustainability will help us to use our precious resources most efficiently.”

Swiatek said the partners have a process for keeping the site up-to-date, a step that Snyder said will be key to the site’s success.

“CoresRI.org will be a ‘living’ site that will be updated regularly, allowing any scientist or trainee to easily find the equipment or specialty services they need to succeed in their work,” Snyder said.



A new website, CoresRI.org, lists hundreds of shared research instruments and services at 12 academic and medical institutions around the state. The resource is open to any scientist looking to arrange access to needed facilities for research purposes.

any keyword to find electron microscopes, high-throughput gene sequencers, nuclear magnetic resonance spectrometers, bioinformatics services and many other resources.

The site helps fulfill and expand on the promise of shared core facilities, which are designed to make expensive scientific resources, such as high-end equipment and expert staff, available to a broad scientific community.

“Research is very technology-driven and so access to instrumentation is really critical,” said **EDWARD HAWROT**, the Alva O. Way University Professor of Medical Science at Brown and associate dean for the Program in Biology in the University’s Division of Biology and Medicine. “Having a searchable database is a big advantage.”

DR. PETER SNYDER, senior vice president and chief research officer for the Lifespan health system and a professor of neurology in the Alpert Medical School, said CoresRI.org provides an important new tool to promote scientific productivity and cooperation.

“This collective cataloguing of all core facilities, spanning all of the major research institutions across the State of Rhode Island, will allow any of our investigators — no matter where they are located or where their salary is drawn from — equal access to critical resources to support scientific research,” Snyder said. “This is an entirely unprecedented first step for all of our partner institutions, and I see this