

# FRONT lines

The newsletter of CIRCL, the Center for Injury Research and Control at the University of Pittsburgh  
<http://www.circl.pitt.edu>

## Director's Message:

### A Mentor Remembered

The dateline reads "Norfolk Virginia, October 25, 2005: **Blaze takes 2 lives, guts Norfolk home.**" Two lives lost. Just two of the more than 2,500 people in the U.S. that die from unintentional residential fire/flame deaths each year.<sup>1</sup> It is unclear how this particular blaze started. It was around 5 am when the fire was first reported by a passerby. Perhaps an old furnace kicking in for the first time in the Fall malfunctioned or maybe an electrical short. Fires start for many reasons, but it only takes one simple device to protect a couple or a family. Unfortunately, as in most fatal residential fires, no smoke detector was present to warn the sleeping residents. Two more lives added to the senseless toll.

For me, these two lives were special. Asleep in that quiet Norfolk home that night were two very good friends of mine: Dr. Harry S. Wise, 91 and his wife Dr. Pauline (Polly) Wise, 89.



**Dr. Harry S. Wise, shown in 1984, led the Norfolk Health Department for 15 years.**

Dr. Wise was many things in life. A husband, father, a painter, physician, community activist, an actor, and a traveler, to mention a few. But it

<sup>1</sup>Source: CDC WISQARS Fatal Injuries: Mortality Reports, 2002.

was his public health career, as Director of the Norfolk City Health Department, which intersected with mine. I took my first postgraduate job in public health under him as a very green city epidemiologist in 1976. His firm, but patient grip on the reigns of the health department was already legendary by the time I arrived. Dr. Wise served the city of Norfolk well. Those who worked with him learned that anything was possible if you brought some passion to the fight, got the right

*(continued page 4, col. 2)*

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### CDC Acute Injury Care Research Agenda: Guiding Research for the Future

Caring for the acutely injured is a public health issue that encompasses pre-hospital care through the provision of land- or air-based emergency medical services; emergency department assessment, treatment, and stabilization of injured patients; and in-hospital care for the surgical and medical management of acute injuries among all age groups.

In 2003, the National Center for Injury Prevention and Control—CDC's Injury Center—identified gaps in the area of acute injury care and updated the *CDC Injury Research Agenda* (2002) to clearly state CDC's priorities for acute care research. That same year, the Injury Center began to update its Research Agenda by focusing on research that will ultimately make a difference in

improving acute injury care systems and the care individuals receive when *they are injured. After a two-year process engaging injury care and public health experts, the revised Acute Injury Care Research Agenda (<http://www.cdc.gov/ncipc/didop/didop.htm>) was released at the National Injury Prevention and Control Conference in Denver on May 11, 2005.*

Implementing this Research Agenda will be a challenge. This agenda identifies priorities and will help guide research efforts to prevent needless deaths, lessen adverse health effects from injuries, and potentially reduce the cost of medical care to the injured. The Research Agenda is also intended as a reference for policy makers, educators, service providers and others interested in learning more about the impact of acute injury care.

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### INSIDE THIS ISSUE

<a href="#">Director's Message</a> .....	1-4
<a href="#">CDC Research Agenda</a> .....	1
<a href="#">New Research Projects</a> .....	2
<a href="#">Visiting Scholar/Professor</a> .....	2
<a href="#">Publications</a> .....	3
<a href="#">Small Grants Announcement</a> .....	3
<a href="#">Small Grants Awards</a> .....	3
<a href="#">2006 Injury Conferences</a> .....	4
<a href="#">SMARTRISK Catalogue</a> .....	4-5
<a href="#">New Faculty &amp; Staff</a> .....	5

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## New Research Projects and Collaborations

### Survey of Injury Prevention Activities in PA ED: Successes, Barriers and Opportunities

[Hank Weiss, MPH, PhD](#) - Principal  
Investigator, Director, Center for  
Injury Research and Control,  
Associate Professor, [Department of  
Neurological Surgery](#).

The Emergency Department Injury Prevention Study started this fall with a grant from the Pennsylvania Chapter of the American College of Emergency Physicians. Dr. Hank Weiss is the principle investigator and the project coordinator is Mariana Garrettson, a recent graduate from the School of Public Health at the University of North Carolina. Injury and adverse affects account for over one-third of emergency department visits nation wide; as such, EDs are uniquely positioned within communities to work on injury prevention. However, little is known about the amount, type and sophistication of ED-based injury and violence prevention activities in Pennsylvania.

This study will implement a web-based survey of all PA EDs in order to: identify and describe the breadth and depth of injury prevention programs currently in use, to delineate important implementation barriers, and ascertain the attitudes and interest of ED staff in obtaining injury prevention training. A national advisory committee has been working on development and revision of the survey instrument, which will be distributed to 200 EDs in January.



## Impact of Housing Relocation Initiatives on Community- Level Violence

### Jacqueline Cohen, PhD

Principle Investigator, Research  
Professor, H.J. Heinz III School of  
Public Policy & Management, Carnegie  
Mellon University.

### [Anthony Fabio, RD, MPH, PhD](#)

Co-Investigator, Associate Professor,  
[Department of Neurological Surgery](#).

Prior research finds that persons who reside in disadvantaged communities are subject to greater risks of violence. The ill effects are pronounced where disadvantage is multifaceted – features that characterize large public housing communities that provide subsidized housing for low-income households. In an effort to ameliorate the effects of concentrated disadvantage, large-scale initiatives were undertaken during the 1990s to relocate households from higher-density public housing communities to communities in the private housing market.

The objective of this research is to evaluate the impact of housing relocation initiatives on youth violence. Outcomes from this research will provide empirical evidence about the impact that relocation of low-income households into private market housing communities has on violence levels in the surrounding and destination communities.

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### Visiting Scholar/Professor

Anthony Fabio, RD, MPH, PhD, was a visiting scholar at the University of Cambridge, England in September, 2005. He studied with David Farmington, MD, examining “novel methods for separating age, period and cohort for understanding the causes and correlates of violence trends.”

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## Recent Publications

Soloff PH, **Fabio A**, Kelly TM, Malone KM, Mann JJ. High Lethality Status in Patients with Borderline Personality Disorder. *Journal of Personality Disorders*. 19(4), 386-399, 2005.

Ismailov R, **Weiss HB**, Ness R, Lawrence BA, and Miller TR. Blunt cardiac injury associated with cardiac valve insufficiency: Trauma links to chronic disease? *Injury*. 2005; 36, 1022-1028.

**Weiss HB**. Injury and Violence Among Pregnant Women: What About the Baby? (letter) *American Journal of Public Health*. March 6, 2005.

**Weiss HB**. Injury and Pregnancy Loss. (letter) *Journal of the American College of Surgeons*, July 2005; 201 (1), 154.

Koehler SA, **Weiss HB**, Shakir A, et al. Accurately assessing elderly fall deaths using hospital discharge and vital statistics data. *American Journal of Forensic Medicine and Pathology* March, 2006; 27 (1).

Pierce MC, **Bertocci GE**, Janosky J, Aguel F, Deemer E, Moreland M, Boal D, Garcia S, Herr S, Zuckerbraun, N, Vogeley E. Femur Fractures Resulting From Stair Falls in Children: An Injury Plausibility Model. *Pediatrics*, Vol 115, June, 2005.

Zafonte RD, Ricker J, Yonas H, Wilson MS, Chen X, Ma X, Ren D, **Wagner AK**, Reynolds IJ, Dixon CE. Synaptosomal dopamine uptake in rat striatum following controlled cortical impact. *J. Neurosci. Res.*, 2005 Apr 1; 80(1):85-91.

**Wagner AK**, **Fabio A**, Puccio AM, Hirschberg R, Li W, Zafonte RD, Marion DW. Gender associations with cerebrospinal fluid glutamate and lactate/pyruvate levels after severe traumatic brain injury. *Critical Care Medicine*. 33(2):407-13, 2005 Feb.

**Weiss HB**, Earthquake and tsunamis in the Indian Ocean. Why we should care. *Injury Prevention*. February, 2005; 11 (1), 1-2 (guest editorial).

**Wagner AK**, Sokoloski JE, Ren D, Chen X, Khan AS, Zafonte RD, Michael AC, Dixon CE. Controlled Cortical Impact Injury Affects Dopaminergic Transmission in the Rat Striatum. *J. Neurochem*. 2005 Oct 95(2): 457-65.

Chen X, Li Y, Kline AE, Dixon CE, Zafonte RD, **Wagner AK**. Gender and environmental effects on regional BDNF expression after experimental TBI. *Neuroscience*. 2005; 135(1): 11-7.

**Wagner AK**, Chen X, Kline AE, Zafonte, RD, Dixon CE. Gender and Environmental Enrichment Impact Dopamine Transporter Expression after Experimental Traumatic Brain Injury. *Exp Neurol*. 2005 Oct 195(2): 475-83.

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## 2006 Small Grants Announcement

The [CIRCL Small Grants Program](#) funds one student grant for up to \$5,000 and one junior faculty grant for up to \$10,000. Funds must be spend within one year from the grant award date. Those interested in applying for these grants **must apply by January 30, 2006**. Allowable costs include lab supplies, computer software, travel, data collection costs, consultant costs, and labor costs. Junior faculty members may request a maximum of 10% salary support. If you have a question about an allowable cost, please contact Anthony Fabio, PhD, at 412-648-3901 or email him at [fabioa@upmc.edu](mailto:fabioa@upmc.edu).

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## 2005 Small Grants Awarded

CIRCL is pleased to announce the junior faculty small grant award for 2005 has been awarded to Dr. Weimin Gao, MD, PhD, with the Department of Critical Care at the Safar Center for Resuscitation Research. His research project is "Identification of Biomarkers for Inflicted Traumatic Brain Injury Using the Human Cerebrospinal Fluid Proteome." Inflicted traumatic brain injury (iTBI) is the most common cause of traumatic death in infancy. iTBI results in changes in the protein composition of the cerebrospinal fluid (CSF), which may be indicative of a prognostic, diagnostic, or mechanistic pattern of protein expression. The aim of this project is to identify potential protein patterns in CSF that may be able to help differentiate iTBI from non-inflicted TBI (nTBI) using conventional gel-based proteomics, including two dimensional (2-D) difference in gel electrophoresis (DIGE) combined with mass spectrometry analysis.

The student small grant for 2005 was awarded to Susan Wong, a medical student at the University of Pittsburgh. Her project is "Describing Eating Behaviors of Victims of Intimate Partner Violence." Her research examines disturbances to eating behaviors that emerge as a result of intimate partner violence (IPV). Employing qualitative research methods, she is conducting focus group discussions and individual interviews to gather detailed descriptions and explicative accounts from female victims of IPV to generate reliable information and hypotheses on the impact of IPV on their eating behaviors.

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## Injury Conferences 2006



### 6th International Conference on Measuring the Burden on Injury

1 April 2006

Contact: Stephen Luchter

Email: [sluchter@earthlink.net](mailto:sluchter@earthlink.net)

### 8th World Conference on Injury Prevention and Safety Promotion

2-5 April 2006, Durban, South Africa

Contact: Conference Secretariat

Tel: +27 12 4812094

Email: [sec@safety2006.info](mailto:sec@safety2006.info)

Website: [www.safety2006.info](http://www.safety2006.info)

### 7th International Interdisciplinary Conference on Advances in Qualitative Methods

13-15 July 2006

Surfers Paradise, Queensland

Contact: The Conference Organizer

Tel: +61 3 9509 7121

Fax +16 3 9509 7151

E-mail: [info@conorg.com.au](mailto:info@conorg.com.au)

### 8th National Injury Prevention and Control Conference

27-29 September 2006

Sydney, Australia

Contact: Zenia Consulting

Fax: +61 7 3395 3548

Email: [secretariat@aipn.com.au](mailto:secretariat@aipn.com.au)

Website: [www.aipn.com.au/conference.html](http://www.aipn.com.au/conference.html)

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## Director's Message

(continued from page 1)

group together and kept digging away at the problems. There are many stories to tell of thwarted measles epidemics and rat infestations, but these are not the stories I wish to tell now.

No, the story I wish to tell is about *mentors*, those special souls you meet in your life who shape and direct it in profound ways. Professionally speaking, Harry Wise was a mentor for me...and countless others. He was so committed to the public and to public health. He knew the grassroots tactics that were needed to improve public health and the discussions that must precede those changes. He knew what steps were needed to reach the top. He seemed like he was always looking up those stairs. For me and the many others touched by his life, he will always be at the top of those stairs urging us to keep climbing, one important step at a time.

I was very lucky. I had the chance to thank both Harry and Polly Wise personally with a visit just a few weeks before the fire. How grateful I am to have had that chance...but I almost missed it. Life as they say turns on a dime and sometimes comes at you hard. We don't know what faces us around the next bend. We all have people like Dr. Wise in our lives; men and women who don't stay in the background, but reach out to help others to see the world a little bit more clearly. This holiday season, don't be caught saying "I wish I had written or visited (your mentor) to thank them." GO AND DO IT. You do not know when the dateline will read about them...or you.

*Hank Weiss*, MPH, PhD  
CIRCL Director

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## SMARTRISK Launches Catalogue of Best Practices

by Mark Simmons, SMARTRISK

[SMARTRISK](#) has launched a Catalogue of Injury Prevention Best Practices, consisting of 125 interventions for intentional and unintentional injuries, which have been classified as "Best Practices," "Promising Practices" and "Less Promising Practices."

### What is a best practice?

The definitions SMARTRISK has applied follow:

- best practice – an intervention that has been shown through one or more empirical studies to reduce the frequency or severity of injury.
- promising practice – an intervention that evidence suggests may reduce the frequency or severity of injury, but for which more research is required before the intervention should be considered effective.
- less promising practice – an intervention that little or none of the reviewed evidence suggests that will reduce the frequency or severity of injury.

There is a lack of clear criteria for defining a best practice. Different reviewers use different criteria when identifying best practices, based on their opinions on proper research methodology and desired outcomes. Some reviewers, for example, may only consider studies in which a comparison group has been included, and which demonstrate a statistically significant change in the risk of injury. Others may only consider studies that use randomized control trials, and which demonstrate a change in participant behaviour.

SMARTRISK has chosen to list interventions identified as best practices by a variety of expert reviewers, regardless of their selection criteria. This has allowed us to provide a larger listing of interventions,

(continued next page, col. 3)

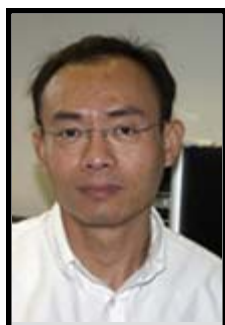
## CIRCL Hires New Faculty and Staff

**Zhifang Yuan, MS** joined CIRCL in February 2005 and works with Dr. Fabio on his project “Why Some Generations Are More Violent Than Others—A Contextual Model for Understanding Crime Trends”. She received her Master’s Degree in Statistics from West Virginia University where she was a teaching assistant for two classes: “Elementary Statistical Inference” and “Introduction to Probability and Statistics”.



**Zhifang Yuan**

**Tom Truong, MS** began working at CIRCL in March on the E-Code project with hospital discharge data. He received his Master’s Degree in Biostatistics from the University of Pittsburgh GSPH in 2004. A native of Vietnam, Tom moved here from California in 2002 to pursue his education.



**Tom Truong**

**Erin Sauber, MPH** began working for CIRCL in September as a Graduate Student Researcher. She is in her second year of the PhD program in Epidemiology and is also working on earning the Public Health Preparedness and Disaster Response Certificate at the University of Pittsburgh, Graduate School of Public Health. Erin earned her MPH at the Texas A&M School of Rural Public Health. She will be working with Dr. Weiss on the “Impact of Pregnancy-Associated Crashes on Birth Outcomes and Infant Survival Study”.



**Erin Sauber**

**Tracey Reed Armant, PhD** joins the CIRCL staff as the Health Educator responsible for injury prevention training in Pennsylvania’s trauma centers and development and maintenance of the University of Pittsburgh’s Injury Research Council. Most recently, Tracey was a Visiting Assistant Professor in the College of Education at the University of Maryland, (College Park, Maryland) and an Assistant Professor in the College of Education at Ohio University, (Athens, Ohio). In addition to her academic experience, Tracey has public policy experience having worked on staff for former Allegheny County Executive, James Roddey and

**Tracey  
Reed  
Armant**



former Member of the U.S. House of Representatives, William Coyne, as well as for the Department of Planning and Budget for the Commonwealth of Virginia. Her dedication to public service and education will serve her well in her capacity as Health Educator at CIRCL.

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## SMARTRISK Catalogue (continued from page 4)

covering a wider range of issues. Before implementing an intervention that has been identified as a best, it is important to review the original source material, to ensure that the reviewer’s criteria and definition of a best practice matches your own. It is also important to understand the conditions under which a best practice has been applied, because an intervention proven effective in one situation may not be effective in another.

### Why are best practices important?

1. Resources are limited for most health organizations. It is important to maximize effectiveness by implementing proven interventions.
2. As target audiences, funders and other stakeholders continue to recognize the importance of evidence-based practice, the demand for health organizations to follow best practices, and to offer evidence that their interventions are effective, will only increase.

### Using the Catalogue

The Catalogue can be browsed either by injury type or age group. To use the Catalogue, go to the SMARTRISK Navigator at [www.smartrisk.ca](http://www.smartrisk.ca), and click on the “Practitioners” tab and then on the “Catalogue of Best Practices.” For more information please contact Mark Simmons at [msimmons@smartrisk.ca](mailto:msimmons@smartrisk.ca). Reprinted from the December 2004 newsletter of the Alberta Centre for Injury Control & Research, with permission by the author.

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