Jamie Deering is the newest addition to the LifeBridge Health (LBH) Research Coordinator Program. Prior to her employment with LifeBridge in January 2011, Jamie served as a traveling Labor and Delivery Nurse working in several states and throughout the City of Baltimore. Jamie’s fascination with research and desire for something new and challenging landed her a permanent stay in Baltimore with LifeBridge Health. According to Jamie, the thing that attracted her to LifeBridge Health was the people. “I think that the staff here, in general, is friendly and warm, and I think the staff should be a reflection of the hospital's mission. I especially think my coworkers in the research department have been welcoming and patient with a nurse who has no research background!”

The Indianapolis native, Certified Holistic Nurse, and Colts fan, graduated from Xavier University in 2006 with a B.S. in Nursing. Currently Jamie is residing in Baltimore with her puggle “Boo”. When you see Jamie's smiling face, please welcome her to the LifeBridge family!
Welcome to the Research Program:

Sharmaine McAdoo!

The very busy research staff has had more than one addition this year. Say hello to Sharmaine McAdoo. Sharmaine is the Administrative Research Coordinator for the department, and celebrated her 1 year anniversary with LifeBridge on April 4, 2011. Before becoming a Research Coordinator, Sharmaine was an Administrative Assistant for the AVP of Nursing at St. Joseph Medical Center in Towson, Maryland.

Sharmaine has worked in a variety of fields since she was 14 years old and has held a vast array of positions including: Volunteer Nurse's Assistant, Behavioral Counselor, Patient Care Assistant, Senior Administrative Assistant, Marketing Assistant, Deportation Clerk, Naturalization Clerk, and Volunteer Patient Advocate. While pursuing her Masters' Degree at the University of Phoenix, Sharmaine began to explore other opportunities that would challenge and enhance the skills that she already possessed. In addition to her Research Coordinator duties, she is a Youth & Young Adult Pastor of a local community church which occupies a great deal of her spare time. Being a Youth & Young Adult Pastor gives Sharmaine an opportunity to find time for fun such as going to the movies, bowling, playing the Wii, shopping, and developing ideas on how to improve the community. When she is on vacation from her many duties, Sharmaine enjoys traveling and spending time with family and friends.

Originally from Brooklyn, New York, Sharmaine spent three and half years in Richmond, Virginia after relocating with her company. In addition, she attended Morgan State University for almost four years, graduated with a BA in Psychology from CUNY-Brooklyn College, and will soon obtain her M.B.A. in Healthcare Administration from the University of Phoenix. When asked what she thinks is the best thing about working at LifeBridge Health Sharmaine says it’s “that I have the opportunity to share a wealth of information, education, and other resources with those in the community. I enjoy seeing the smiles on our patients' faces as they confirm that we have made a difference in their lives.”
RESEARCH AROUND THE WORLD-WIDE WEB

Researchers Try To Understand Naked Mole Rats’ Resistance To Cancer

With their pinkish, translucent and wrinkly skin, double-saber buck teeth and black-beady eyes, naked mole rats look like characters in a nightmare from hell. In fact, they do live underground in pitch-dark burrows where their air, from a human point of view, can contain chokingly little oxygen, toxic carbon dioxide levels and a perpetual stench of ammonia. What’s more, even though they are mammals, these sausage-size rodents live more like ants and bees, with a queen, a few mating males and lots of workers.

But one other thing: They apparently never ever get cancer, which has made naked mole rats particularly beautiful to scientists…

Read more of this article at: http://www.washingtonpost.com/wp-dyn/content/article/2011/03/07/AR2011030703965.html

DR. MICHAEL WILLIAMS AND THE BSI TEAMS-UP WITH NASA

One of LifeBridge’s own, Dr. Michael Williams, Director of the Sandra and Malcolm Berman Brain & Spine Institute (BSI) has been an advisor to the National Aeronautics and Space Administration (NASA) Space Medicine team since January 2010 regarding the unexpected development of pseudotumor cerebri in astronauts with prolonged stays on the international space station. Dr. Williams was first recommended to NASA by virtue of his position on the scientific advisory committee of the Intracranial Hypertension Research Foundation. NASA's advisory panel now includes experts from the U.S., U.K., Sweden, Switzerland, Germany, Norway and Canada.

The disorder, currently termed Microgravity Intracranial Hypertension (MIH), has resulted in permanent visual impairment in at least one astronaut, and may jeopardize NASA's future plans for long-duration space flight required for planetary exploration. Visual impairment now appears to be a major safety risk in space, and the current medications to treat MIH have potential side effects that could be disastrous during a long-duration space flight.

NASA is currently working on methods that can noninvasively measure cerebrospinal fluid pressure in space, and will be testing devices that can measure the development of this disorder in space. Dr. Williams anticipates discussions with NASA focusing on the evaluation of one of these devices at Sinai Hospital’s BSI. Initial studies would probably focus on evaluating the accuracy of the noninvasive devices, while future research would focus on ways to identify astronauts at risk, or on treatment of the disorder with medications that do not have significant side effects.
NEW IRB APPROVED STUDIES!!!

A Phase III Randomized Trial of Adjuvant Chemotherapy With or Without Bevacizumab for Patients With Completely Resected Stage 1B (> 4 cm) - IIIA Non-Small Cell Lung Cancer (NSCLC) (ECOG E1505)

Investigators: Mayer Gorbaty, Marvin J. Feldman, Cristina Truica, Pallavi Kumar and Lavanya Yarlagadda

This randomized phase III trial is comparing standard chemotherapy plus bevacizumab (a drug that blocks the growth of new blood vessels) to see how well this combination works compared to chemotherapy alone in treating patients with stage IB, stage II, or stage IIIA non-small cell lung cancer that was removed by surgery.

COG AEWS1031: A Phase III Randomized Trial of Adding Vincristine-Topotecan-Cyclophosphamide (VTC) to Standard Chemotherapy in Initial Treatment of Non-metastatic Ewing Sarcoma.


This is a randomized phase III trial studying combination chemotherapy in treating patients with non-metastatic (non-spreading) extracranial (outside the skull) Ewing sarcoma (a malignant round-cell tumor). The purpose of this study is to determine if adding the drug combination VTC to the standard five-drug chemotherapy for Ewing sarcoma will get rid of the cancer better than the standard five-drug chemotherapy by itself.

Cerebrovascular Reactivity and Oxygenation in Preeclamptic Patients Compared with Healthy Pregnant Women.

Investigators: Stephen Contag

This research is being done in preeclamptic (a condition of pregnancy-induced hypertension accompanied by swelling of the feet and protein in the urine) and healthy women to measure blood pressure, cerebral tissue hemoglobin saturation and peripheral hemoglobin saturation. This study will help to understand the relationship between cerebral vascular resistance and oxygen consumption in preeclamptic patients. It will test the hypothesis that increased cerebral blood flow during preeclampsia decreases the rate of oxygen extraction in the brain.

MA.32: A Phase III Randomized Trial of Metformin Versus Placebo on Recurrence and Survival in Early Stage Breast Cancer.

Investigators: Cristina Truica, Mayer Gorbaty, Marvin J. Feldman, Pallavi Kumar and Lavanya Yarlagadda.

This study examines whether Metformin, an agent that is commonly used to treat diabetes, can decrease or affect the ability of breast cancer cells to grow, and whether Metformin will work with other therapies to keep cancer from recurring.
If I submit an IRB application do I have to submit an ARB application also?

Yes, unless your study is determined by the IRB to warrant exempt status both applications must be submitted and approved before you can begin any research activity.

Who has to sign the IRB application before it can be submitted for review?
The principal investigator and the chief.

Who has to sign the ARB application before it can be submitted for review?
The principal investigator, the chief of the department in which the research is being conducted, the department director, and any other directors of departments involved in the study. A vice president’s signature is also required, but only after the application has been approved by the ARB.
The “We Do Research Too” Contest Winner!!!

Really? Really! Please congratulate Akiva Shmidman on “winning” our “We Do Research Too” contest. Well, not really winning, it’s more like a consolation prize. Akiva was our only submission (outside of the Department of Research), so the “contest” was officially canceled. However, in recognition of his landslide default “win” he was unceremoniously presented with five (5) Neil Bucks!

Here’s what Akiva had to say about his big, ah, win: “I am very excited to have won the contest for the Rehabilitation Department. There are great opportunities in Sinai to conduct research and Dr. Freed is a great resource who is always willing to help in the sometimes arduous process. It is important for clinical staff at all levels to take advantage of the research department which is uniquely available in this institution.”

After seeing the above statement Dr. Freed commented: “Akiva is gracious and a great sport. This was certainly the best 5 Neil bucks I’ve ever given away. … and, you just can’t buy that kind of advertising!”