Preterm Birth Linked to Asthma in Young Adulthood

Due to the growing prevalence of preterm birth and improved survival, the long-term health outcomes of preterm birth are becoming increasingly important. Dr. Casey Crump, MD, Clinical Assistant Professor of Family Medicine, is studying the long-term effects of preterm birth in a national cohort of more than 600,000 individuals born in Sweden in 1973-79, including more than 27,000 who were born preterm. These individuals are now being followed in young adulthood for multiple health outcomes including cardiovascular, endocrine, neurologic, and immune disorders. The results will advance our understanding of perinatal influences on health in later life, and may lead to earlier interventions to prevent disease.

In a recent study, Dr. Crump and his co-investigators examined whether preterm birth is linked to asthma in young adulthood. Preterm birth is associated with asthma-like symptoms in childhood, but until now the risk of asthma in later life was unknown. Dr. Crump found that individuals who were born extremely preterm (gestational age 23-27 weeks) were more than twice as likely to be prescribed asthma medications in young adulthood (25-37 years) than those who were born full-term (gestational age 37-42 weeks) [adjusted odds ratio 2.39; 95% confidence interval, 1.41-4.06]. Later preterm birth, however, was not associated with increased asthma medication prescription in young adulthood. These findings identify extreme prematurity as a new potentially important risk factor for asthma at least into young adulthood. Recognition of this risk factor may lead to better detection and treatment of asthma in these individuals throughout their life course. This study is published in the April 2011 issue of Pediatrics.

<table>
<thead>
<tr>
<th>Gestational Age</th>
<th>Unadjusted OR (95% CI)</th>
<th>Adjusted OR (95% CI)</th>
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</thead>
<tbody>
<tr>
<td>23-27 weeks</td>
<td>2.38 (1.40, 4.04)</td>
<td>2.39 (1.41, 4.06)</td>
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<tr>
<td>28-32 weeks</td>
<td>0.95 (0.78, 1.16)</td>
<td>0.95 (0.77, 1.15)</td>
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<tr>
<td>33-36 weeks</td>
<td>0.97 (0.90, 1.04)</td>
<td>0.97 (0.90, 1.04)</td>
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<tr>
<td>37-42 weeks</td>
<td>1.00</td>
<td>1.00</td>
</tr>
<tr>
<td>≥43 weeks</td>
<td>0.96 (0.89, 1.03)</td>
<td>0.95 (0.88, 1.03)</td>
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</tbody>
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*Defined here as 1) both a beta-2 agonist inhalant and a glucocorticoid inhalant, or 2) a combination inhalant containing a beta-2 agonist and other drugs for obstructive airway diseases.
†Adjusted for age, gender, fetal growth, maternal marital status, maternal education, family income, and maternal prescription of asthma medications during the follow-up period (2005-07).
What Should We Be Teaching Medical Students About Professionalism?

What are medical students concerned about in their own development of professional behavior? What issues involving professionalism are students facing in their clinical experiences? In a study led by Erika Schillinger, MD, Clinical Associate Professor of Family Medicine, 125 issues from logs kept by students in the Core Family Medicine Clerkship were analyzed. The two most common themes that emerged were professional identity (29%), and communication of sensitive issues (28%). Other issues included managing relationships (23%), respect for colleagues and patients (18%), reconciling the medical agenda with patient's choices (17%) and how to respond to suboptimal patient experiences in the delivery system (13%). Some examples: “How do I behave as a doctor?” – “The patient was questionably flirting with both the attending and the medical student. The attending set a good example by deflecting any advances and refocusing the discussion on the patient's neck pain.” – “The challenge was to discuss reasons for denying her request, despite her obvious disagreement, in a calm, pleasant, and professional manner.” – “Found that I had to guard against judgmental feelings towards the patient including 'why don't you take better care of yourself.'” The investigators concluded that challenges identified by students lend themselves to potential curricular interventions at the pre-clerkship and clerkship levels: during courses geared toward preparation for clerkships, standardized patient modules, web-based cases, and during reflection activities.

Student professional performance at Stanford now also impacts their clerkship evaluations. Recently the School instituted a form of grading system in clerkships, transitioning from a pass-fail system to a criterion based evaluation in which students who distinguish themselves as “exceptional” will pass their clerkships “with distinction.” Among the 3 domains evaluated is student professionalism. Though most attention has focused on identifying lapses in this area, in a second study Schillinger and colleagues conducted a qualitative analysis of reports of student performance to define exceptional professional behaviors. Among qualities identified were reliability, collaboration, lifelong learning, interactions with patients and families, resilience, leadership, advocacy and honesty.

Both of these studies were selected for poster presentations at the January 2011, STFM Conference on Medical Student Education in Houston, TX. Stanford medical student Nina Patel received one of only 4 student scholar awards to attend the conference, granted by the STFM. She was particularly celebrated as a student from a "Target School," one that does not have a department of Family Medicine. Another student, Sarah Jane Selig also got funding to attend.

Humberto Monge Receives American Society of Transplant Surgeons Inaugural Advanced Transplant Provider Award and the Mary Em Wallace Teaching Award
Humberto L. Monge, PA-C, MPAS (Class of 1990), recently received the 2011 Advanced Transplant Provider Award presented by the American Society of Transplant Surgeons recognizing his time and effort dedicated to advancing clinical practice through translation of scientific information, development of standards and clinical mentoring. Monge began his career in transplantation when he joined the Transplant Program at California Pacific Medical Center in San Francisco in 1990. In 1995 he helped re-establish the liver transplant program at Stanford University where he plays an essential role in all aspects of the adult and pediatric programs. His impact has gone well beyond the all important immediate care of patients. While assisting in over 1000 transplants, he not only facilitated the operations, he also was instrumental to the training of hundreds of residents and over 20 fellows. “He has the unique skill of teaching them operative techniques and treatment options while making them look good.” He wrote the manual on the Liver Transplant Protocols for Stanford Hospital and Clinics and Lucile Packard Children’s Hospital used by residents, PAs, fellows, and attendings. Working with the Primary Care Associate Program at Stanford, he developed and oversees the PA student rotation program at Lucile Packard Children’s Hospital and Stanford Hospital & Clinics. He actively participates in research and has coauthoring 12 peer-reviewed papers. While helping build the liver program and advance the field of transplantation, Mr. Monge has continued to serve our country as he has risen through the ranks of the Naval Reserves. He was called to active duty for Operation Desert Storm 1991 and Operation Iraqi Freedom 2004-05.

Monge is also the 2010 recipient of the Mary Em Wallace Teaching Award, an annual award given by the PCA Program in recognition of excellence in teaching physician assistant students and serving as a model of the highest professional qualities as a physician assistant. This award recognizes his skills in education, ranging from lectures in liver disease, hands-on training in OR scrub and gowned, as well as his leadership in developing educational opportunities for PCAP students at Stanford Hospital & Clinics and Lucile Packard Children's Hospital. Every year a total of 20 - 30 PCA students complete training on Adult and Pediatric Renal Transplant, Liver Transplant, Hepatology, General Surgery, Cardio-Thoracic Surgery, Trauma, and Orthopedic services. His guidance and support have helped several PCA graduates to obtain positions throughout Stanford Medical Center.

**PCAP Class of 2010 Commencement Exercises**

The Primary Care Associate Program (PCAP) Commencement Exercises were held on January 15, 2011. A large group of family and friends celebrated this joyous occasion in the careers of our PA trainees. Key note speaker, John Beuerle, MD, MS, California Emergency Physicians, offered the following three pieces of valuable clinical wisdom from his practice experience to the students: “First: As a practicing clinician, you will make mistakes. Without a doubt, the mistakes you make are the most painful part of your continuing education, but they are a fundamental part of your education nonetheless. Second: Take the time to actually listen to your patients. There is always a reason behind their visit, although that reason may not be completely clear to you right away. Sometimes the things which are not said are more important than those which are. Third: Remember that your most important responsibilities are to show compassion and to relieve suffering. You can be the most brilliant person in all of medicine, but if you fail to perform these two simple but crucial acts, it all amounts to nothing in the eyes of your patients. On the other hand, your kindness and compassion will be remembered when all other details of the treatment you provided have long since been forgotten.”

Several awards were given. Teaching: Valerie Berry, MD; Preceptor Teaching: James Eichler, MD; Staff: Cynthia Ahrendsen.

**Dana Romalis Selected for Rathmann Fellowship in Patient Centered Care**

Dana Romalis have been selected as one of the inaugural Rathmann Family Foundation Fellows in Patient-Centered Care. As part of the fellowship she will engage in directed readings and weekly seminars under the supervision of the faculty directors of the program, participate in ongoing curriculum development in undergraduate medical education in the area of patient-centered care, develop and conduct a medical education scholarly project related to patient-centered care, and participate in medical student teaching in the Stanford Educators-4-C.A.R.E. (E4C) program, serving as a mentored preceptor with selected faculty.

Romalis attended medical school at the University of British Columbia in Vancouver, Canada, where she was in the inaugural class of their new Problem Based Learning curriculum. Her passion for patient-centered care was nurtured in the Family Medicine track at the Residency Program in Social Medicine (RPSM), in the Bronx, NY. She was able to pursue her interest in teaching at the RPSM, first as chief resident and then as an attending physician, before relocating to San Jose, CA. Currently, she is an attending physician on the Valley Homeless Healthcare Program’s interdisciplinary team at Valley Medical Center, and has been teaching Clinical Reasoning in the medical school Practice of Medicine course since August 2010. As a Rathmann fellow, she is looking forward to the opportunity for faculty skills development, while sharing her experiences with interdisciplinary care and group visits with the greater Stanford community.

**Rachel Stark Farrel Recognized for Service to the Underserved**

Rachel Stark Farrel PA-C, LM, CPM, recently received the PARAGON Award from the American Academy of Physician Assistants. This award honors a physician assistant who has provided accessible, quality health care to the underserved in a rural community or an inner city setting of the US. Farrel founded a rural clinic in the Marysville area in Northern CA. The clinic's name is Harmony Health Medical Clinic. She graduated from the Stanford PCAP in 1989.

**Stanford Medical Students Match in Family Medicine**

Two Stanford medical students matched in Family Medicine training programs this year: Nina Persotem Patel, UC San Francisco-CA; and Kierann Elizabeth Smith, Mid-Hudson Family Health-NY. As in the past several years, some of the best and brightest Stanford students pick Family Medicine. We wish these students great success in their careers.

**Evaleen Jones, MD, Certified in Addiction Medicine**

Evaleen Jones, MD, Clinical Associate Professor of Family Medicine, was recently certified by the American Board of Addiction Medicine. The ABAM certificate, recognizes excellence in the practice of Addiction Medicine, and certifies the individual has completed an approved educational program and an evaluation, including a secure examination designed to assess the knowledge, experience, and skills requisite to the provision of high quality patient care to those who suffer from the disease of addiction.

**Tracy Rydel Promoted to Clinical Assistant Professor**

Tracy Rydel, MD is being promoted to the Clinical Assistant Professor of Family Medicine. Rydel is the Director of the Family Medicine Clerkship, one of the core clerkship required for all medical students. She is recognized for her excellence in teaching and clinical care. She has also completed a fellowship in Integrative Medicine.
Tell Us About Yourselves

Family Medicine has touched the careers of many students and residents through the years. We would love to hear about your own careers and suggestions you may have for our programs. Send information to: joeh@stanford.edu