An Un-Meeting to Address the Opioid Crisis through Translational Science

Attendee Briefing Book
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Welcome from the CLIC Co-Directors

We are delighted that you have chosen to take part in our ‘Un-Meeting to Address the Opioid Crisis through Translational Science’ on June 1 and 2 at the University of Rochester Medical Center (URMC), hosted by the Center for Leading Innovation and Collaboration (CLIC). One of the objectives of the Clinical and Translational Science Awards (CTSA) Program is to promote collaboration to address problems that no one team can overcome in isolation. We hope this Un-Meeting will do just that.

The purpose of this multidisciplinary event is to bring together people with varying backgrounds and expertise, and to foster a free-flowing exchange of ideas regarding the role of translational science in combating the opioid epidemic. With the event’s agenda driven by the attendees, we hope to encourage lively discourse about how to best address the presented challenges through research.

We are extremely excited about the list of accomplished speakers who will share brief presentations to set the stage for dynamic discussion throughout the day. We’re equally excited to see what connections, collaborations and concepts are developed as a result of the event.

We at the CLIC are grateful for our funding from the National Center for Advancing Translational Sciences (NCATS) at the National Institutes of Health (NIH), Grant U24TR002260, which helped make this event possible.

Let us know if and how we can assist you during your time at URMC. Thank you again for coming and helping to make our first CLIC Un-Meeting a success.

Sincerely,

Martin Zand, MD, PhD

Deborah Ossip, PhD
The Planning Team

The Un-Meeting Steering Committee

Mitra Ahadpour, MD, DABAM, U.S. Food and Drug Administration (FDA)

Redonna Chandler, PhD, National Institutes of Health (NIH), DHHS

Pablo Cure, MD, MPH, National Center for Advancing Translational Sciences (NCATS)

Paul Dougherty, DC, DABCO, Canandaigua VA Medical Center

Robert Dworkin, PhD, University of Rochester

Larry Hawk, PhD, University at Buffalo
Karen Jeans, PhD, CCRN, CIP, Department of Veterans Affairs

Kenneth Leonard, PhD, University at Buffalo

George Mashour, MD, PhD, University of Michigan

The CLIC Un-Meeting Planning Committee

Tricia DiQuattro

Erika Augustine, MD
Un-Meeting Details

Logistics:

**Informal Reception**: Friday, June 1 from 5:00 – 7:00 p.m.
University of Rochester Medical Center, Saunders Research Building, 265 Crittenden Blvd., Rochester NY, 14642

**Un-Meeting Event**: Saturday, June 2, 2018 from 7:45 a.m. – 3:00 p.m.
University of Rochester Medical Center, Saunders Research Building, 265 Crittenden Blvd., Rochester NY, 14642

‘Un-Agenda’:

- 7:45 am - Registration / Breakfast / Networking
- 8:30 am - Welcome & Opening Remarks
- 8:40 am - Framing the Issues - 4 slides x 4 minutes (4x4’s)
- 9:00 am - Topic Identification (Agenda Creation)
- 9:45 am - Morning Breakout Sessions – 2 x 45 minutes
- 11:30 am - Lunch / Networking
- 12:20 pm - Re-Framing the Issues - 4 slides x 4 minutes (4x4’s)
- 12:40 pm - Topic Identification (Agenda Creation)
- 1:15 pm - Afternoon Breakout Sessions - 2 x 45 minutes
- 2:45 pm - Closing Remarks

4x4 presenters:

- Redonna Chandler, PhD, AIDS Research Program Director, NIDA
- Paul Dougherty, DC, DABCO, Staff Chiropractor, Canandaigua VA Medical Center
- Michael Kurilla, MD, PhD, Division of Clinical Innovation Director, NCATS
- Ken Leonard, PhD, Director, Research Institute on Addictions and Senior Research Scientist, University at Buffalo
- George Mashour, MD, PhD, Associate Dean, Clinical and Translational Research and Executive Director, Michigan Institute for Clinical and Health Research
- Michael Mendoza, MD, MPH, MS, FAAFP, Commissioner of Public Health, Monroe County Department of Health, Associate Professor, University of Rochester
- Christian Thrasher, Senior Director, Substance Use & Addiction, Clinton Health Matters Initiative, Clinton Foundation
The Un-Meeting Concept

An Un-Meeting is an event without the rules and structure of a traditional conference. The attendees create and drive the agenda and discussions. This format provides a unique approach for attendees to discuss their experiences and identify areas of potential research, innovation and collaboration. It is an interactive way to cultivate ideas and make new academic, industry and government connections with the goal of developing multidisciplinary, collaborative partnerships.

This unconventional meeting will be the first in a series of Un-Meetings organized by the CLIC to promote team science within and in connection to the national CTSA Program consortium.
The Opioid Crisis & Translational Science

Time and again, history proves that science and research play critical roles in resolving pertinent public health issues. With an estimated 25 million suffering daily from chronic pain, 2 million Americans addicted to opioids, and more than 115 citizens dying every day due to overdoses, it’s clear that opioid addiction is an ongoing and rapidly evolving public health crisis that requires innovative scientific solutions.

In the past few decades, the U.S. has made progress in understanding the biology and science behind pain and addiction, but intensified and better-coordinated research is needed to accelerate the development of medications and technologies. The NIH has committed to taking an “all hands on deck” approach to developing and delivering those scientific tools, and the CTSA Program is determined to be a key player along the way.

To help encourage CTSA Program involvement with addressing the opioid crisis, the CLIC is hosting this Un-Meeting to bring together researchers, clinicians, policy makers, public health professionals and healthcare innovators interested in combating the opioid crisis through translational science and research.

The event will focus on topics like developing non-addictive strategies to manage pain and creating innovative methods to engage those with opioid use disorders in research. Other potential topics may include:

- Strategies for reducing deaths from opioid overdoses
- Innovative clinical research using mobile technology to treat & prevent OUD
- Prescribing practices and training approaches
- Implementation research that harnesses diverse data and translates best evidence into practice
Additional Reference Materials

**New England Journal of Medicine: The Role of Science in Addressing the Opioid Crisis**

Publication from NIH’s Nora D. Volkow, MD, and Francis S. Collins, MD, PhD, on developing better overdose-reversal and prevention interventions to reduce mortality, saving lives for future treatment and recovery; finding new, innovative medications and technologies to treat opioid addiction; and finding safe, effective, non-addictive interventions to manage chronic pain. [Read more >>](#)

**The National Academies Press: Advancing Therapeutic Development for Pain and Opioid Use Disorders through Public-Private Partnerships: Proceedings of a Workshop**

This publication shares the findings of an opioid-related workshop. Given the complexity of chronic pain and opioid use disorders, many workshop participants discussed challenges to advancing the discovery and development of new treatments, including the complex experience of pain, a lack of resources to treat pain, insufficient understanding of pain mechanisms, and limitations in conducting clinical trials. [Read more >>](#)

**NIH: NIH launches HEAL Initiative, doubles funding to accelerate scientific solutions to stem national opioid epidemic**

At the 2018 National Rx Drug Abuse and Heroin Summit, Francis S. Collins, MD, PhD, announced the launch of the HEAL (Helping to End Addiction Long-term) Initiative: an aggressive, trans-agency effort to speed scientific solutions to stem the national opioid public health crisis. Toward this effort, NIH is nearly doubling funding for research on opioid misuse/addiction and pain from approximately $600 million in fiscal year 2016 to $1.1 billion in fiscal year 2018, made possible from a funding boost by Congress. NIH’s efforts contribute to a government-wide push to meet the President’s goal of ending the opioid crisis. [Read more >>](#)

**The White House: The President’s Commission on Combating Drug Addiction and the Opioid Crisis**

The primary goal of the President’s Commission on Combatting Drug Addiction and the Opioid Crisis is to develop an effective set of recommendations for the President to combat the opioid crisis and drug addiction in our nation. Many of the recommendations that follow will require appropriations from Congress into the Public Health Emergency Fund, for block grants to states and to DOJ for enforcement and judicial improvements. [Read More >>](#)
**NIH: Federal Pain Research Strategy**

The Federal Pain Research Strategy is an effort of the Interagency Pain Research Coordinating Committee and the Office of Pain Policy of the NIH to oversee development of a long-term strategic plan for those federal agencies and departments that support pain research. A diverse and balanced group of scientific experts, patient advocates, and federal representatives identified and prioritized research recommendations as a basis for this long-term strategic plan to coordinate and advance the federal pain research agenda. [Read more >>]

**Canadian Medical Association Journal: Narrowing the treatment gap in managing opioid use disorder**

North America is in the midst of a public health crisis related to opioid use disorder and overdose. In the U.S., opioid overdose is the number-one cause of death from unintentional injuries, surpassing deaths related to motor vehicle injuries and exceeding the death toll seen at the peak of the HIV epidemic. Canada is second only to the United States in per-capita opioid use, and the numbers of opioid-related deaths, emergency department visits and hospital admissions are climbing. A new Canadian guideline on the management of opioid use disorder is appropriately geared toward front-line health care providers, who are vitally important to decreasing the existing gap in treatment for opioid use disorder. Pharmacotherapy is unequivocally the evidence-based first-line treatment for opioid use disorder. [Read more >>]

**Further Reading**

CLIC’s [Special Emphasis web page](https://www.clic.org/special-emphasis), which features news items, events and supplement reading materials related to the role translational science plays in addressing specific health initiatives, is currently focused on the opioid crisis. Additional reading materials can be found [here](https://www.clic.org). NIH’s HEAL Initiative page also features useful resources and reading materials, which can be viewed [here](https://www.nih.gov/health/).

**The University of Wisconsin-Madison: A-CHESS Mobile Application**

David Gustafson, PhD, Director, Center for Health Enhancement Systems Studies, shares a brief presentation about A-CHESS, a mobile application developed by the Center for Health Enhancement Systems Studies, which is designed and tested to identify key moments that might lead to relapse and provide support to prevent it. [View the presentation >>]
Attendee Background

Sara Abiola, PhD, JD, Columbia University

I am an Assistant Professor of Health Policy & Management at Columbia University and I have substantial expertise in using a mixed methods approach that combines regression analysis of large-scale nationally representative surveys, primary legal research, and thematic content analysis to evaluate the relationship between law, policy, and adolescent health behaviors and outcomes such as diet, physical activity, and substance use/abuse. A current study funded by NIH NIDA aims to understand the effects of marijuana decriminalization laws on the social determinants of health among young minority populations, including educational attainment, employment, and marital status. We examine the potential implications of these state-level policy changes by exploring differences in outcomes between marijuana users who have been arrested and marijuana users who have not been arrested.

I’m interested in gaining additional knowledge.

Nicole Acquisto, PharmD, University of Rochester

I am currently an emergency medicine clinical pharmacist and work closely with the pharmacy and emergency department (ED) on medication optimization in the ED and hospital. I have chaired an Opioid Reduction Task Force for the ED that has focused on overall reduction of opioid use and discharge opioid prescriptions for mild to moderate pain. The program focused on giving providers and nurses the tools to discuss pain management with patients and non-opioid pharmacologic and non-pharmacologic treatment pathways.

I am interested in networking, collaboration and learning about research opportunities.
Mark Alsay, University of California Los Angeles

I am an incoming student trainee conducting health services research on integrated substance use treatment programs and the value of partnerships. I am particularly interested in best practices to treat Substance Use Disorder, the value of community partnerships and impacts of treatment on family and social dynamics.

I am hoping to learn more about this area of study and develop collaborations with professionals to advance the work.

Lisham Ashrafioun, PhD, Canandaigua VA Medical Center

I have two related lines of research: one focuses on characterizing suicide risk among individuals experiencing chronic pain with an emphasis on opioid misuse and the other focuses on testing the effects of nonpharmacological pain management interventions on functioning upstream and downstream suicide risk mitigation strategies.

I am interested in networking, collaboration, and learning about research and funding opportunities.

*No photo available

Mona AuYoung, PhD, MS, MPH, Scripps Translational Science Institute

My background, which is in public health, specifically behavior change and health disparities, has relevance to the opioid issue. In addition, my experience in implementation science may be helpful to the overall conversation. Although opioids are not my main area of expertise, I’m now collaborating on related research with a clinician colleague with expertise in pain management.

From this event, I’m hoping to gain additional knowledge, develop new collaborations and gain access to expertise/data.
Suzanne Bakken, RN, PhD, FAAN, FACMI, Columbia University

I lead a P30 center of excellence focused on symptom self-management, the Precision in Symptom Self-Management (PriSSM) Center which is funded by the National Institute of Nursing Research. We collect a set of common data elements including pain measures across all studies along with genotype, phenotype, and environmental data.

From this event, I’m hoping to develop new collaborations and identify funding opportunities.

Laura-Mae Baldwin, MD, MPH, Institute of Translational Health Sciences

I bring expertise in implementation of primary care-based initiatives to address opioid management. I direct the WWAMI region Practice and Research Network (WPRN), a collaboration of 65 practices in Washington, Wyoming, Alaska, Montana, and Idaho that has participated in a pragmatic trial of a team-based opioid management program called the Six Building Blocks. We are now disseminating the Six Building Blocks across Washington State in collaboration with the WA Department of Health and its Accountable Communities of Health. The WPRN is a member of the NIDA Clinical Trials Network (CTN), and we have led a cross-CTN observational research study examining use of opioids and co-prescribing of opioids and sedatives in primary care practices nationally.

From this event, I’m hoping to develop additional collaborations.

Michael Barbato, Canandaigua VA Medical Center

I work within a multidisciplinary setting offering alternative treatments to opioid medication for treatment of pain including pain education, exercise recommendation, manual therapy/manipulation and acupuncture.

From this event, I’m hoping to gain additional knowledge on the topic and better integrate to improve quality and appropriateness of care provided.
Nancy Bennett, MD, MS, University of Rochester

I am the co-director of the University of Rochester’s Clinical and Translational Science Institute (UR CTSI) and am interested in public health interventions and research, and in best methods of community engagement.

From this event, I’d like to gain additional knowledge and learn about new collaborations.

Julie Borgen, Canandaigua VA Medical Center

I provide counseling to Veterans who have a history of using opioids to deal with pain and are learning other methods of coping. I also teach mindfulness strategies.

I’d like to learn more information about physical side effects of opioid use to understand how mindfulness & other coping strategies can help replace opioid use.

Michael Bozarth, PhD, University at Buffalo

I've been studying opioids for over 40 years. My early research was instrumental in helping to establish dopamine as important neurotransmitter in motivational processes including addiction (e.g., identifying the brain site where heroin and other opioids initiate their reinforcing effects). My first publication investigating the effects of naloxone hydrochloride (Narcan) on opioid-induced enhancement of brain reward systems was in 1977; I've been an advocate of take-home naloxone since the 1980s. Glad to see others finally catching up to what was an obviously critical harm-reduction strategy. Too bad it cost so many lives while the field lagged behind. What other harm-reduction strategies are not being adopted today that continue to costs overdose victim's lives? (That was rhetorical.)

At this event, I’d like to potentially act as a resource person; open discussion of potential harm-reduction strategies that are practical to adopt today considering the current epidemic in overdose deaths.
Jeanmarie Burke, MS, PhD, New York Chiropractic College/Finger Lakes School of Acupuncture

My research training includes expertise in neurophysiology of spinal manipulation and exercise science. Within the field of exercise science, my expertise addresses the neuromuscular adaptations to exercise and aging with my breadth knowledge including exercise training principles. Both areas of my research expertise align with non-pharmacologic approaches for pain management within a complementary and integrative health model.

From this event, I’m hoping to gain additional knowledge and develop new collaborations for funding opportunities.

Eric Caine, MD, University of Rochester

My related experience includes: [1] Worked with Vincent Dole with the development of methadone maintenance in the late-1960s, and service delivery in Boston during early-1970s; [2] Advocated and oversaw growth of addiction services and MICA programs at URMC, plus integrated primary care, 1990s-2017, as dept. chair; [3] Director, CDC funded injury control research center, emphasizing suicide prevention, with a public health focus and upstream attention to common risk factors for adverse fatal outcomes; [4] co-author with Ian Rockett (West Virginia U) regarding manner of death classifications, interface of suicide and 'accidental' overdose deaths, and understanding of self-injury mortality (SIM); [5] working with partners in Colorado and NYS to develop community-integrated upstream prevention efforts that reduce premature SIM.

I’d like to gain additional knowledge about new collaborations.
Patricia Cavazos, PhD, Washington University School of Medicine at St. Louis

I am a licensed psychologist with a wealth of clinical training and experience treating patients with all types of psychiatric diagnoses including substance use disorders. I am also an NIH-funded scientist with a research program that has been broad in scope but thematically encompasses epidemiological fieldwork focused on substance use disorders and HIV/AIDS risk-associated sexual behaviors and outcomes, including harm reduction strategies to prevent overdose and HCV/HIV transmission.

From this event, I’m hoping to develop new collaborations and gain knowledge.

Redonna Chandler, PhD, NIH, DHHS

I am the director of the AIDS Research Program at the National Institute on Drug Abuse (NIDA). My area of expertise to the opioid issue is in clinical research, programmatic trials and implementation sciences.

I’m interested in learning about innovative ideas and collaborations.

Lisa Cleveland, PhD, RN, PNP-BC, IBCLC, UT Health San Antonio

I’m currently conducting a study with mothers of substance exposed infants as well as a study focused on the development and evaluation of web-enhanced, interactive, case-based learning activities. I’m interested in underrepresented and at-risk families, high-risk mothers and infants, substance use disorders in pregnancy and neonatal abstinence syndrome.

I’m interested in developing new collaborations and learning about funding opportunities for my research.
Marcia Conti, University of Rochester

I generate ideas to solve problems using information technology. Taking the time to identify and validate a problem and its root cause is, in my experience, the most critical step in successful problem solving. I can facilitate problem identification discussions and then determine if information technology could be used to create a proposed solution.

I’d like to gain input from Opioid experts about the problem and its root cause.

John Cullen, PhD, University of Rochester

I am not a content expert in this area but I’m interested in learning how we as an institution can better engage our community organizations and conduct research around the opioid issue.

Pablo Cure, MD, MPH, NCATS

My experience is in clinical and translational research, multi-site research projects, study implementation, and patient enrollment strategies.

From this event, I’m hoping to identify new projects that can successfully address some of the main issues in the opioid crisis (i.e. overdose deaths, prevention of opioid addiction).
Ann Marie Dale, PhD, OTR/L, Washington University of Medicine at St. Louis

I have a primary interest in studying interventions to prevent opioid misuse among high-risk worker populations. I’m currently using pharmacy and claims data from a union's health fund to identify the pattern of opioid use and initiating diagnoses. The data will also be used to evaluate changes in prescriptions after starting an opioid prescription policy to restrict supply with the initial fill.

I’m interested in collaborating with other CTSA Program members who have access to similar populations and data.

Denise Daudelin, RN, MPH, Tufts CTSA

My interest is in the development and use of quality of care measures for the treatment of patients with opioid use disorders. My related experience is in developing quality care measures in inpatient, outpatient and public health settings. My emphasis is on the development, effective implementation and use of measures broadly to improve the provision of care, meeting the patient wherever they are in the healthcare system.

I’d like to gain additional knowledge and meet potential collaborators interested in metric development and testing.

Adriane dela Cruz, MD, PhD, University of Texas Southwestern Medical Center

I am an addiction psychiatrist with an active clinical practice, treating patients with opioid use disorders. I am also engaged in national multisite clinical trials for addictions.

I’m interested in developing new collaborations and identifying funding opportunities.
Lauren Derhodge, DO, University at Buffalo

I am a buprenorphine prescriber, working part-time in a chemical dependency clinic.

From this event, I’d like to gain additional knowledge, data and learn about collaboration opportunities.

Rowena Dolor, MD, Duke University

I’m a general internist and Director of the Duke Primary Care Research Consortium, a primary care practice-based research network (PBRN) supported by the Duke CTSI. The clinicians in this network have a strong interest in opioid management studies. I am Co-Principal Investigator of the National Drug Abuse Clinical Trials Network (NIDA CTN) Mid-Southern Node at Duke University and co-leads the NIDA CTN PBRN Special Interest Group. This interest group aims to advance the inclusion of substance abuse research and treatment in primary care practice settings. I’m also a co-investigator on two recently awarded trials assessing interventions for opioid reduction in patients taking long-term opioid treatment for chronic pain.

I’m interested in developing new collaborations and identifying funding opportunities for primary care-based opioid research.

Paul Dougherty, DC, DABCO, Canandaigua VA Medical Center

My specific area of interest is in the non-pharmacological management of chronic lower back pain. Specifically the role of combining manual therapy type interventions with psychosocial interventions such as cognitive behavioral therapy for chronic pain. In addition, I have an interest in utilizing functional activities such as therapeutic horticulture in the management of pain.

From this event, I’m hoping to meet potential collaborators for future research pursuits.
Janelle Duda-Banwar, PhD, Rochester Institute of Technology

I am currently the research partner on a project targeting Northeast Rochester’s open-air heroin market. We are studying the opioid issue through a neighborhood lens and have developed a framework and guiding principles for this project. Through individual interviews, focus groups, observations, and analysis of available data, we will identify strategies to be implemented in the neighborhood.

I’d like to develop new collaborations and gain additional knowledge, and also to learn about what others are doing.

Robert Dworkin, PhD, University of Rochester

I am interested in the prevention and treatment of acute and chronic pain, and am involved in various efforts that have the goal of accelerating the development of novel interventions with improved efficacy and safety.

I am hoping to learn about CTSA Program activities related to pain.

Sarah Eisenstein, PhD, Washington University School of Medicine

I study behavior and neurobiological underpinnings of psychiatric disease. In regards to opioids, I will be studying whether persistent pain predicts post-surgical opioid use or misuse. I will also investigate whether individuals with persistent pain have altered kappa opioid receptor levels in the brain using PET with a kappa receptor antagonist radioligand.

I’m hoping to gain additional knowledge, develop new collaborations and identify funding opportunities.
Amali Epa-Llop, PhD, University of Rochester

I represent Women’s Initiative Supporting Health-Transitions Clinic (WISH-TC) team. We help women recently released from Monroe County Jail or New York State Prison access needed health services in a timely manner. We have multiple research projects, funded by NIDA and SAMHSA, examining evidence-based interventions addressing medical and substance use needs of women with criminal justice involvement in the context of primary care and peer community health workers.

I’d like to gain additional knowledge, develop new collaborations, gain access to needed expertise or data, and identify funding opportunities.

Kevin Ergil, DACM, New York Chiropractic College

I provide acupuncture services to veterans with chronic intractable pain. Our care often allows vets to reduce opioid use. Previously, I provided ‘harm reduction acupuncture’ to opioid addicts on the lower east side in New York and have experience as a clinician and consultant with other substance abuse service providers and clinical settings. I also have been a contributor to recently published integrative pain management content as a participant in the NIH pain education consortium.

I want to gain additional knowledge, assesses possibilities for new collaborations, and identify funding opportunities.
*No photo available*  

**Dean Foskett, Columbia University**

I am a current Columbia student in recovery from opioid addiction. Since stepping foot on Columbia’s campus, I have made a concerted effort to use my experiences and knowledge pertaining to addiction and the Opioid epidemic to help better my community. I have worked with other students in recovery to form a support group and bring meetings to campus and am currently a member of Columbia’s JED committee that functions as a working group on the issue of substance abuse/misuse on campus. I am also working on several new initiatives and pilot programs that will be shortly coming into effect on campus as well.

I’d like to gain additional knowledge, develop new collaborations and expand my network, as well as share my story, experience, strength, and hope.

*No photo available*  

**Amy Foster, RN BSN, Canandaigua VA Medical Center**

I work with Veterans with serious mental illness (SMI). Some of these Veterans have comorbid substance use disorder (SUD). Many of the Veterans from OEF-OIF (Afghanistan: Operation Enduring Freedom (OEF) / Iraq: Operation Iraqi Freedom (OIF)) are experiencing SUD with opiates as drugs of choice.

I’d like to gain additional knowledge.

**Julie Fritz, PhD, PT, ATC, University of Utah**

I am a Physical Therapist whose research has focused on non-pharmacologic pain management. Specifically, I have led several projects focusing on management of individuals with low back pain with opioid use as an outcome. I have also participated in several additional health services research projects using administrative data to evaluate care pathways for pain management and their association with opioid use.

From this event, I’d like to gain a knowledge of collaborative opportunities and funding directions.
Julie Gaither, PhD, MPH, RN, Yale University School of Medicine

I am a pediatric nurse and epidemiologist who has spent the past seven years investigating the impact of the opioid crisis on vulnerable populations—beginning with my dissertation research, which focused on quality of care for veterans receiving opioids long-term. I have also examined racial disparities in discontinuation of opioids among those who test positive for illicit drug use. My most recent work focuses on opioid poisonings in children and adolescents. Specifically, I was the lead author on a recent study examining national trends in hospitalizations for opioid poisonings among children and adolescents (JAMA Pediatr. 2016 Dec 1;170(12):1195-1201).

My aim is to develop collaborative relationships with others who are also doing research in this area.

Tamas Gal, PhD, MS, Virginia Commonwealth University

I am the Director of Research Informatics for the Wright Center for Clinical and Translational Research at the Virginia Commonwealth University. In this role I oversee the informatics service core, actively participating in data integration, consolidation, analysis and dissemination efforts to support clinical trials, as well as other basic, translational and clinical studies. I have extensive expertise in managing and integrating EHR data with additional data sources, including genomics data, biobanks and external registries. I have been collaborating with basic and clinical scientists to apply various informatics techniques on biomedical data to test scientific hypotheses, including natural language processing and next generation sequencing data analysis.

I’d like to gain knowledge on the use of informatics as a tool in the study and response to the opioid crisis.
Carla Giambrone, PhD, University at Buffalo

My research interests center around mindfulness and yoga to enhance self-regulation, physiological integration and well-being. Addictive behaviors run the gamut from opioid use to compulsive gambling. I seek to continue to create interventions that produce space between obsessive thoughts and compulsive behaviors.

I’d like to learn about new collaborations and research plans at this event.

Stephanie Godleski, PhD, Rochester Institute of Technology

My work emphasizes developmental and clinical psychology, especially understanding pathways of risk and resilience to psychopathology. In particular, I am interested in what ways parent substance use problems, such as opioid use, can have a direct impact on infants/children (e.g., neonatal abstinence syndrome) and bidirectional interactions with how adults interact and behave as peers, partners, and parents.

At this event, I’d like to develop new collaborations.

Sue Grigson, MD, PhD, Penn State University College of Medicine

I have been studying cocaine and opioid addiction for nearly two decades using an animal model. In doing so, my students and I have identified marked individual differences in vulnerability to drug addiction; we have determined that the addiction process begins immediately, particularly for vulnerable subjects; and we have identified a number of factors that can augment (e.g., sleep deprivation or a history of having binged on fat) or reduce (environmental enrichment) the development of addiction. While this work is ongoing, my efforts have now expanded as the Director of the newly formed Penn State Addiction Center for Translation to include educational, clinical, and outreach missions, along with translational research.

With both preclinical and clinical scientists involved in the study of opioid addiction, I am hoping to learn how to best use Penn State's CTSI to address the opioid crisis in our region.
Elaine Hill, PhD, University of Rochester

I attended the CTSI Innovation Lab in Buffalo, NY, regarding the opioid crisis and have been studying opioid use in pregnancy. I am particularly interested in state-level policies as well as geographic differences in access to treatment options that may influence whether pregnant women receive medication assisted treatment during pregnancy. I am also interested in postpartum and what clinicians and treatment centers can do to support new mothers to parent and prevent relapse. Finally, I am studying how local economic conditions may exacerbate the crisis.

I’d like to develop collaborations, gain access to data and identify funding.

Emily Hohman, PhD, Penn State University

I am a nutrition scientist with limited background in opioids or substance abuse, but I am developing research projects related to nutritional status, weight, and eating behaviors in individuals affected by opioid use. I am particularly interested in the maternal/child population and individuals in recovery from substance use disorders.

I’m interested in gaining additional knowledge and developing new collaborations.

Amy Holley, PhD, Oregon Health and Science University

I am a researcher examining the transition from acute to chronic musculoskeletal pain in youth, which includes a focus on opioid use in youth following acute injury. I am also a co-investigator on a recently funded R01 (NIDA) that is a longitudinal study prospectively examining trajectories of use and misuse among adolescents seeking treatment for pain who received opioid prescriptions in outpatient pediatric medical settings.

I’m interested in gaining additional knowledge and developing new collaborations.
Jonathan Hommel, PhD, University of Texas Medical Branch

I have worked in drug discovery targeting mu opioid receptor to inhibit motivational processes as an Investigator with GlaxoSmithKline. I have continued to work on mechanisms of motivated behavior to identify drug targets as an assistant professor with the University of Texas Medical Branch in the department of Pharmacology and Toxicology. In addition, I am currently the co-director of a translational team working on clinical trials to monitor use patterns of opioid prescriptions using Nomi bottles to establish medication adherence.

I’m hoping to meet new collaborators for a planned U-mechanism grant submission involving multiple CTSA Program hubs to monitor opioid use patterns.

Miranda Huffman, MD, University of Missouri-Kansas City

I am a family physician and faculty member at a safety net hospital in urban Kansas City, Missouri. I have been managing buprenorphine for my patients with opioid addiction for two years and have a special clinical interest in care of urban underserved patients. I have collaborated with community health researchers to deliver diabetes prevention classes in African-American churches and am now interested in offering programs to treat and prevent opioid addiction in the same environment.

I’m interested in gaining additional knowledge and identifying funding opportunities.
Julianne Imperato-McGinley, MD, Weill Cornell

I am the Program Director and the Principal Investigator of the Clinical and Translational Science Center (CTSC), the largest federal grant ever awarded to Weill Cornell Medical College. The CTSC was renewed in 2012 and most recently in 2017 for an additional five years of funding from the NIH’s Clinical and Translational Science Awards program. Under my direction, the CTSC has accomplished critical milestones in fostering multidisciplinary, multi-institutional collaborative research, educating and mentoring the translational research scientists of the future, and enhancing health care to the underserved communities of New York City. I have complimentary expertise in the response for the opiate crisis, with community-based interventions and outreach to individuals at risk for overdose.

From this event, I’d like to gain knowledge on the NIH grant submission process.

Samantha Jonson, NCATS/NIH

I am the Special Assistant to Dr. Christopher Austin, Director for the National Center for Advancing Translational Sciences. I assist Dr. Austin in the coordination of opioid-related activities for the Center.

From this event, I’d like to gain additional knowledge.

Lorraine Kelley-Quon, MD, MSHS, Children’s Hospital Los Angeles

I am a pediatric surgeon and I recently received an NIH KL2 award to study opioid use in adolescents after surgery. I am particularly interested in identifying risk factors for abuse, diversion and conversion to chronic use with the goal of creating physician decision support tools for prescribers. I am also active at the regional and national level in several pediatric surgery organizations and am creating guidelines for surgeons to use when prescribing.

I’d like to learn about new collaborations, identify funding opportunities, gain knowledge and network.
Michele Kipke, PhD, Children’s Hospital Los Angeles

I have conducted NIDA-funded research with high-risk and vulnerable youth, including homeless/runaway, substance abusing, LGBT, HIV+ youth, for the past 25 years. I am currently conducting NIDA-funded research with African American and Hispanic/Latino young men who have sex with men. My research is very applied; the goal is to link youth with needed prevention and/or treatment services. All of these populations use opioids and are at high risk for STIs and HIV.

I’m interested in networking; hearing about both the epidemic and approaches to addressing the epidemic, which might be relevant to Los Angeles.

Siran Koroukian, PhD, Case Western Reserve University

I have extensive experience in working with Medicaid data, integrating them with various other data resources, and conducting disparities-related studies. Individuals affected by the opioid epidemic are disproportionately represented in the Medicaid population, making Medicaid data highly relevant to the study of various (upstream and downstream) factors associated with the opioid issue. Also of note are my studies on multimorbidity, which use a data mining approach to identify empirically emerging combinations of conditions that are associated health outcomes and health services utilization.

I’d like to gain insight into the opioid issue, identify funding opportunities, and develop new collaborations.
Katrina Kubicek, PhD, Children’s Hospital Los Angeles

I have conducted NIDA-funded research with high-risk and vulnerable youth, including substance abusing, LGBT, HIV+ youth, for the past 10 years. I am currently conducting NIDA-funded research with African American and Hispanic/Latino young men who have sex with men. My research is very applied; the goal is to link youth with needed prevention and/or treatment services. All of these populations use opioids and are at high risk for STIs and HIV.

I’m interested in networking and hearing about both the epidemic and approaches to addressing the epidemic, which might be relevant to Los Angeles.

Michael Kurilla, MD, PhD, NCATS

I have extensive experience with the design, development, implementation, management, and oversight of large, complex multidisciplinary, multi-investigator programs addressing emerging unmet public health needs.

From this event, I’d like to assess viability and feasibility of various approaches to address short-term and long-term goals of the NIH opioid strategic plan.
Kathryn Lancaster, PhD, MPH, The Ohio State University

I am an infectious disease and substance use epidemiologist in the Division of Epidemiology in the College of Public Health at The Ohio State University. I have spent my career building my foundation in epidemiological and qualitative methodologies to understand and address co-occurring substance use and infectious diseases epidemics among vulnerable populations in the US and globally. Currently, I serve as an interventionist on a NIAID and NIDA funded trial within the HIV Prevention Trials Network, where our team designed an integrated intervention combining psychosocial counseling and supported referrals for substance use and HIV care and treatment for people who inject drugs in Vietnam, Indonesia, and Ukraine (HPTN 074). Additionally, I am an investigator on the NIDA funded UG3 which focuses on developing and implementing a service delivery plan for evidence-based interventions for addressing the opioid epidemic in rural Ohio.

I’d like to develop new collaborations and gain knowledge from experts in the field and identify funding opportunities.

Kenneth Leonard, PhD, University at Buffalo

My research has largely focused on the interpersonal relationships and substance abuse, including alcohol, marijuana, and prescription drugs. My work with opioids has focused on predictors of functioning of patients with a heroin overdose after release from the hospital, barriers to buprenorphine prescribing in primary care, and substance use and diversion of medications among patients receiving opioid medication.

I’d like to develop collaborations and identify funding opportunities.
Andy Lowe, Outer Cape Health Services

At Outer Cape Health Services, a community health center serving the rural outer Cape Cod, MA region, I have worked to secure funding for, design, and implement a community navigator solution to address the combined effects of mental illness and substance use disorder diagnoses, with particular emphasis on identifying barriers due to social determinants of health and facilitating services to mitigate these challenges. In partnership with the University of Massachusetts Center for Clinical and Translational Science, I am working on designing a research study to evaluate the effectiveness of community navigators in preventing opioid use disorder (OUD) and in improving medication assisted treatment (MAT). Previous to this, I worked at the University of Vermont Center for Clinical and Translational Science, where I did similar work for rural populations in Vermont, with an emphasis on veterans with criminal justice involvement. I have particular experience and interest in the design and development of information systems to enable community providers to access shared service plans.

I’d like to understand what research and interventions are happening in my areas of interest, network with other providers and researchers to explore possible multi-site opportunities, raise awareness of specific issues relating to rural/isolated populations, raise awareness of our experience in applying community health worker/navigator-based solutions, and learn about best practices for services and treatment options.

Joanne Malina, MD, Canandaigua VA Medical Center

The VA has been working on opioid safety for many years and despite these efforts we continue to lose Veterans to opioid overdoses. We have been providing Narcan to all the residents in our substance abuse residential program even if opioids are not their drug of choice in an effort to provide rapid rescue in the event of an overdose in the program.

From this event, I’d like to learn more about community programs and collaborative opportunities.
George Mashour, MD, PhD, University of Michigan

Clinically, I am an anesthesiologist so I frequently administer opioids and have trained in basic pain medicine. Scientifically, I am a neuroscientist and have conducted some work on brain networks of chronic pain patients. Administratively, I am supporting an opioid abuse prevention program and co-leading a plan to engage other CTSA Program hubs in this initiative.

From this event, I’d like to gain additional knowledge and learn about possible collaborations.

Julia Massimelli Sewall, PhD, University of California Irvine

My experience is in educational research on misconceptions and visual resources (models, videos) that facilitate explanation of difficult concepts in the classroom setting. I also lead and outreach program aimed at bringing science opportunities to minority serving institutions. Finally, I participate on transnational projects, including a successful project aimed at raising public awareness on antibiotic use, and I would like to use similar approaches (addressing misconceptions, visual explanations) to address the opioid crisis.

I’d like to gain access to expertise and develop collaborations.

Don McGarvey, PhD, University of Texas Health Science Center San Antonio

I am a funded researcher specializing in non-pharmacological pain management in military service members and veterans presenting with chronic pain, comorbid trauma symptoms, and OUD. Most of my research involves interdisciplinary clinical trials, often with complementary and integrative health components. I am particularly interested in how effective non-pharmacological pain management can help individuals with chronic pain transition off of opioid drugs with a lower risk of opioid recidivism later.

I’m looking to gain additional knowledge about managing OUD in complex patients, add some thrust to policy decisions about OUD management that include a focus on non-opioid pain management options.
Thomas Mellman, MD, Georgetown-Howard

I have an interest and investigative experience related to urban stressors affecting minority populations focused on sleep and trauma. I am in a clinical setting that frequently encounters opiate and other addictions and I am certified to prescribe buprenorphine.

From this event, I hope to learn about collaborative opportunities.

Michael Mendoza, MD, MPH, MS, FAAFP, Monroe County Health Department

I am the Commissioner of Public Health for Monroe County, NY. I have led a broad-based collaborative approach to the local opioid crisis by bringing together leaders from health care (including mental health and substance use providers), business, law enforcement, government, education, community-based organizations and the local recovery community within Monroe County and across the Finger Lakes Region. I was recently awarded the 2018 Charlotte Hegedus by the National Center for Alcoholism and Drug Dependence – Rochester Area in recognition of my work in addressing the opioid crisis in Monroe County.

I’m hoping to learn more about how other communities have utilized data to conduct public health surveillance, and develop public health interventions aimed at identifying and mitigating the risk factors that predict opioid overdose.
Erin Milligan, PhD, University of New Mexico Health Sciences Center

My research goals of the past 17+ years have focused on identifying the action of glial cells (e.g. astrocytes and microglia) and trafficking peripheral immune cells in the central nervous system in mediating pathological pain. Clinically, people with chronic pain experience little relief with currently available pain therapeutics including opioid-derived drugs. One reason for the lack of effective pain therapeutics may be that these drugs are designed to target neurons, despite the emerging hypothesis that glial cells play a critical role in mediating chronic neuropathic pain. Neurons in the spinal cord and brain express receptors for a constellation of immune signaling molecules (cytokines, chemokines and transcription factors) released from glia and immune cells creating continued pathological hyperexcitation of pain neurons. My current research explores non-opioid drugs to treat neuropathic pain in animal models with the goal of identifying compounds that harness the body's endogenous anti-inflammatory agents that act to suppress the damaging effects of glia and immune cells on pain signaling while minimizing direct neuronal actions.

I hope to learn and engage in discussions about the current approaches for opioid use in the treatment of pathological or chronic pain, and emerging non-opioid alternative strategies.

F. Gerard Moeller, MD, Virginia Commonwealth University

I have extensive experience in translational research in addictions, with a focus on therapeutics development. I have collaborated with research teams that include basic scientists, behavioral scientists and clinical trials specialists to develop forward and back-translation of information on the neurobiology of addictions, including opioid and stimulant addiction. I collaborate with our pain clinic in oversight of patients who are treated with opioids for chronic pain and who are at risk for opioid addiction.

From this event, I’d like to develop new collaborations and strengthen our hub’s ability to respond to the opioid crisis.
V. Dianne Moroz, RN, Canandaigua VA Medical Center

I am a registered nurse and have worked as a cardiac nurse as well as a nursing supervisor in a community hospital. I also now work in patient safety and have reviewed patient overdoses and deaths related to opioid use.

I’d like to identify ways to improve our programs.

Simone Ochrym, ChasingNirvanaClean

I’m doing a photojournalism/storytelling project called ChasingNirvanaClean, which is on how and why people enter and stay in addiction recovery. Interviews are recorded and focus on the journey into addiction, the turning point into rehabilitation, the recovery process and life in recovery. Project goals are to reduce stigma associated with addiction and recovery, increase awareness of the addiction process and addiction in our communities, and to reinstall hope in the hopeless that recovery is possible. I have a BSN, I’m a casual photographer, and I’m the mother who lost a child to an opioid overdose. My journey spanned a decade using everything I could to help my son out of addiction. ChasingNirvanaClean is now being completed and can be seen on Wordpress at ChasingNirvanaClean.blog. I have 18 participants that have been intensely interviewed by me in the project.

I’m hoping to gain new perspectives and knowledge concerning the opioid crisis. Funding opportunities is a bonus, CNC is a self-project and I’m always networking.
Laura Palombi, PharmD, MPH, MAT, AE-C, University of Minnesota

I work collaboratively with rural public health departments in northeastern Minnesota and am a member of the Carlton County Drug Court team in rural Minnesota. I am a member of a number of different community coalitions that strive to prevent and address opioid use and misuse and have worked on the Minnesota Statewide Targeted Response to the Opioid Crisis grant in naloxone distribution, opioid prescribing education, engaging institutions of higher education, and increasing community engagement to address opioid use.

I’m hoping that this meeting will allow me to develop new collaborations, identify funding opportunities, and gain additional knowledge.

Alicia Papalia, University of Rochester

I do not have related experience.

From this event I’d like to gain more knowledge about this topic.

Morgan Philbin, PhD MHS, Columbia University Mailman School of Public Health

My research focuses on how state-level substance use policies impact HIV-related risk behaviors for young people, particularly racial/ethnic and sexual minority youth. In addition, I have explored how social-structural factors influence the ways that people who use drugs engage in harm reduction.

I’d like to develop new collaborations, learn about/gain access to new data sources, and identify potential funding opportunities.
Jennifer Potter, PhD, MPH, UT Health Science Center San Antonio

My primary research interests focus on the prevention and treatment of substance use disorders, with emphasis on opioid use disorders, pain, prescription monitoring programs, and opioid use disorders in civilian and military populations. My expertise includes clinical trials of combined behavioral and medication-based treatment of co-occurring chronic pain and opioid use disorders. In addition, my more recent health services research entails the use of mixed-methods, including administrative data sets, to inform the development of systems-level structural interventions. I have served as the National Project Director for the CTN Prescription Opioid Addiction Treatment Study (POATS), the largest multisite clinical trial ever conducted to examine treatment of prescription opioid dependence in individuals with and without co-occurring chronic pain.

I’d like to support the CTSA Program in extramural funding.

Jonathan Prince, PhD, Weill Cornell

I began my work on opioids by publishing an article that addressed (in part) the influence of opioid use disorders on psychiatric hospitalization. In a subsequent publication, I examined opioid use disorders among adolescents, and then researched such disorders in an article on suicide attempt. Finally, I have recently submitted a manuscript on opioid use disorders among people with severe mental illness, and have partnered with researchers at the Cornell-Weill Medical Center. In order to disseminate information about the opioid epidemic, I have recently made presentations at two churches.

I hope to learn more about the opioid epidemic from experts in the field and find partners for new research projects.
Judith Qualters, PhD, MPH, Centers for Disease Control and Prevention

As Director of the Division of Analysis, Research and Practice Integration in CDC's National Center for Injury Prevention and Control, I oversee activities in support of CDC's strategy to address the opioid epidemic. This includes programmatic work to strengthen state prevention efforts and translate research into practice; applied research through our Injury Control Research Centers; a study of medication-assisted treatment; evaluation; informatics; and economic analyses.

From this event, I’d like to learn about innovative projects and develop new collaborations.

Andrew Quanbeck, PhD, University of Wisconsin-Madison

My research draws upon concepts from systems engineering in developing innovative approaches to the implementation of evidence-based practices in healthcare. My research focuses specifically on the prevention and treatment of substance use disorders in primary care settings. I was the principal investigator of an R34 clinical trial planning grant from the National Institute on Drug Abuse aimed at promoting the adoption of clinical guidelines for opioid prescribing in primary care, the results of which were published in January 2018 in the journal Implementation Science.

From this event, I’d like to develop new collaborations and gain access to data.

Brian M. Quigley, PhD, University at Buffalo

I have been an addictions researcher for over 20 years, mostly in the area of alcohol use. I am currently involved in research examining the physician perceived barriers to medication assisted treatment for Opioid Use Disorder (OUD). Having recently become part of a Behavioral Medicine program I am also interested in conducting research on the use of behavioral treatments for pain to assist individuals with OUD.

I’m interested in gaining knowledge and learning about potential for collaboration.
Robert Rhyne, MD, University of New Mexico Clinical & Translational Science Center

As a primary care physician I have cared for patients with chronic non-cancer pain for decades. As a researcher interested in best practices of disseminating evidence-based practices to rural primary care clinicians, my team has designed a comprehensive curriculum on pain management and safe opioid prescribing best practices, a practical, clinical algorithm approach. We now have two contracts with our state to provide this education to all prescribers in our state. We are also involved with MAT training and naloxone distribution efforts.

Our CTSA is in the process of planning an opioid research platform. I am hoping to form multi-site collaborations that will enhance our research effort.

Eric Rubinstein, JD, MPH, University of Rochester

I am an experienced Public Health Epidemiologist, a licensed attorney and will have completed an Executive MBA program the weekend of this event. As the Chief of Staff for the UR-CTSI, I can leverage and deploy available resources.

I’d like to gain content knowledge and network connections from this event.

Mechelle Sanders, PhD candidate, University of Rochester

I have experience working with community-based organizations in the Rochester community that provide services to individuals dealing with opioid addiction. In addition, I have experience working with patients and peer navigators/educators dealing with co-occurring conditions such as HIV and opioid dependency.

I’m interested in learning more about collaborations, community resources, data sources, etc.
Rakesh Singh, PhD, MPhil, University of Rochester

I am developing novel CB1 antagonists and 5HT2A antagonists for potential use in de-addiction or prevention of addiction.

I’m seeking collaboration for screening the compounds and funding opportunities.

Joanna Starrels, MD, MS, Albert Einstein College of Medicine

I am an Associate Professor of Medicine at Albert Einstein College of Medicine and Montefiore Medical Center in Bronx, NY. Board certified in both internal medicine and addiction medicine, I am a physician-investigator and educator focused on the safety and effectiveness of opioid analgesics for management of chronic pain in primary care and HIV treatment settings. I have been a PI on several NIDA awards including a K23, R01, and most recently a K24 award to mentor junior investigators to tackle the opioid crisis. Some specific research interests include use of urine drug testing, PMPs, written treatment agreements, collaborative pain care models as well as special populations such as HIV or sickle cell disease. I have also served as expert consultant to the New York City Department of Health and Mental Hygiene and the Centers for Disease Control and Prevention on initiatives to improve opioid prescribing for individuals with chronic pain.

From this event, I’d like to develop new collaborations and identify funding opportunities.

Mackenzie Steen, University of Rochester

I have expertise relevant to the opioid crisis through a project I am completing at the UR. Through this project, I am attempting to raise awareness about this crisis and its ill effects on the undergraduate campus at the University of Rochester.

From this event, I’d like to gain additional information and knowledge.
Hilary Surratt, PhD, University of Kentucky

My research expertise is in psychosocial intervention development and implementation research to improve health outcomes among vulnerable populations impacted by substance abuse, and opioid use in particular. For the past several years, my research efforts have focused specifically on the abuse and diversion of prescription opioids in community settings. My current work focuses on developing evidence-based intervention approaches to reduce the health harms of opioid abuse among vulnerable populations, and to improve identification, screening, and access to appropriate treatment, including pharmacotherapies and other approaches. Presently I am examining uptake of new syringe exchange programs among people who inject drugs in rural Kentucky and the development of treatment linkage interventions.

I’d like to learn about new collaborations.

Marc Swogger, PhD, University of Rochester

I am a National Institute on Drug Abuse (NIDA)-funded researcher. I study factors related to problematic substance use among justice-involved people. Recently, I have conducted research on kratom, a psychoactive plant that may have a role in harm reduction among people with opioid problems.

I am hoping to gain knowledge, learn about funding opportunities, network, etc.

Jose Szapocznik, PhD, University of Miami

I am PI of one of 13 centers of NIDA’s National Clinical Trials Network where we have and are conducting medication trials for opioid use disorders in substance use disorder treatment programs, primary care and HIV clinics.

I’d like to establish cross-CTSA Program collaborations on opioid treatment.
Andrew Talal, MD, MPH, University at Buffalo

I am a physician-scientist and hepatologist who has been involved with treatment of liver disease, specifically hepatitis C, in patients with substance use disorders for more than a decade. I am presently the PI on a 5-year study funded by the Patient Centered Outcomes Research Institute that is comparing telemedicine to usual care for treatment of hepatitis C virus in 12 methadone programs throughout New York State. I have also been leading a translational research study evaluating the relationship between methadone pharmacokinetics and liver stiffness. We are investigating the hypothesis that advanced liver disease affects liver drug metabolism.

I’d like to identify funding opportunities.

Francisco Tausk, MD, University of Rochester

I am in the process of developing behavioral-pharmacologic interventions aimed at decreasing opioid consumption. We are particularly interested in placebo responses.

At this event, I’d like to identify funding opportunities and network.

Christian Thrasher, MA, The Clinton Foundation

I currently serve as the Senior Director of Substance Use Disorders and Recovery at the Clinton Foundation. I have expertise in health and wellness, mental health and sexual health among other fields of interest. I also have experience in the design and implementation of consensus processes of intractable issues of public policy and experience with all aspects of substance use disorders, including addiction challenges and services.

From this event, I’d like to share and gain knowledge and insights, and learn about potential new collaborations.
Babak Tofighi, MD, MSc, New York University Medical Center

I am an Assistant Professor in the Department of Population Health and Division of General Internal Medicine and Clinical Innovation. I am the current recipient of a NIDA K23 Career Development award focused on developing and testing mHealth and text-messaging interventions to improve outcomes in opioid use disorder treatments, including within office-based buprenorphine practices. I have received NYU H+H CTSI pilot study funding to support this same work and am a co-investigator and clinician across a broad range of recent and current opioid and alcohol clinical trials as well as opioid-focused patient care at Bellevue Hospital and across the NYU Langone Health campus. I am experienced and committed to translational science, NIH-funded research, and innovative solutions to the current US opioid epidemic.

I’d like to explore further translational science methods that may applied in pragmatic real-world clinical trials addressing opioid use.

Tiara Torres, Irving Institute for Clinical and Translational Research at Columbia University Medical Center

The Irving Institute has recently convened a group of Columbia University experts across the spectrum of opioid research to stimulate collaborations and promote research proposals and implementation. The goal is to also engage local and regional communities. We began with a brainstorming session in December 2017 and have evolved into planning a larger symposium for 2018. My expertise in this area has been the planning and implementation. I’m part of an administrative team that is moving this along.

I’m interested in gaining additional knowledge.

Armando Villarreal, MD, University of Rochester

I am a practicing pain physician, who treats patients on chronic pain, and uses opioids as one of the tools on a comprehensive approach for the treatment of this condition.

From this event, I’d like to learn about collaboration and funding opportunities.
Brian Westlake, PT, Canandaigua VA Medical Center

As the Group Practice Manager for the Canandaigua and Bath VA Medical Centers and the Rochester VA Outpatient Clinic I work across all clinical areas to assure Veterans have timely access to care. One of the goals of the VA related to the opioid issue is to offer timely access to care that will help Veterans manage issues with addiction to opioids. I am interested to learn more how the VA can partner with the community to more effectively manage the care being delivered to Veteran for opioid issues.

I want to learn about opportunities for the VA to collaborate with other community agencies to manage issues related to opioids.

David Wetter, PhD, University of Utah

One aspect of our research program is working with primary care to facilitate engagement in treatment using the EHR, other technologies (e.g., HIPAA compliant text messaging), and behavioral approaches. Our work focuses exclusively on low resource health care settings that serve low SES populations (e.g., FQHCs).

From this event, I’d like to gain new knowledge and potential collaborations.

Ann Marie White, EdD, University of Rochester

I apply a systems science and system thinking lens to suicide prevention and risk-related injury such as overdose death. I am currently a member of the CDC-funded Injury Control Research Center for Suicide Prevention at the University of Rochester. I am also actively engaged in fostering collaborative research with individuals and communities experiencing these conditions, and among suicide prevention researchers and public health practitioners.

I’d like to identify funding ideas and develop collaborations.
Arthur Robin Williams, MD, MBE, Columbia University

I am an Assistant Professor of Clinical Psychiatry, Columbia University Division on Substance Use Disorders, and Research Scientist, New York State Psychiatric Institute. I attended Princeton University's Woodrow Wilson School of Public and International Affairs for my undergraduate degree in domestic health policy and completed my medical degree at the University of Pennsylvania. I completed psychiatry training at NYU-Bellevue, and a NIDA funded T32 research fellowship in Addiction Psychiatry at Columbia where I was recently funded for a 5-year NIDA funded K23 - award on a quality of care framework - the OUD Cascade of Care- to respond to the opioid epidemic. My work on addiction and mental illness has been published in the NEJM, the Lancet, JAMA Psychiatry, Annals of Internal Medicine, and by the APA and Oxford University Press.

I’d like to identify innovative opportunities to collaborate and move the field forward.

Lixia Yao, PhD, Mayo Clinic

My research focuses on mining, integrating, and transforming unstructured, incomplete, and noisy data (i.e., electronic health records and claims databases, literature, patents, patient portal and online health forum) into meaningful biomedical knowledge and informatics applications. I am interested in applying text mining and natural language processing methods to analyze patient forum data, in order to identify some scenarios/exemplary stories of how patients become addicted after surgery and what they do with the addiction legally and illegally.

I’d like to gain additional knowledge about opioid epidemics, identify clinical collaborators and identify funding opportunities.
As a neonatologist caring for ill infants, I witness the immediate effects of opioid epidemics on newborns with prenatal drug exposure. My translational research focus is in understanding the molecular mechanisms that underlie withdrawal symptoms in these infants, particularly their feeding aberrance. In utero drug exposure is likely to disturb the CNS homeostasis that controls their feeding regulation. In the long run, my goal is to study the impact of opioids and drug exposure on the neurodevelopmental outcomes of these infants.

From this event, I’d like to gain additional knowledge, build collaborations and identify funding opportunities.