

## 'If we aren't doing it, we can't expect anyone else to'

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No flashy billboards on West End tout their existence, nor, unlike some of Music City's health care leviathans, do the stock charts on local business pages flout the daily swings in their market value.

Nonetheless, Nashville's medical research institutes are quietly conducting cutting-edge studies, using national and internationally known experts, gaining approval for new drug therapies, and often drastically shortening the wait times for new treatments in clinician offices.

According to a 2001 study by the Institute of Medicine, it typically takes 17 years from the completion of research to get a new drug or treatment into everyday practice. But the Centerstone Research Institute, the Sarah Cannon Research Institute and the Saint Thomas Research Institute are working to develop strategies, drugs, and techniques to bring more immediate aid to Middle Tennessee patients.

### Centerstone mergers give rise to research

Centerstone Research Institute may be an unknown quantity to the general public, but with 100 research studies to its credit, the group has carved out a distinguished niche in the mental and behavioral health communities.

The institute developed following the 1997 merger of several local community mental health organizations — including the Dede Wallace Center and Luton Mental Health Center — that created Centerstone. Today, after a few more mergers, Centerstone is the nation's largest provider of community-based behavioral healthcare.

The company's foray into medical research started when CEO David Guth and Tennessee CEO Bob Vero took stock of mental health research and didn't like what they found.

"When they were at smaller agencies, they had hoped someone was out there doing it," said Tom Doub, vice president for research at CRI. "After the merger, they realized, 'If we aren't doing it, we can't expect anyone else to.'"

CRI is geared to advance behavioral healthcare technology for preventing and curing behavioral health disorders, Vero said.

"We are learning more about the genetic role and assisting researchers in identifying diseases that may be playing a role in these very complicated disorders," he said. "We are a distance yet from cures, but the progress that has been made in neuroscience in the last 10 years has been 100-fold more than in the prior 10 years."

The institute conducts the bulk of its research through partnerships with academia, but Doub said CRI's aims are not to compete with academic institutions, but rather to bring successful research results into practice in a timely fashion.

"We want our clients to have access to the most effective science-based technology they can have," said Doub.

Utilizing the most recent technology is a big part of CRI's formula for success. In May of this year, Centerstone acquired two Indiana mental health providers. Doub said one of those centers was particularly skilled in the use of technology — including electronic health records — as it supports clinical practices, so Centerstone has worked to make the most of that alliance.

CRI also has established a partnership with Dr. Madhukar Trivedi, a professor of psychiatry with the University of Texas Southwestern Medical Center. Trivedi, an international expert on using medical technology to help treat depression, has developed software to aid physicians in rating symptoms and functionality of depressed patients. The logarithm, said Doub, gives doctors a recommended course of treatment that dramatically improves outcomes.

"It goes beyond 'treatment as usual' and really improves care," he said.

Working with Trivedi to develop the program, CRI participated in the largest national study of depression, utilizing about 8,000 patients in trials. Sharing the results of studies and others will help practitioners apply the latest medical knowledge to their work.

“We realized three or four years ago there was a fundamental challenge, in that knowledge is outpacing traditional professional development,” he said. “If you have a clinical caseload of 30 patients a week, you just don’t have the time to read through a stack of medical journals.”

### **Saint Thomas capitalizes on cardiac**

As part of a local community-based hospital system, the Saint Thomas Research Institute is largely focused on improving the health of the local patient population.

The Institute was established in 2000 to support members of Saint Thomas Hospital’s medical staff wanting to participate in clinical research. In 2007, the Institute became a partner with the other hospitals of Saint Thomas Health Services: Baptist Hospital, Middle Tennessee Medical Center in Murfreesboro and Hickman Community Hospital in Centerville.

Capitalizing on Saint Thomas’ expertise in heart care, about 60 percent of the Institute’s studies are in the field of cardiology and the Institute has been integral in bringing cardiac technology to market. Specific strategies include cardiac resynchronization therapy, a technique that restores the normal pumping action of damaged ventricles by overcoming delays in electrical conduction. The institute partnered with Minneapolis-based CVRx Inc. on a trial early this year.

Other cardiac treatments the Institute has been part of developing include drug-eluting stents — which are coated with medicine — as well as echo optimization, three-dimensional dyssynchrony echocardiography and remote transmission of heart failure.

Organization leaders are currently working to develop research programs in outpatient internal medicine and women’s health. The latter is especially needed locally. Amanda Cecconi, service line executive for women’s health for Saint Thomas Health Services, said Tennessee women are ranked low in the nation in health.

For example, national compliance for getting mammograms over the age of 40 is 60 to 65 percent; in Tennessee, compliance is 40 percent.

### **Sarah Cannon building on track record**

Not to be confused with the Sarah Cannon Cancer Center, a division of TriStar Health System that treats cancer patients, the Sarah Cannon Research Institute was formed in 2004 through a joint venture between Tennessee Oncology and HCA.

Tennessee Oncology had conducted research on behalf of the Minnie Pearl Research Network since 1993, but with new patients reaching almost 2,000 per year earlier this decade, the business needed to be set up on its own, said Dr. Skip Burris, chief medical officer and director of drug development for SCRI.

“The research program became so successful we needed more infrastructure, more information technology (support), more employees,” said Burris, who joined Tennessee Oncology in 1997.

With HCA providing physical space and capital, the program has blossomed. SCRI now has more than 200 employees and close to 3,000 cancer patients on medical trials annually — a 50 percent increase in only four years — positioning the center in the top 10 cancer centers nationally in patient accruals.

SCRI also boasts one of the largest phase I clinical trial programs in the country, second only to The University of Texas M.D. Anderson Cancer Center, and is enormously successful both in getting funding for trials and in getting new oncology treatments to market.

Although many trials are launched through pharmaceutical companies — Bristol-Myers Squibb and Genentech are two of the industry giants that have teamed up with SCRI — a large percentage are initiated by physicians who seek out funding.

Pharmaceutical companies “trust our reputation of publishing quality data,” said Burris, adding that the organization’s doctors are very active presenting their findings at national meetings. At the recent meeting of the American Society of Clinical Oncology, SCRI researchers submitted 41 papers, 28 of which were accepted for presentation.

SCRI has been involved in the development and testing of about 10 drugs that have been approved since 1999.

Recent approvals include lapatinib, the trade name for which is Tykerb, which treats women diagnosed with what Burris describes as a “very tough” type of genetic-driven breast cancer known as ‘HER2 Positive.’

Burris said the best care for any cancer patient comes through participation in clinical trials, and SCRI tries to offer trials for all levels of patients, from the newly diagnosed to those who have relapsed.

The institute also offers services outside Nashville working with about 1,000 patients through Florida Cancer Specialists near Tampa, the Virginia Cancer Center in Richmond, Chattanooga Oncology/Hematology in Chattanooga, and Oncology Hematology Care of Greater Cincinnati.

Burris said two current trials likely to have major ramifications on a couple of prevalent cancers. SCRI researchers are launching a nationwide trial with 1,800 patients for Ixempra, a drug for Triple Negative breast cancer, a variant particularly prevalent in minority populations and one not particularly sensitive to hormonal therapy.

A second current trial involved the hormonal treatment, Abiraterone, for men with prostate cancer who have relapsed after initial treatment. Originally launched in the United Kingdom, SCRI is the first center in the U.S. to conduct trials with the drug.

Next up for the institute is a move into cardiovascular research, which will join the current practices in cancer and gastroenterology research. In spite of the addition, the core program will remain cancer research.

“It’s real important to have research as a culture within the cancer group,” said Burris. Cancer research “is still in its infancy compared to other specialists.”