Patients walk into the clinical practice with specific goals for their own health. However, collectively, the vast number of interactions between clinicians and patients is a rich vein of health-related data that can be tapped to improve health care and the health system for everyone.

IHPME’s highly regarded Clinical Epidemiology and Health Care Research program is developing the talent to reap those gains. Sharon Dell, who combines clinical epidemiology training with classical population-based observational epidemiology to study childhood lung diseases, serves as director of the program.

“We use innovative cutting-edge methods to design clinical trials and studies that go beyond the traditional experimental design,” says Sharon. “We have dedicated, active clinician scientists from collaborating hospitals and research institutes from around Toronto teaching and supervising students.”

New clinical research findings often rely on high-quality observational studies, making inferences from everyday clinical practice while carefully considering sources of potential bias and confounding. Researchers manipulate large data sets—so success relies heavily on the art, science and intuition of asking the right questions. Joe Kim teaches in the program, and stresses the importance of clinical epidemiology in making continued gains within populations where overall health has steadily improved in recent decades.

He points to the example of aspirin therapy, pioneered in the 1970s, which accounted for a dramatic reduction in rates of heart disease. Today, with this and other gains realized, heart disease is less prevalent. That means measuring the impact of new agents on further reducing heart disease has diminishing returns.

“It’s still, of course, very worthwhile, but running a large, multi-year clinical trial becomes less viable,” says Joe. “It’s the nature of the health care system today to look for ideas you can implement quickly and at reduced cost. IHPME is well-positioned to be a leader in clinical epidemiology training: There’s a diversity of expertise and it’s always been a collaborative group.”

International student Romina Brignardello Petersen was attracted to the balance between course requirements and research work, as well as the ability to focus on her area of expertise—dentistry. “U of T has an excellent international reputation, and the program overview described exactly what I was looking for: training in research methods, never losing the clinical focus. There was nothing like it in Latin America.”

Some students with a deeper interest in clinical epidemiology pursue doctoral studies. Saswata Deb, a resident in cardiac surgery and a Vanier Canada Graduate Scholar from the Canadian Institute of Health Research, is among them. “My goal is to pursue research as a clinical trialist in cardiac surgery. The program has taught me how to turn an important clinical problem into an appropriate research question and obtain the most accurate and precise answer,” says Saswata.

“It’s a skill set that is in greater demand throughout the health system—a gap that IHPME is helping to fill by producing a steady stream of highly skilled graduates. “What makes our program stand out in North America, is that it is designed to develop clinician scientists in the areas of clinical and health services research,” says Sharon. “Our last external review showed that 80 per cent of our graduates go on to full-time academic positions.”

They come from different organizations, occupations and backgrounds. Each year, 25–30 accomplished professionals involved in health care spend five days on campus at IHPME’s Clinical Epidemiology Institute, learning from top U of T experts—and just as importantly, learning from each other.

“It’s a diverse group—policy makers, administrators, physicians, pharmacists, pharmaceutical industry personnel, nurses, researchers, fellows, medical residents, information technology specialists and others—learning about research design, interpreting evidence and how to get research across to end users,” says Dr. Prakesh Shah, Director of the Institute. Dr. Shah is also CIHR Applied Research Chair in Reproductive and Child
Michael Decter Scholarship

IHPME PhD student Natalie Warrick is the 2014 recipient of the Michael Decter Scholarship for Health Leadership and Policy Studies. With the direction of supervisor, Paul Williams, Natalie seeks to distinguish between strategies that build longer term capacity for caregivers and those that offer shorter term fixes. The focal point of her research is in examining the development of caregiver and dementia policy. The scholarship is awarded annually by Saint Elizabeth to a high-performing student entering a graduate health leadership or policy program who is proposing creative solutions to issues facing the health care system.

CONTINUED FROM PAGE 1

Our monthly newsletter profiles members of the IHPME community and lists upcoming events. We’re pleased to receive submissions of 400 words or less for consideration in upcoming editions. If you’d like your event listed, please send full details.

Contact: rhonda.cockerill@utoronto.ca and ihpme@utoronto.ca