

Applied multi-stakeholder COVID-19 health research: The Tucson Experience

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Disaster Research Response (DR2) Tucson Workshop (Feb. 2019)

Train Derailment Scenario

- Release of chemicals from rail cars
 - 1 mile 6000 people evacuated, 9 deaths reported
 - >32,000 within 2 miles
- Highly diverse vulnerable community
- **Issues:** short & longer-term health impacts, medical care, environmental contamination



Photo actual Tucson Derailment, July 2018



DR2 Tucson Training Workshop

Key Goals

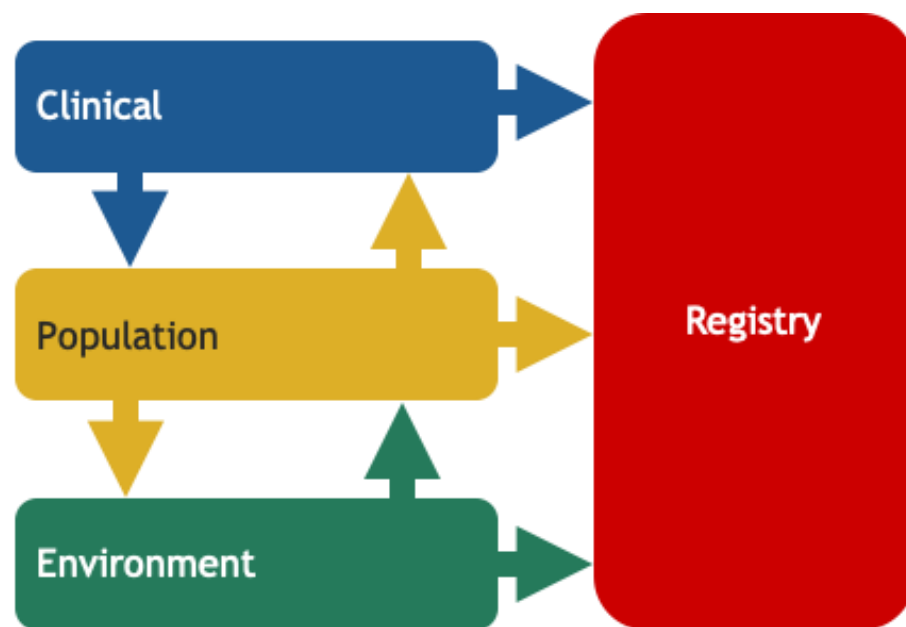
- **Population data and research** of impacted community
- **Clinical data and research** for treatment safety and efficacy
- **Integration** between hospital/health care and community data
- **Inclusion of IRB members**
- **Inclusion of diverse stakeholders** (120 Participants)
 - **Federal Agencies:** NIH, FDA, HHS/ASPR, FEMA, CDC, DOD
 - **Academia:** University AZ Departments; other universities
 - **State, County, City:** Public Health, Emergency Management, Fire, Environment, Hospitals and Clinics, Poison Control,
 - **NGOs:** US Clinical Trials Network, Worker Unions, Union Pacific Rail
 - **Community groups & Tribal Nations**

Lessons Learned: DR2 Tucson

- Locally led **multidisciplinary approach** adopted throughout the planning and implementation process included:
 - Environmental Health
 - Population Health/Epidemiology
 - Poison Control
 - Emergency/Acute Medicine
 - Pharmacy
 - Human Subjects Protection & Privacy Office
 - Translation & Interpretation
 - Students
 - Community Members

Lessons Learned: DR2 Tucson

- **Integration** of population & clinical response
 - Shared priorities
 - Shared participants
 - Shared data
 - Shared responsibility



Lessons Learned: DR2 Tucson

- Situated in **local**, real-world contexts
 - Established local guiding principles critical for future research
- Practical and **scalable infrastructure**
 - Streamlined & shortened time to COVID-19 response research
 - Collaborations & relationships existed with common goals & operating procedures
 - IRB & HIPAA collaboration expedited protocol reviews

Application to SARS-CoV-2: Guiding Principles

1. Coordinate data collection to **minimize participant burden**
 - Common or harmonized baseline questionnaires
2. Set up projects that allow ethical and legal **sharing** of data, participants, and results
 - Participants are asked if they are willing to be contacted for future research
 - Projects are “linked” in a way that reduces competition & benefits everyone
3. **Everyone is welcome**

Application of Lessons Learned: COVID-19 Response

Clinical

- Integrated inpatient & outpatient clinical registry built upon existing influenza surveillance
- Collaboration of family medicine, emergency medicine, and critical care
- Accompanying biorepository to support other researchers
- 302 outpatient & 425 inpatient enrolled

Population

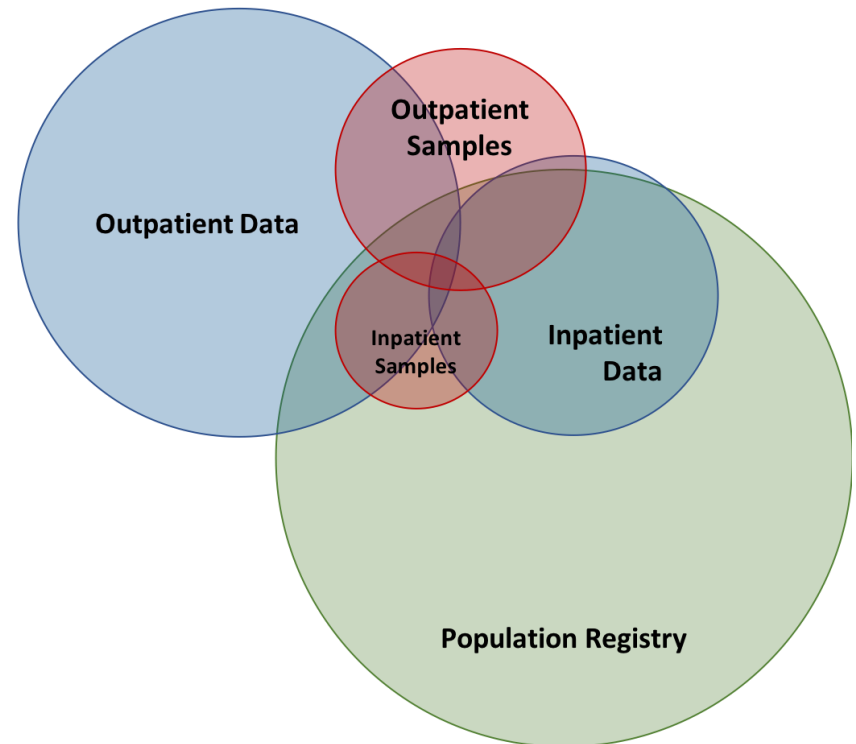
- Population-based cohort to understand short-term and long-term effects of COVID-19
- Collaboration of 6 colleges, 2 universities, and the health departments
- Collaborative recruitment & data collection
- 1,450 Enrolled



Application of Lessons Learned: COVID-19 Response

Integration

- Collaborative recruitment
- Aligned instruments
- Ancillary study to link data streams



Collaborators & Acknowledgements

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Thank you!

