



## HIGH IMPACT

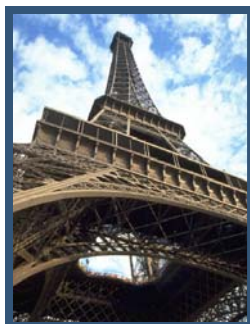
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### Human Resources Help For Investigators

There is now a dedicated HR support person for principal investigators, Sara Castro. You can receive help with the creation of work content descriptions for new or replacement positions, the posting of positions and assistance to ensure compliance with Children's recruitment and selection process. Additional services include recruiting volunteers, agency temps, temporary students, international students or temporary foreign workers.

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### Paris Conference Seeks to Address AIDS Study Issues in Africa

Dr. Rhoda Ashley Morrow, director of the Children's Virology Laboratory, attended a conference in Paris, France last month that sought to examine some of the issues of concern in African AIDS studies. Dr. Morrow was invited to attend the Paris conference, in part, because of her expertise in the study of genital herpes, a serious risk factor for acquiring and transmitting HIV.

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### Limited Funding Available for Biostatistical Analysis Support

The Clinical Research Steering Committee recognized that junior investigators may have difficulty finding funds to pay for needed statistical analysis (in light of new charges).

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### The Mighty Three: Fighting Cancer Together

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### Understanding Immune Responses for Hemophilia: An interview with Dr. Carol Miao

## Research Meeting Calendar

1/26	Basic Science Committee Meeting 4:00 pm -5:00 pm
1/31	Research Oversight Committee Meeting 7:00 am-9:00 am
2/7	ThiNK Series: How to Stay Out of Trouble UW T625 4:30-5:30 pm
2/9	HEAL Job Shadow Day
2/9	Staff Committee Meeting Noon-1:00 pm MPW 589
2/10	Women's Health Lecture UW A-420 2:00-3:00 pm
2/10	Joint Clinical & Outcomes Committees Meeting 3:00 pm- 4:00 pm
2/13	Research Management Team Meeting 8:00 am-10:00 am
2/13	Data Spa G1027 4:00-5:00 pm
2/13	Research Capital Requests DUE 5:00 pm
2/15	BSC Lecture RFA Deadline
2/16	Science in Medicine Lecture UW A-420 12:00-1:00 pm
2/21	Young Investigator Awards DUE 5:00 pm

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## High Impact

### New Research Family Liaisons

The **Treuman Katz Center for Pediatric Bioethics** now includes two research and family Liaisons (RFLs), **Halle Showalter** and **Zuraya Aziz**, to supplement current research structures. This is a new role in the research setting and one that is intended to foster collegial and collaborative, not adversarial, relationships. The purpose of an RFL is to work closely with research teams, assisting them in making research more understandable to patients and families. This will facilitate meaningful communication between researchers, participants and their families. In all likelihood, RFLs will also aid in mediating language and cultural barriers with non-English speaking research participants. The establishment of this role underscores Children's commitment to be the best in both research and family-centered care.



RFLs are intended to help meet the need that so much of the research literature has shown exists. Such literature identifies many issues specific to pediatric research that a liaison could target. These include families participating in research who not fully understanding the research in general, the specifics of a study or the rights of participants. While research literature has shown the need for it, the RFL role is still rather formative at this time. Staff from the Treuman Katz Center for Pediatric Bioethics are developing the education program and defining the core competencies for future RFLs. These competencies will include elements of bioethics, family-centered care, research regulations and cultural competency. Currently, Showalter and Aziz are primarily involved in observation and information gathering from Children's researchers to better inform their roles.

The Children's RFLs will soon be piloting their roles in Hematology/Oncology and Rheumatology Clinics. Eventually, the four phases of RFL participation will likely include:

- Consent form content and communication;
- Research study introduction;
- Availability throughout the study; and
- Provision of post-study follow-up information.

These responsibilities will necessarily vary based on the needs of particular study procedures, study sites, risk thresholds, etc. The RFL role needs to be flexible enough to respond to the varied needs of research protocols as well as those of the participant and their family.

Those serving in RFL roles are charged with demystifying as much as possible the research process for the participant and family. Halle Showalter and Zuraya Aziz both emphasize that their roles focus on "advocating for ethical research processes," something that everyone has a vested interest in. Researchers widely recognize that data and research are improved when participants are well-informed and the process meets high ethical standards. The effort is well underway at Children's to design the RFL roles so that the research process is optimized. This, along with other work at the Treuman Katz Center for Pediatric Bioethics, is funded through joint federal and Children's support.

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## The Mighty Three: Fighting Cancer Together

Collaboration between the Fred Hutchinson Cancer Research Center (FHCR), Children's Hospital and the University of Washington (UW) takes many forms. Two of the most notable are the Seattle Cancer Care Alliance (SCCA) and the Pediatric Oncology Fellowship Program.

Seattle Cancer Care Alliance:

The three participating institutions in the Cancer Consortium have a long and extensive history of collaboration across the disciplines of basic, clinical and public health sciences. These collaborations have included a new cancer clinic and patient care arrangement, the SCCA, as well as many informal collaborations, joint publications, program project grants,

*(Continued on page 5)*

## High Impact

### Human Resources Help For Investigators

As a sign of the growth of Children's ever-expanding research enterprise, **Sara Castro** joined our Research Division as the new staffing specialist in September 2005. This new role serves as the focal Human Resources (HR) point to our faculty and staff, assisting in matters concerning the recruitment and retention of employees within the Research Division. Since joining Children's, Sara has participated in two Rapid Process Improvement (RPI) workshops – one of which dramatically streamlined the hospital's overall hiring process.

Sara's current responsibilities include general HR support to principal investigators with the creation of work content descriptions for new or replacement positions, the posting of these positions and assistance to ensure compliance with Children's recruitment and selection process. Additionally, she can assist with recruiting volunteers, agency temps, temporary students, international students, or temporary foreign workers and also serve as liaison between the principal investigator and Children's main HR department.

Sara spends Mondays, Tuesdays and Fridays at 307 Westlake, and Wednesdays and Thursdays at Met Park West. Her hours are 8:00 a.m.-4:30 p.m. Please contact Sara for all of your HR-related needs/questions at (206) 987-7552 or [sara.castro@seattlechildrens.org](mailto:sara.castro@seattlechildrens.org)

### Limited Funding Available for Biostatistical Analysis Support

In July 2005, a change in institutional policy was implemented and the Office of Biostatistical Services (OBS) began charging researchers \$45/hour for some services. The services affected are hands-on data analysis work, database consulting and the creation of randomization sequences. Study design assistance, grant development work and statistical software training continue to be provided to Children's researchers free of charge.

Shortly after this change in policy, the Clinical Research Steering Committee recognized that junior investigators may have difficulty finding funds to pay for needed statistical analysis. In response, this committee has set aside a pool of funds for clinical investigators seeking statistical data analysis services. Any Children's faculty or staff member conducting a clinical research project may apply for up to \$1,000 of support for biostatistical work. Basic science projects involving only data from laboratory experiments on cell cultures or animals are not eligible. Please note that data collection for the project must be complete at the time the application is submitted. To obtain a copy of the brief one-page application form or further details about the application process, please contact **Kristy Seidel**, director of the OBS (206) 987-3968 or [kristy.seidel@seattlechildrens.org](mailto:kristy.seidel@seattlechildrens.org).

## Funding & Finance

### RFA: Rita Allen Foundation – UW Junior Faculty Awards

The University of Washington School of Medicine is currently accepting applications for the Rita Allen Foundation 2006 Scholar Awards. Awards will support junior faculty who show promise of becoming leaders in research towards the cure and treatment in one of the following fields: cancer, cerebral palsy, multiple sclerosis and euphorics and analgesics for the terminally ill. Applicants may submit one application only by March 3, 2006. Funding consists of \$50,000 per year, for up to three years.

Please visit the RGE Opportunities webpage: <https://adams.dom.washington.edu/rgedeadlines/index.aspx> or e-mail: [rgeopps@u.washington.edu](mailto:rgeopps@u.washington.edu) for more information on applying for this opportunity.

### Young Investigator Awards: RFA UPDATED

Previously released on December 19, 2005, the Young Investigator Award Program has been updated with additional clarification within the guidelines and forms. Deadline for receipt of applications in the office of the Vice President for Research is 5:00 p.m. PST on Tuesday, February 21, 2006. Please make sure to **review** the new application procedures and **utilize** the revised forms found on research web page: <http://research.seattlechildrens.org/rss/intramural-grant-program.asp#young>

## Funding & Finance

### Get Your SMARTS Delivered

The October 2005 issue of *interaction* introduced a new way to access funding opportunities with SPIN (The Sponsored Programs Information Network) and SMARTS (The SPIN Matching And Research Transmittal Service).

SMARTS is an automated daily alerts system that notifies investigators of relevant new programs that match their profiles. SMARTS pushes applicable funding opportunities to users, saving them precious time and effort while ensuring they are kept abreast of the latest programs in their areas of interest. SMARTS sends daily e-mail reports in either Summary or Full Program format.

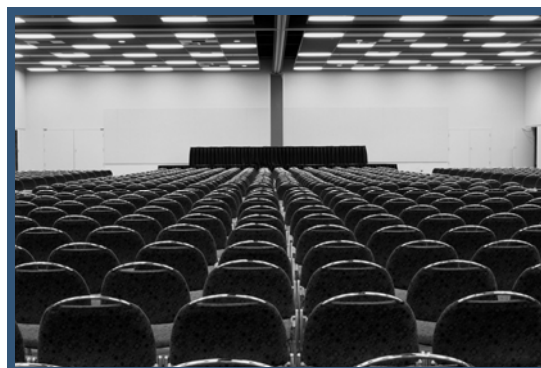
SMARTS is accessed through the OSR's newest web-based grant management software – InfoEd. Each Investigator at Children's has been set up with a unique UserID and password that will allow access to this powerful new tool. OSR encourages you to take advantage of the SMARTS tool. To do so, please contact your Sponsored Projects Officer for UserID, password and tips on how to get your SMARTS delivered.

**Kendall Magnuson**, Sponsored Projects Officer and Project Lead for implementation of InfoEd at Children's Hospital commented, "Very little effort is needed to see the benefits of SMARTS. OSR is eager to see this tool widely used by investigators."

## Education & Training

### Basic Science Lecture Call for Applications

The Basic Science Steering Committee (BSSC) is pleased to announce a call for applications to sponsor four basic science lecturers in 2006. This educational program will provide up to \$2500 in support of a speaker traveling from outside the Seattle area and is intended to cover such costs as honorarium, visitation and travel expenses. In turn, the chosen presenter will provide a lecture and meet with interested local investigators on a topic relevant to the basic science research areas of excellence identified in Phase I of the strategic plan. The research areas of excellence include Host/Pathogen Interaction, Cancer, Immune Response, Developmental Biology and Genetics, and Tissue Response to Injury.



Applications will be accepted from Children's as well as non-Children's based applicants and should include the following information:

1. Applicant name and department affiliation;
2. Speaker name, title and institution affiliation;
3. Location and time of lecture;
4. Speaker itinerary;
5. Provisional budget estimate;
6. Paragraph about how the lecture relates to the above research areas and its potential benefit to local investigators and programs.

Please limit applications to one page and submit to **Craig Rubens** via **Karen Barker**, who will be coordinating these efforts. Deadline for receipt is February 15, 2006. The BSSC will review applications by March 1, 2006 and notify all applicants of a decision at that time. Note: The date of the actual seminar can occur anytime in 2006.

## High Impact

### The Mighty Three: Fighting Cancer Together

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centers and joint training grants. The Consortium further enhances the collaborative cancer research efforts of these institutions by strengthening the level of inter-institutional strategic planning and development.

In 1998, the FHCRC, UW, and Children's Hospital agreed to combine their expertise and resources to form the SCCA. The intent was to provide an optimal environment for providing cancer care and for making the latest advances in disease management available to the public.

Another objective was to speed the flow of scientific information from the researchers to the clinicians and the patients as well as accelerate the development of new knowledge and treatment for various cancers.

The three-year implementation process for the SCCA culminated with the opening of a state-of-the-art outpatient clinic in January 2001. The SCCA clinic, with approximately 30,000 annual visits, serves as the focal point for a cancer care delivery system that now includes 86 dedicated beds at the UW Medical Center and 38 beds at Children's Hospital. In addition to serving adult and pediatric patients on clinical protocols through the FHCRC transplant program, the clinic houses multi-disciplinary clinical services for breast, gynecologic, melanoma, prostate and sarcoma cancers. It also serves as the primary clinical practice site for the UW School of Medicine Divisions of Medical Oncology and Hematology.

#### Pediatric Oncology Fellowship Program:

The UW Department of Pediatrics and the FHCRC offer a three-year accredited Pediatric Hematology and Oncology Fellowship Training Program through the Accreditation Council for Graduate Medical Education (ACGME). The overall aim of the Pediatric Oncology Program is to improve the outcome for children with malignancy. The Pediatric Hematology/Oncology Training is designed to encourage and train both clinical and laboratory investigators. This comprehensive training is coordinated by and utilizes the faculty and resources of all three institutions. The fellowship is funded by a training grant from the National Cancer Institute of the National Institutes of Health and from institutional sources.

The Pediatric Hematology/Oncology Training Program provides an interdisciplinary program in clinical cancer research and basic research in cancer biology and therapy as related to transplantation biology, immunology, genetic engineering and gene therapy, solid tumor biology, experimental chemotherapy and mechanisms of drug resistance, and the nature and control of normal and malignant hematopoiesis.

The first year focuses on clinical training; the second and third years are primarily research-based. Fellows are encouraged to begin the process of seeking outside funding in their third year. Fellows who wish to continue their research after completing the Training Program are required to seek outside support and may also receive support from preceptors' individual research grant funds.

It is not uncommon for those completing the program to remain here in order to further pursue their Oncology career. **Dr. Doug Hawkins**, Children's Hospital's principal investigator for the Children's Oncology Group (COG), began his residency in 1990. He remained through his fellowship in 1993 and joined the faculty in 1996. "One of the main reasons I came for residency (this was the only program I applied to on the West Coast) was because of the strength of the Heme/Onc program, specifically the association with FHCRC. This is one of the top, if not the top, pediatric Heme/Onc programs in the country. FHCRC is the premier bone marrow transplantation program in the country and Children's Hospital is a leader in clinical trials, especially within COG. The opportunity to learn from each institution and collaborate across programs (such as the cyclophosphamide pharmacokinetics and pharmacogenomics study with **Jeannine McCune**) is fabulous."



## High Impact

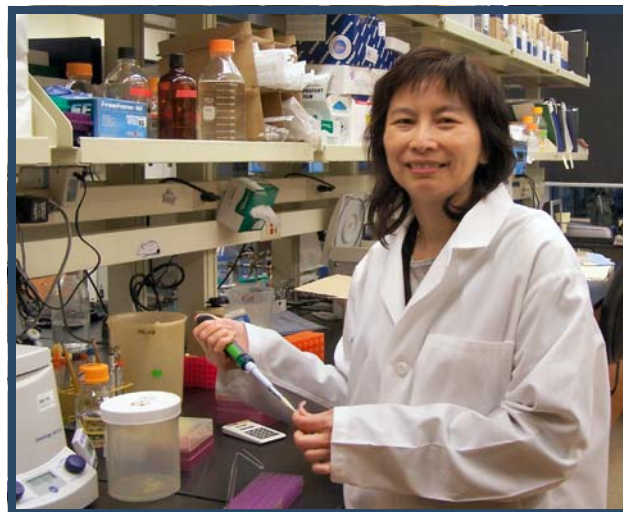
### Understanding Immune Responses for Hemophilia

When **Dr. Carol Miao** discusses her nearly eight-year history involving the study of hemophilia, her eyes light up and her manner becomes very direct. She speaks intently of her early years in the field and of one of her mentors, **Earl Davie** – “a pioneer in the field of coagulation.” Last September, Dr. Miao was granted an award which will fund her study of the modulation of immune responses for hemophilia following replacement therapy – an ongoing struggle in the treatment of the oldest known hereditary bleeding disorder.

There are two types of hemophilia, A and B. Low levels or complete absence of a blood protein essential for clotting causes the disease. Patients with hemophilia A lack the blood clotting protein, factor VIII, and those with hemophilia B lack factor IX. There are about 20,000 hemophilia patients in the United States. Each year, about 400 babies are born with this disorder. Approximately 85% have hemophilia A and the remainder have hemophilia B. It is estimated that most patients on prophylaxis, which is begun in the first few years of life, will easily exceed the common life-time insurance cap of \$1,000,000 by the second decade of life. The treatment decisions are not easy.

One course of therapy used in the treatment of hemophilia is protein replacement, which is generally blood-derived. In the past 10 to 15 years, advances in screening of blood donors, laboratory testing of donated blood and techniques to inactivate viruses in blood and blood products have remarkably increased the safety of blood products used to treat hemophilia. Although treatment-related infection with the AIDS virus or most of the hepatitis viruses is a thing of the past, these measures do not completely avoid viruses such as hepatitis A and parvo virus. These infections are rare; nevertheless, they can pose a threat. Researchers are working to improve procedures to destroy these viruses.

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Dr. Carol Miao in the lab at 307 Westlake

## Special Interest

### Opportunity for Children's Researchers to Interact with Local High School Students



Children's researchers have an upcoming opportunity to interact with some local high school students by allowing students to shadow them on the job for two to six hours. The students are from Cleveland High School, which has received funding from the Gates Foundation and has developed several small academies within the school. The academy involved in this project is the HEAL Academy, which focuses on health and the environment. Children's researchers can provide the job shadow experiences for these students on February 9 or April 20. In hosting a job shadow, investigators may choose to have as few as one or as many as 10 students spend two to six hours with them between the hours of 8:00 a.m. and 2:00 p.m. The time should include learning about the investigator's work and observation/participation in an activity. If you are interested in being a job shadow host, please contact **Sarah Rafton** at 987-3881 or [sarah.rafton@seattlechildrens.org](mailto:sarah.rafton@seattlechildrens.org).

## Understanding Immune Responses for Hemophilia *(Continued from page 6)*

There are about 20,000 hemophilia patients in the United States. Each year, about 400 babies are born with this disorder.

To ensure absolute safety from transfusion-transmitted viruses and other agents, hemophiliacs may now be treated with factor VIII which has been produced through biotechnology. This product, recombinant factor VIII, considered a “non-viral” treatment, is manufactured by a process entirely free of blood products. Thus, it contains only the factor VIII necessary to treat the disease and none of the other components of blood or attendant unwanted agents. Although the cost of this product exceeds that of the blood-derived product, it is clearly the treatment of choice for those, such as newborns, who have not yet been exposed to blood products. A factor IX product has also been produced by such a process and is currently in clinical trials.

Another course of therapy available in the treatment of hemophilia is gene therapy, wherein “viral vectors” or “non-viral vectors” serve as the delivery vehicles. Due to safety concerns, Dr. Miao’s lab has focused on developing non-viral gene therapy protocols for the treatment of hemophilia. Currently, patients with severe hemophilia receive frequent, intravenous infusions of manufactured engineered clotting factor. However, these treatments are expensive and inconvenient, and sometimes stimulate an immune reaction that neutralizes the benefits of treatment. Because a single defective gene causes hemophilia B, gene therapy involves inserting a normal version of the gene, which makes a normal protein—the clotting factor. It is hoped that gene therapy will lead to patients having fewer bleeding episodes. Gene therapy might eventually help people with hemophilia begin producing sufficient clotting factor, thereby removing or at least lessening their dependence on weekly infusions. With this advance, there exists the potential for someone born with severe hemophilia to eventually have significantly milder symptoms or no symptoms at all.

Some gene therapy research trials have been performed in humans with mixed results. The future for gene therapy in hemophilia is continuing albeit at a moderate pace. There are many projects continuing in animal models. Improved long-term expression of the new genes will require the development of better vectors (the means of delivering the new genes into the cells). Dr. Miao and colleagues are the first to use non-viral naked DNA delivery to achieve therapeutic levels of factor VIII and factor IX gene expression in a hemophilia A and a hemophilia B mouse model, respectively. Currently they are investigating safer and more efficient non-viral vectors and delivery methods suitable for clinical applications.

While current treatment has greatly improved the outlook for most hemophiliacs, the development of antibodies (inhibitors) that block the activity of the clotting factors has complicated treatment for some patients. It is estimated that 25-30% percent of hemophilia A patients and 1-2.5 percent of hemophilia B patients develop such antibodies after exposure to transfused factors. When inhibitors are present in large amounts, the patient may require very high and expensive quantities of alternative bypassing agents to stem bleeding, which, in some instances, may not even be effective.

The goal of Dr. Miao’s study supported by the new grant is to develop strategies to reduce or eliminate these inhibitory antibodies in hemophilia A patients following the repeated factor VIII infusion or gene therapy using mice as models. “Because it is a single-gene deficiency and the disease is well characterized, hemophilia has long been used as a gene therapy model system,” says Dr. Miao. She adds, “This animal model is also an ideal system for developing strategies to ameliorate the immune responses against FVIII.”

Approximately 25-30% of hemophilic patients develop anti-FVIII antibodies after repeated infusion of recombinant or pooled FVIII protein. Following successful transfer of the FVIII gene into the livers of hemophilia A mice, Dr. Miao’s team “observed a robust immune response against FVIII within two weeks post-treatment.”

The aims of this study are, at once, extensive and exciting. Of course, Dr. Miao’s hope for the long term is that the contributions of her research in this field will have a positive impact on the ability to effectively treat patients with immunological challenges who face this disorder.

At the present time, there are sufficient indications that gene therapy will ultimately be this cure. The technology for gene therapy is not as simple as was first thought. Yet because of its special characteristics, hemophilia may likely be among the first genetic diseases to be successfully treated.

## High Impact

### Paris Conference Seeks to Address AIDS Study Issues in Africa

**Dr. Rhoda Ashley Morrow**, director of the Children's Virology Laboratory, attended a conference in Paris, France last month that sought to examine some of the issues of concern in African AIDS studies. Dr. Morrow was invited to attend the Paris conference, in part, because of her expertise in the study of genital herpes, a serious risk factor for acquiring and transmitting HIV. Her work has involved developing novel tests to diagnose HSV-2 (the virus that causes genital herpes). These tests have helped show a connection between HSV-2 and HIV. The viruses, which are on the rise for those in their late teens, appear to both affect the transmission of each other and to make each other worse.

There are 2.3 million children worldwide under the age of 15 years infected with HIV and there are 700,000 new infections per year in children – most of which are due to transmission from mothers. Of these new infections, 80% occur in sub-Saharan Africa. The statistics are bleak in that almost all of these children will die before the age of five years. In contrast, most children in the United States with HIV can, with treatment, live into adulthood. Dr. Morrow says that she has “many colleagues who are passionate and working very hard” to address these statistics through prevention and treatment in Africa.

The concept behind the Paris meeting was to hold a small workshop for a select group of researchers with direct knowledge of, and control over, the design of ma-



**Dr. Rhoda Ashley Morrow**

There are 2.3 million children worldwide under the age of 15 years infected with HIV and there are 700,000 new infections per year in children.

major African studies in order to develop a consensus about methods to be applied in those studies. Approximately 22 researchers from 10 nations gathered for discussions of various test protocols in over 13 African countries. It is hoped that the discussion of methods and protocols will make the study results more immediately useful to the field. The exchange of knowledge among the researchers at the conference will be published as a monograph in 2006 to help other scientists.

The conference was organized by the National Agency for Research on Sexually Transmitted Diseases/Infections (ANRS) in France and the London School of Hygiene & Tropical Medicine in the UK. The meeting

included discussion of both ongoing and future studies in the area of HIV and HSV-2 in Africa. Dr. Morrow notes that “the conference was very productive in identifying sampling issues, mathematic modeling studies, and populations that deserve closer attention.” She expects that many of the ideas generated in Paris will be incorporated into studies immediately, without necessitating major protocol changes. Another invaluable result of this meeting was to put key researchers from Africa, Europe and the United States in contact for the design of future studies.

Seattle was also represented by two other researchers at this conference, reflecting the acceptance of this area as a hub of some of the largest African studies, as well as of information about HIV and herpes. This is due, in part, to the Center for AIDS Research and researchers such as Children's Hospital's **Dr. Lisa Frenkel**, whose work involves the prevention of HIV transmission from mother to child.

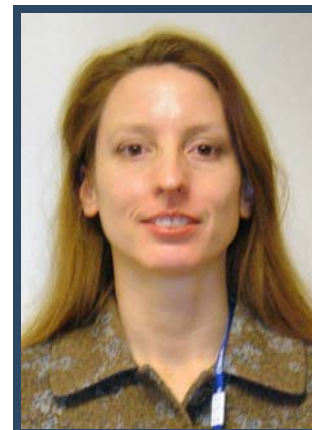
Dr. Rhoda Ashley Morrow is professor of Laboratory Medicine at the University of Washington. Her research focus has been on the natural history of genital herpes and the development of tests to diagnose this and other viral infections. Dr. Morrow's laboratory developed the test for herpes antibodies called the HSV Western Blot Test. It is considered to be the gold standard for HSV antibody tests but it is currently not practical in Africa. Dr. Morrow continues her work to develop such testing for use in Africa.

## Process & Procedure

### Office of Biostatistical Services

#### Valuable Resource for Researchers

Children's Hospital's Office of Biostatistical Services (OBS) was created just over a year ago and is headed by Director **Kristy Seidel**, who would like to see more researchers take advantage of the valuable services offered by the office. The intention of this office is to assist researchers obtain and use data most effectively in order to answer their research questions. The OBS offers an array of services to Children's researchers, including assistance with designing studies, study implementation work and data analysis.



Kristy Seidel, MS

Design assistance involves examining the aims, study populations, types of measurements to be obtained and data collection schedule to develop a comprehensive statistical plan. Power analysis to determine appropriate sample size is the most common study design function that the OBS is asked to perform. Study implementation work often involves creation of randomization sequences in prospective studies or working with databases to match cases and controls in retrospective studies. While the OBS does not do database management per se, it does offer consultation about how best to organize research data files to minimize errors and facilitate statistical analysis. Data analysis services can range from advising about the choice of statistical methodology to actual hands-on performance of the analysis work by an OBS staff member. Publication-quality graphics and technical writing are also available. OBS staff may be tapped for these and other tasks as needed by Children's researchers.

Kristy says that she wants to make it known to Children's researchers that services relating to preparation of grants are supported by the hospital and do not incur a charge to the investigator. OBS staff can be named as key personnel in a grant, with an associated proposal for a percentage FTE (full-time equivalent) to cover biostatistical work needed in the post-award phase of the project. In this way, "researchers can effectively outsource analysis to the OBS," notes Seidel. Projects that do not explicitly include a biostatistics percentage FTE in their budget can still request that OBS staff perform data analysis work. In this situation, the work would be billed to the investigator on an hourly basis. For additional details on which types of services are free and which incur charges, please see the OBS policy statement on the research web site at: [http://research.seattlechildrens.org/policies\\_forms/policies-obs.asp](http://research.seattlechildrens.org/policies_forms/policies-obs.asp).

Taking advantage of the free OBS services for grant submission work will help maximize the success of those high priority projects by getting biostatistical assistance up front during the all important design stage. Furthermore, all OBS educational services are provided free of charge. These include training in statistical data software (*Stata*) and statistical concepts in general.

The OBS is poised to assist a growing number of researchers in obtaining new grants and getting their results into publishable form. Interested researchers are encouraged to contact Kristy Seidel for more information.

## Jivin' with Jim

Bring operational issues to this monthly brown bag luncheon, or just come to chat with Jim Hendricks, VP, Research. Jivin' with Jim sessions are every Tuesday 11:30 a.m.-12:30 p.m. at Westlake or alternating between the 5th and 8th floors at MPW.

First Tuesday—Westlake Staff  
Third Tuesday—MPW Staff

Second Tuesday—Westlake Faculty  
Fourth Tuesday—MPW Faculty

## Education & Training

### Women's Health Lecture at the University of Washington

The University of Washington School of Medicine is presenting the following lecture.

Title: *Women's Health: Emergency Contraception and the FDA*  
Presenter: **Susan F. Wood, Ph.D.**  
When: Friday, February 10, 2006, 2:00 to 3:00 p.m.  
Where: Hogness Auditorium, A-420, Health Sciences Building, UW

Dr. Wood is the former Assistant Commissioner for Women's Health at the Food and Drug Administration (FDA) where she directed the FDA Office of Women's Health and served as the "champion for women's health inside and outside the agency", focusing on areas such as inclusion of women in clinical studies; regulatory research on topics such as cardiovascular disease and medications used during pregnancy; and in developing outreach campaigns for women regarding menopausal hormone therapy, safe medication use and diabetes.



Dr. Susan Wood

She will be speaking about the importance of science and medical evidence in health policy decision-making by federal health agencies. The event is co-sponsored by the School of Public Health and Community Medicine (SPHCM) and the Fred Hutchinson Cancer Research Center (FHCR).

This lecture will be simultaneously video televised at:

- Harborview Medical Center, Research & Training Building, Room 117/121;
- Children's Hospital, Modular 3, Room M305; and
- Fred Hutchinson Cancer Research Center, Yale Building, Room J2-108.

### 2005-06 Science in Medicine Lecture

The University of Washington is presenting the following 2005-06 Science in Medicine Lecture.

Title: *Automated gene expression analysis at single cell resolution in the nematode C. elegans.*  
Presenter: **Robert H. Waterston, M.D., Ph.D.**  
William H. Gates III Endowed Chair in Biomedical Sciences  
Chair and Professor, Department of Genome Sciences  
University of Washington School of Medicine  
When: Thursday, February 16, 2006, 12:00 noon to 1:00 p.m.  
Where: Hogness Auditorium, A-420, Health Science Building, UW



Dr. Robert Waterston

Dr. Waterston's research at Washington University focused on genome analysis, including mapping and sequencing of the *C. elegans* and human genomes. Since coming to Seattle, his laboratory has been developing new methods for analyzing gene activity at high temporal and spatial resolution in the development of *C. elegans*. A system is in place that allows automated tracking of cell movements and divisions as well as gene expression at single cell resolution at minute intervals.

This lecture will be simultaneously video televised at:

- Harborview Medical Center, Research & Training Building, Auditorium;
- VAPSHCS, Building 1, Room 518; and
- VA - American Lake Division - Bldg. 81, Room 1132.

Both lectures above are open to all faculty, staff and students. No registration is required. For more information, contact Vee White at [veewhite@u.washington.edu](mailto:veewhite@u.washington.edu). To request disability accommodations, contact the Disability Services Office at (206) 543-6452 or [dso@u.washington.edu](mailto:dso@u.washington.edu).

## Education & Training



### Statistics for Laboratory Research: "Stats for Lab Rats"

**Children's Course — May 2006**

**Instructor:** **Nicole Mayer Hamblett, Ph.D.**  
Research Assistant Professor, Pediatrics

**Co-Instructor:** **Jim Lymp, Ph.D.**

**Registration:** Send your name, e-mail address, department, phone number and mail-stop to Nicole by e-mail or phone.  
E-mail: [nicole.hamblett@seattlechildrens.org](mailto:nicole.hamblett@seattlechildrens.org),  
Voice mail: 987-6547

**Audience:** Fellows, Residents, Basic Scientists, Faculty and Staff who are interested in learning statistics with application to laboratory research.

**Location/time:** The class will be held at 307 Westlake in the Mezzanine Conference Room. There will be three two-hour sessions to be held from 8:30 a.m. to 10:30 a.m. on Thursday, May 4, 11 and 18.

**Format:** The class will be lecture-based with no homework. Statistical concepts and methods will be motivated by examples pertinent to laboratory research.

**Overview:** This course is an introduction to the use of statistics for the design, analysis and presentation of laboratory-based research. Traditional statistics courses focus primarily on applications directed towards clinical research. This introductory course will use examples from the laboratory setting to motivate the presentation of statistical concepts and methods. These examples will include data from both animal experiments and *in vitro* studies. Statistical issues relating to the design of laboratory experiments will be covered, including the determination of sample size when resources are precious and limited. Approaches for descriptively summarizing different types of laboratory data and creating effective visual displays will be discussed. Finally, an overview of common analysis methods that can be used to test hypotheses and make inference within the setting of a laboratory experiment will be discussed, including the use of non-parametric statistics and time-to-event (survival) analysis. The objectives of this course are to: (1) provide laboratory researchers with the basic statistical concepts needed to design, analyze and present their own experiments effectively and (2) improve their ability to communicate with statisticians when designing more complex experiments. A more detailed course outline will be provided in the spring.

## Data Spa and Sample Size Clinic

**Kristy Seidel**, director of the Office of Biostatistical Services, is offering a series of biostatistics seminars beginning in January. The seminars are free and do not require any pre-registration. They will be sponsored by the Pediatric Clinical Research Center (PCRC) and anyone can attend. The sessions will be in G1027 from 4:00 to 5:00 p.m. on the second Monday of each month from January through March. Two seminars remaining:

**Monday, 2/13/06**

*Data Spa: Ten treatments for maximizing data quality and integrity.*

**Monday, 3/13/06**

*Sample Size Clinic: Balancing power, precision and practicality.*

## Research Bits

### New Shuttles at Metropolitan Park West

Riders of the Children's Metropolitan Park West (MPW) Shuttle will notice a few changes over the next month. The current shuttle vans will be removed from service and replaced with brand new shuttles. For the most part, the shuttles will look the same, only newer. The seats will remain forward facing, with a capacity for 14 riders. The new shuttles will continue to have a small luggage rack, cell phone, document transport carrier, seatbelts and a bike rack.



Shuttle feedback should be directed to Jena Snook, [jena.snook@seattlechildrens.org](mailto:jena.snook@seattlechildrens.org), or Jim Sawyer, [jim.sawyer@seattlechildrens.org](mailto:jim.sawyer@seattlechildrens.org).

## Coming Soon: RFP Research Steering Committee Awards

The Research Steering Committee sponsors an annual competition for small awards aimed at funding meritorious projects that may lead to extramural funding.

All full-time faculty members having the rank of Instructor or higher and holding a primary academic appointment in a university department affiliated with Children's Hospital are eligible. Awards are generally limited to \$25,000.

A Request for Proposals (RFP) will be issued in April, and awards are made in June. The RFP will outline allowable expenses and detailed funding priorities.

## Special Events

### All Research Support Staff Meeting

Last week, all of the research support services leadership and staff met to recognize the effort put forth in 2005, the teams in each of the departments responsible for the results and to focus on the new goals for 2006. The goals for this year include:

- Increase National Institutes of Health (NIH) grant awards;
- Contain infrastructure costs;
- Complete six Continuous Performance Improvement (CPI) workshops and publish three related manuscripts.



Jim Hendricks, VP for research speaking to team

More to come to future editions of *interaction* on the efforts and progress towards these goals!

## Research Bits

### Children's Joins the NACH Grants Project Advisory Group

The National Association of Children's Hospitals (NACH) recently formed a Grants Opportunities Project Advisory Group and asked **Erik Lausund**, chief of Research Operations, to serve as the representative of Children's Hospital. Children's has been a subscriber of the NACH Grants Project for over five years. The Project assists children's hospitals across the country with grant seeking through professional interaction and information about funding opportunities. The purpose of the Advisory Group is to represent Project participants and provide information to NACH's Project leadership in order to improve the value of the services delivered. The Advisory Group consists of a pool of critical thinkers from children's hospitals involved in grant seeking that are now charged with providing input and feedback about improving the products and services provided by the Grants Project.

Children's Hospital has also recently contacted NACH about sponsoring a survey/benchmarking project about infrastructure and support of research enterprises in hospital settings. This would examine how and to what extent institutions provide support to principal investigators and their staff. NACH has been receptive to this as well as the idea that Children's would do the first design of said survey while NACH would officially sponsor it. Erik Lausund notes that, "While there have been similar surveys done with universities, there have not been any specific to healthcare environments. We recognize that principal investigators in hospital settings need different support." Children's Hospital hopes to partner with NACH in this way to identify the unique needs of principal investigators in healthcare settings as well as how to most effectively meet those needs.

### Pediatric Epilepsy Research Center Sponsors Free Workshop

Parents of children with epilepsy are invited to attend a free Pediatric Epilepsy Public Forum from 4:30 to 8:00 p.m. on Wednesday, February 7, at The Burke Museum of Natural History and Culture at the University of Washington (UW), Seattle. The forum is sponsored by the UW Pediatric Epilepsy Research Center (PERC).

This event will provide an opportunity for parents and others concerned about children with epilepsy to meet and talk with the area's leading pediatric epilepsy physicians and researchers. In addition to the workshops offered, attendees are invited to enjoy a buffet dinner. Topics will include discussion of the ketogenic diet, current treatments and psychosocial issues in childhood epilepsy. The featured speaker, discussing the ketogenic diet, will be **Dr. John Freeman**, director of the Pediatric Epilepsy Center and professor of Pediatrics and Neurology at Johns Hopkins University in Baltimore, MD.

The University of Washington PERC was established through joint efforts of the University of Washington School of Medicine and parents of children with epilepsy. It draws on multidisciplinary expertise in neurosciences at the UW and Children's Hospital. Its goal is to advance the understanding and treatment of pediatric epilepsies through basic laboratory and clinical research.

Pre-registration is appreciated, but not required. For more information, call 206-221-5364 or e-mail [perc@u.washington.edu](mailto:perc@u.washington.edu).

## Editorial Board



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Comments or ideas?  
Please e-mail or call us.  
We value your feedback.

<http://research.seattlechildrens.org/>

## OUR MISSION

We believe all children have unique needs and should grow up without illness or injury. With the support of the community and through our spirit of inquiry, we will prevent, treat and eliminate pediatric disease.

**Children's**  
Hospital & Regional Medical Center  
Seattle, Washington