

Duke Cardiology Fellows Training Program

Origin to the Present

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CHAPTER XIV

CARDIOLOGY FELLOWS SOCIETY AND DUCCS

During the initial years of the training program, the majority of academic physicians attended the annual research meeting held at Atlantic City under the auspices of the "Young and Old Turks". However, this meeting was only sporadically attended by practicing physicians. The annual meeting of the American Heart Association and later the American College of Cardiology, began to supplant the Atlantic City gatherings. By the early 1970s, these meetings were frequently attended by both practicing and academic cardiologists. Although theoretically the purpose of these meetings was for scientific interchange, the opportunity to visit with former colleagues was a major reason for attendance. As a consequence, informal gatherings of current and former fellows and faculty took place in one or two of the attendee's rooms. The general format was to pick an evening, go to the local convenience store and buy potato chips, pretzels and beer. As the numbers increased, this approach became impractical; a larger meeting area was needed.

As is frequently the case, Dr. Galen Wagner took it upon himself to solve the problem. For the meetings held in Miami, the Division was able to use a yacht belonging to a brother of Dr. Donald Hackel, a cardiac pathologist at Duke. One year a crisis occurred. The expected boat was at sea. Galen and Dr. Stan Anderson, an Australian cardiologist who was a frequent visitor to Duke, located a storage room in the Holiday Inn. Although the room was musty and filled with junk, they opened the doors and windows, put the junk on the balcony and a party site was unveiled. No fixtures, no furniture, nothing except a room in which the rug had a large hole in the middle. After covering the hole with a potted plant, found in the hall, and commandeering some furniture from several of their own rooms, the site became acceptable for the festivities. Tepid beer, wine and a variety of junk foods were bought. The resulting party was judged as one of the best ever!

This semi-annual harum-scarum approach was finally solved by reserving a meeting room in which the hotel provided the refreshments. The logistical problems were solved; well-attended parties resulted. One serious problem remained: how to pay for the festivities?

In discussing solutions to this dilemma, a plan surfaced: develop a society of the former fellows in which annual dues would be used to support the cost of the two parties. The fellows were contacted and, in general, they supported this notion. Thus, in 1982 the Cardiology Fellows Society became a reality. In order to be certain that both

the time and location of the party was known, a newsletter was sent to each of the members of the Fellows Society. The content of the newsletter, in addition to containing information regarding the parties, provided data about the fellows, both the incoming and those finishing the program. One issue contained a key editorial by Dr. Barry Ramo, asking the question as to whether the Fellows Society should have additional functions beside party attendance. This editorial initiated a series of discussions. Finally, a group of former fellows was commissioned to debate the issue and to formulate suggestions. The general consensus of this group: the Fellows Society should take on two academic missions: 1) provide postgraduate education for the fellows and 2) develop an opportunity for collaborative research.

In order to provide a format for continuing education, the Orgain Symposium began in 1982. This program evolved into a yearly gathering held on campus and chaired by Dr. Orgain as long as he was physically able. The format included an invited lecturer presented by one of the former fellows. A wide variety of topics were covered. The initial presentation made by Dr. Doug Zipes, outlined a history of the training program up to that juncture. Other presentations were given usually by current members of the Duke faculty. Updates of current concepts of specific topics were given under the general rubric of "What's New In Electrophysiology", etc. This symposium was extremely well attended and continued for approximately ten years.

Several concurrent situations interacted so that the second objective, fostering collaborative research, became a reality. For several years, Dr. Stead had expressed the opinion that money could be made by carrying out trials for the pharmaceutical industry. Dr. Malcolm Tyor, Chief of the Division of Gastroenterology, bought this concept and developed a small consortium of his former fellows. They had worked with Clinical Research International, in the Research Triangle, to participate in a trial of Lovastatin. Additional trial sites were needed. Under the direction of Dr. David Pryor, who at that time had an administrative role in the Databank and Galen, 24 former fellows, currently in practice, were recruited as test participants. The Excel trial was successfully completed and the general format for future trials established.

A group of the fellows met who were interested in fostering clinical research through the medium of trials. The Duke University Cooperative Cardiovascular Society (DUCCS) became a reality. The organization elected a President and board of Directors. Membership required either a significant initial financial contribution or functioning as principal investigator in one of the clinical trials. In addition, several of the Duke faculty participated in various administrative roles. The DUCCS organization was responsible for allocating expenditure of surplus funds from the trials. The Division of Cardiology's primary role was to deal with the pharmaceutical industry, to initiate the trials and to act as coordinator. Dr. Chris O'Connor was designated as the primary coordinator of the trials. In addition, Galen interacted with a number of the fellows who carried out clinical research other than trials.

The DUCCS organization continued to expand so that ultimately one hundred and forty-six of the former trainees became members. Membership in DUCCS also expanded to include former Duke faculty, a number of regional physicians who referred patients to Cardiology at Duke and colleagues of DUCCS members.

A number of clinical trials were carried out to test the efficacy of cardiovascular drugs. The Table lists the acronyms for these trials and the number of fellows participating as site principal investigators in each trial. This list includes only those trials in which DUCCS played a major role, providing either all of the study sites or a network within a larger group of sites. In addition, a number of the fellows were involved as test sites in many non-DUCCS trials.

A second component of the DUCCS activities included a variety of clinical research projects organized and directed by Galen. Perhaps the most notable was carried out by Dr. Staff Warren, who measured the effects on the electrocardiogram due to prolonged occlusion of a coronary artery by balloon inflation. A number of publications and two PhD candidates finished their research work from the data obtained in "Staff's Studies".

Examples of some of the other FOG (Friends of Galen) projects include: 1) development of a cardiovascular databank at the investigator's institution, 2) development and implementation of a computerized program to collect clinical data on outpatients, 3) development of a database on patients with hypertrophic subaortic stenosis undergoing alcohol ablation and 4) the effect of rapid transmission of the electrocardiogram on the treatment of patients with acute myocardial infarction. All of these projects resulted in peer reviewed publications.

An additional project to define the genetics of cardiovascular disease was recently instituted by Dr. Bill Kraus under the rubric of Gene Card. Eleven of the DUCCS investigators to date have provided patient material to be incorporated into this database.

In the early 90s, funds from DUCCS were made available to support several cardiology fellows. During the later part of the decade, participation in the DUCCS trials waned somewhat. However, in 2000, DUCCS was reorganized as a member led organization. The "new DUCCS" contracted with Chris O'Connor and Wendy Gattis to coordinate and implement a series of new clinical trials. Drs. Steven Roark and Alan Chu assumed important leadership roles on the Board of Directors.

The success of DUCCS is unique to the Cardiology Division at Duke. A number of other academic training programs have tried to develop similar approaches but to date, the results have been only marginally successful.

Concomitant with the growth of DUCCS, the Fellows Society as a separate entity essentially had disappeared by 1995. Activities such as the annual Orgain Symposium were discontinued and the gatherings at national meetings were held under the auspices of the Cardiology Division and the DCRI. Recently (March 2003), Dr. Pascal Goldschmidt initiated a plan to reconstitute the Society, and appointed Galen to carry out this task. Although a variety of educational activities will be the primary focus, a major goal will include a mechanism for enhancing the interaction between the former fellows and the Cardiology Division. DUCCS will continue as a separate organization with the primary role to carry out clinical trials. Although it is far too early to know the success of the "new" Cardiology Fellowship Society, the initial response has been well received.

Table 1 DUCCS Trials

Name of Trial	# Fellows
APSAC	13
CARS	30
PRAISE I	36
APSAC II	8
PAC TACH	17
IMPACT II	28
EXCEL	24
PRIME	11
LEXUS	11
AFIB	7
SAD HEART	7
PURSUIT	35
ENTICES	6
PRAISE II	37
DOFETILIDE 128	8
ATLAST	16
HARE	6
RENAAL	6

The acronym describing the specific trial is listed along with the number of fellows participating in the trial.