October 2021

DHR Health
Institute for Research and Development
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The Research Spectator

DHR Health Visiting Scholar Lectureship
Professor Laura Esserman, M.D. M.B.A.

Professor Esserman (center-right) pictured with Dr. Ian Thompson and DHR Research staff

On October 12th, DHR Health Institute for Research and Development welcomed Professor Laura Esserman and Dr. Ian Thompson for the DHR Visiting Scholar Lectureship.

Dr. Esserman is the Alfred A. de Lorimier Endowed Chair in General Surgery and Professor of Surgery and Radiology at the University of California San Francisco. She also serves as the Director of the UCSF Breast Care Center. Dr. Esserman earned her undergraduate degree at Harvard University and completed her medical and surgical training at Stanford University. She completed a postdoctoral fellowship in breast oncology at Stanford and later earned a master's degree from the Stanford Graduate School of Business. She joined UCSF Medical Center in 1993. Dr. Esserman leads the NIH Funded I-SPY trials and the WISDOM study.

For her contributions to science and in particular breast cancer, Dr. Esserman has received many accolades. In 2016, Dr. Esserman was named in the TIME Magazine's 100 most influential people in the world. In 2018, she was inducted in the Giants of Cancer Care for Cancer Diagnostics. In 2019, she was awarded the Simon M. Shubitz Cancer Award and Lectureship from the University of Chicago for her significant contributions to the study of cancer. More recently, in 2020, Dr. Esserman received the Brinker Award for Scientific Distinction in Clinical Research from Susan G. Komen, breast cancer organization.

Professor Esserman was accompanied by Dr. Ian Thompson. Dr. Thompson graduated from West Point, the military academy of the U.S. Army, and served in the Middle East as a general surgeon in a combat support hospital during Operation Desert Shield/Storm in the early 1990s. Yet he is best known as a urologic oncologist who led the 25-year prostate cancer study involving almost 19,000 men, the Prostate Cancer Prevention Trial (PCPT). Early in his career, Dr. Thompson had recognized the tremendous impact that prostate cancer and its treatment had on men's lives and saw the benefit that could come from identifying a drug to prevent the cancer and its consequences. In 1993, Dr. Thompson led the randomized study, one of the largest prostate cancer prevention studies conducted to date. Results from the study showed that a common hormone-

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An Effective Model for Establishing a Collaborative for the Treatment of COVID-19 in the Rio Grande Valley

Monica M. Betancourt-Garcia, Alfredo R. Arauco-Brown, Ricardo Garcia, Lizabeth Rosenbaum-Marinaro,

Abstract: The DHR Health Institute for Research and Development spearheaded a region wide initiative to establish a Rio Grande Valley (RGV) Collaborative for early diagnosis, prevention, and treatment of COVID-19. The Collaborative was established on March 23, 2020, to conserve resources and provide the best clinical care in the face of an imminent regional health crisis in an underserved community, predominantly of Hispanic heritage with some of the highest rates of chronic diseases in the United States. The use of plasma obtained from convalesced SARS-CoV-2-infected donors was approved by the FDA and the RGV Collaborative took this as its initial challenge. To date, over 2,200 patients with severe and life-threatening COVID-19 have successfully received transfusion of convalescent plasma in various health care facilities in the RGV. The RGV Collaborative is a unique model for creating an effective public health strategy for the delivery of quality clinical care, especially in underserved communities.

Link to Full Article: https://muse.jhu.edu/article/802260

Victoria Mancillas
Clinical Research Coordinator

Alejandra Chapa
Clinical Research Coordinator

New Additions to the DHR Health Institute for Research and Development Team

Odalys Salinas
Clinical Research Coordinator

Katelyn Villa
Clinical Research Coordinator

COVID-19 Vaccination During Pregnancy and Breast Feeding is Safe and Effective *For the Mother, the Unborn Child and the Baby*

Sohail Rao, Efrain Vela, Manish Singh

Since the start of this pandemic, over 38.9 million people have been diagnosed with SARS-CoV-2 infection in the United States and over 638,000 people have died (1). With the rampant spread of the Delta variant, in the last 28 days alone, over 3.7 million people have been diagnosed with COVID-19 in the United States alone and in the last 14 days, more than 150,000 patients/day have been diagnosed with SARS-CoV-2 infection (1). These observations are particularly disconcerting given the fact that we have three effective vaccines that have been approved by the US Food and Drug Administration for use in the United States which has resulted in the vaccination of over 369 million people of which, more than 173 million have been fully vaccinated (2, 3).

Women who are pregnant, those trying to become pregnant, and/or breast feeding are particularly vulnerable to infection with the Delta variant of SARS-CoV-2. Despite the overwhelming evidence of the safety and efficacy of available vaccines in this vulnerable population, less than 25% of pregnant and breastfeeding women are vaccinated. These perturbing statistics have resulted in a rapid rise in hospitalizations of this vulnerable population with serious consequences for both the mother and the unborn child. Once diagnosed, many of the patients in this susceptible population are being treated with the cocktail of REGEN-CoV monoclonal antibody infusion which has been hailed as a "miracle" therapeutic intervention. However, it must be underscored that infusion of monoclonal antibodies provides only transient protection and it must not be considered as an alternative to vaccination.

There are many compounding factors that have guided this high level of hesitation among pregnant and breast-feeding women from getting vaccinated. Misinformation and its amplification in the social media are perhaps the single most important factor leading to this observed outcome. It is therefore imperative that scientifically proven facts are considered while making such crucial decisions. Evidence concerning the safety and effectiveness of approved COVID-19 vaccines has been growing suggesting that the benefits far outweigh any known or potential risk in this population. Furthermore, contrary to the prevailing misinformation about the COVID-19 vaccines, there is no evidence that they cause any issues related to fertility in both men and women and is safe for the unborn baby as well as those being breastfed.

Based on the available data that is supported by observations in our high-volume Women's Hospital – a Level IV Maternal Facility, we conclude that pregnant women are more susceptible to SARS-CoV-2 infection and getting a COVID-19 vaccine can protect them from severe illness. Additionally, after reviewing all the available scientific data, we have also determined that the available COVID-19 vaccines are safe and effective and that the benefits of vaccination far outweigh the risk. We therefore recommend that all pregnant women, those trying to get pregnant and/or breast feeding should seriously consider getting vaccinated.

Link to Full Article: https://dhrproceedings.org/index.php/DHRP/article/view/25

DHR Health Institute for Research and Development is approved for membership to SWOG Cancer Research Network

SWOG Cancer Research Network is a global cancer research community that designs and conducts publicly funded clinical trials. Established in 1956, they have saved more than 3 million years of life by testing new treatment, new prevention strategies and new ways to care for those who survive cancer.

SWOG member experts ensure SWOG Cancer Research Network trials are safe, successful, and scientifically sound. SWOG members work through cancer-specific committees to get a trial off the ground, make sure it's running effectively and efficiently, and prepare results for sharing so that trial data informs and improves cancer medicine - and patients' lives.

Continued from Page 1—

blocking drug that was used to treat prostate enlargement and male-pattern baldness, finasteride, reduced the risk of prostate cancer in men over the age of 55.

In a 2018 interview, Dr. Thompson called PCPT one of the most complicated trials ever launched. Finasteride has the ability to both reduce the risk of prostate cancer by up to 30% and improve the likelihood of detecting cancer in a biopsy because the prostate is smaller. Follow-up of PCPT participants has provided important information about the natural progression of the disease for more than 25 years. The PCPT was a trial of SWOG Cancer Research Network.

Dr. Thompson was also a long-term leader of the San Antonio Center for Biomarkers of Risk of Prostate Cancer, a cohort study within the NCI Early Detection Research Network (EDRN). He also served as chair of EDRN.

Investigator Spotlight: Carlos A. Paris, MD

Dr. Carlos Alberto Paris is a Board certified Internal Medicine Physician and Clinical Research Scientist. Dr. Paris received his medical degree from The National University of Colombia with a specialization in Clinical Pharmacology and Toxicology and completed his Internal Medicine residency at The University of Texas Rio Grande Valley– Doctor's Hospital At Renaissance program. Dr. Paris also serves as a member of the DHR Health Institute for Research and Development Institutional Review Board.

Dr. Paris is currently serving as the principal investigator for two clinical trials at DHR Health Institute for Research and Development.

Team Spotlight: Victoria Mancillas

Meet Victoria Mancillas. She serves as a Clinical Research Coordinator at DHR Health Institute for Research and Development. Victoria obtained a Bachelor of Science in Biology from Baylor University and is certified in Biomedical Sciences from the University of Texas at Dallas. Victoria is obtained a Master of Public Health in Health Promotions and Community Sciences at Texas A&M University. Before joining our team, Victoria was an undergraduate research student in the Biology Department at Baylor University. In her free time, she enjoys going to the gym and spending time with friends and family.

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Pfizer/BioNTech Booster Vaccine Trial

If you are interested in participating, please take a photo of the QR code and complete the intake form.

Requirement: Participate in blood draws at d0, d21, w12 and w24 after vaccination to determine: Semi-quantitative anti-SARS-CoV-2 IgG titers

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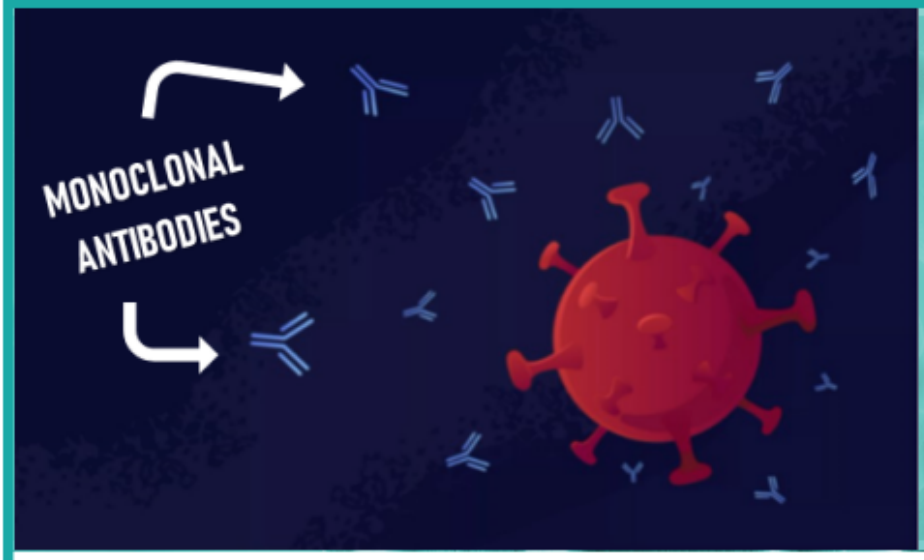

Post-Exposure Prophylaxsis for COVID-19 Negative Patients

Scan a QR Code to see if you qualify!

Who can participate?

If you have been exposed to a COVID-19 positive patient but are asymptomatic, you can register for this study.

What is the treatment?

- Nasal swab testing
- 1-hour infusion of antibodies. Patients are monitored during treatment and 1-hour post.

***Appointments are required. Estimated time of visit is 4.0 hours**

English Version

Espanol Versión

Contact Our Team!

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