It’s academic

VA partnership with medical students means top care

Like most VA doctors, Dr. B. Price Kerfoot wears many hats. A staff urologist at the VA Boston Healthcare System, he’s also an associate professor of surgery at Harvard Medical School. In both settings, he does research on how to best educate clinicians.

Dual appointments like Kerfoot’s are the mainstay of VA medical staff nationwide. They are the product of a partnership between the VA and U.S. medical schools that stretches back nearly 70 years.

After World War II, there was a shortage of physicians in the VA system to take care of the huge wave of returning soldiers. Thanks to a law passed in 1946, the VA could hire physicians more easily, and VA sites would become teaching hospitals. Medical school faculty would become VA staff physicians, and
the schools’ residents would participate in veterans care. This arrangement has led to more than half of all practicing physicians in the U.S. gaining at least a portion of their medical training through the VA health care system.

**Influx of outstanding medical expertise**

“VA’s affiliations with academic medical centers allows for the sharing of outstanding faculty members and trainees,” said Kerfoot. “This influx of outstanding medical expertise allows VA patients to receive the most advanced levels of medical care.”

Numerous breakthroughs in medical research— particularly in the areas of spinal cord injury, limb loss, post-traumatic stress disorder and traumatic brain injury, as well as the treatment of diabetes, chronic pulmonary obstructive disease and even cancer— have been the result of VA medical research since the program began in 1925.

“The value of VA clinical research runs very deep,” said National Adjutant Marc Burgess. “It has given us so many tools to help make the most severely ill and injured veterans whole again.”

Dr. Ross Fletcher, a VA cardiologist in the nation’s capital, added, “We’re able to provide very advanced therapies that would not be available otherwise.”

VA’s partnerships with medical schools provide a unique and much-needed teaching venue, allowing physicians to put valuable research into practice.

“Having such accomplished physicians using these methods to train the next generation of doctors is invaluable, both to veterans and to the medical community as a whole,” said Burgess.

Dr. Melina Kibbe is a physician-researcher doing cutting-edge
work in both the VA and academia. Kibbe’s research is supported in part by VA research funds, and the work is strongly targeted to veterans’ needs.

“The research I conduct at both Northwestern and VA is directly applicable to veterans. Many veterans suffer from vascular disease,” said Kibbe. “The focus of my lab is to develop better therapies for patients with vascular disease, so we can reduce re-operations, prevent amputations and save lives.”

One of her recent trainees, Dr. George Havelka, is completing a vascular surgery fellowship based at Northwestern University and the VA.

Havelka’s research has shown how delivering nitric oxide directly to blood vessels through balloon catheters may help keep scar tissue from building up and re-blocking vessels after surgery.

Havelka, whose father was a military policeman in Vietnam, said the research experience has fueled his career. However, he is even more passionate about what it might mean for veterans and other patients.

“Ultimately, it would be great if, when we put balloons and stents in the arteries to open up a lesion [clear a blockage], we could at the same time deliver nitric oxide and inhibit that [scar tissue] from developing,” said Havelka. “This would help extend the ‘shelf life’ of our surgical interventions.”

**VA trains other health professions**

Alongside physicians, a variety of other health professionals receive training through the VA.

Dr. Caitlin Dowd is a second-year pharmacy resident at the Malcom Randall VA Medical Center in Gainesville, Fla. She said the VA is ahead of the curve in terms of giving pharmacists a
bigger role in helping patients manage chronic diseases.

“The autonomy that pharmacists have in VA has totally shaped my attitude toward the profession,” she said. “I feel I can go into any setting now, prepared to manage a disease state in a holistic manner—ordering labs, making changes in medications, communicating with patients.”

The non-VA medical world is just catching up, she said. “It’s exciting to be here because there’s a lot of movement outside VA to adopt a model like VA already has. It’s pretty awesome to be in a place where this is the norm.”

Dowd’s VA research team has helped highlight that the North Florida/South Georgia Veterans Health System is saving about $643,000 a year by switching patients from one statin drug to a less expensive one, while keeping the same clinical benefits.

Dowd, who has several veterans in her family, said she likes the idea of serving this population.

Havelka agrees. “The veterans on the whole seem to be a very appreciative group,” he said. “It’s nice to be able to work with them and give something back.”