



President's Column:

by Gillian D. Sanders Ph.D.



I wanted to open my first SMDM newsletter column by saying that I am extremely honored to be serving as SMDM President for the coming year. I feel that SMDM is at an exciting point in its history and that there are numerous ongoing and planned activities that I am thrilled to be involved with and to help move forward. SMDM's ongoing activities, direction, and success are definitely a testament to the hard work of our Past President David Meltzer, our Executive Director Jill Metcalf, and of the officers, board members, committee chairs, and of course many active members of the Society.

The 2007 Annual Meeting in Pittsburgh was a great success – both scientifically and financially. We had a great turnout (517 attendees) and meeting co-chairs Cindy Bryce and Mark Roberts did an amazing job bringing together a program which showcased medical decision making research, provided venues for stimulating policy debates, and sparked I am sure many new research ideas and collaborations. At the same time, they and their program committee provided fun social events allowing attendees to explore Pittsburgh, meet new colleagues and potential collaborators, and catch up with old friends.

As we look forward, there are several initiatives that I want to focus on during my presidency. In all these initiatives the board is looking to increase the value of the Society to its current (and potential) members and to allow SMDM to increase its impact in both policy making and clinical practice.

First, I want SMDM to focus on increasing the value of the Society to our trainee members. I loved the years I attended SMDM as a trainee – and definitely the research I was exposed to, and the colleagues I met during those years shaped my current research focus and career path. I want to make sure that similarly our current trainees are getting as much as they can out of their involvement in the Society. SMDM already has several programs in place which target trainees – including the successful mentoring program, the student lunch, and of course the Lusted student prize competition. In addition we are implementing several new programs this year. First, the membership committee (headed by Elena Elkin and Scott LaJoie) and our Secretary Treasurer David Paltiel have worked hard to come up with a large decrease in trainee membership dues from \$120/year to now only \$60/year. We're excited that financially the Society can support such a large decrease in trainee fees and believe it will make SMDM more accessible to a broader group of young members. Second we have designated one of our new board members

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Heather Taffet Gold to serve as a trainee-board liaison. Heather's task is to work with current trainees to help them become more involved in SMDM. Several of our committees need trainee involvement and we are always looking for people who have new ideas and energy. Please contact Heather at heg2001@med.cornell.edu if you are a trainee interested in becoming more involved in SMDM or have specific suggestions regarding our trainee members.

Second, although the trainees and their experience at SMDM is something that I want us to make a priority – in 2008 we are also focusing on increasing our regular SMDM membership. As of Jan 1, 2008, SMDM had 978 members. Our goal in 2008 is to not only bring in new members – but also to increase retention of current members (and bring back in some past members who have become inactive!). The membership committee is preparing an expansive membership campaign which the board will be discussing at our upcoming February call. Again we welcome any input from members regarding how to increase the value of the Society to our current members – and any suggestions regarding how to broaden our membership and impact.

Finally, I wanted to make sure our members are aware of SMDM's ongoing policy initiatives. These initiatives were developed during David Meltzer's tenure as President – and we are looking this year to continue their development and expand their impact. Currently we have three active working groups which focus on the areas of Technology Assessment, Public Health, and Issues in Methodology. We will be adding a new working group focusing on Global Health to the initiative this spring. The goal of these working groups is to provide learning opportunities for our members and for external audiences, to communicate with our members about key issues, and to provide tools and knowledge to our members so that they can be more fully engaged in policy. Please let myself or Jill Metcalf (jill.metcalf@smdm.org) know if you are interested in being involved in one of these working groups – or if you have ideas as to how to increase the Society's policy impact.

Over the next year there are several opportunities for SMDM members to get together. The board of trustees will be meeting back in Pittsburgh in April for the spring board meeting. The 11th biennial SMDM European conference, chaired by Joe Pliskin, Hans Brunner, and Dan Greenberg will be held in Engelberg, Switzerland June 1-4. Finally, our annual meeting is in Philadelphia, PA this fall (October 19-22, 2008) and our meeting chairs Sandy Schwartz and Seema Sonnad are planning a great program with some new twists. In addition to these planned meetings, we hope SMDM members will continue to interact with each other locally – certainly let me know if you're ever visiting North Carolina!

I am looking forward to working with you and seeing you at the meetings and throughout the year. Please feel free to contact me any time at gillian.sanders@duke.edu with comments, questions, or suggestions.



Gillian D. Sanders Ph.D.

From the Executive Director's Desk...

by Jill Metcalf



It was wonderful to see so many of you in Pittsburgh for the annual meeting! We had 517 people attend the meeting and a record 330 abstracts accepted for presentation! Please join me in conveying our heartfelt appreciation to Annual Meeting Program Chairs Cindy Bryce

and Mark Roberts, to Scientific Committee Chairs Heather Gold and Scott Braithwaite, to Short Course Chairs Ken Smith and Richard Orr and to the many others who helped to make the 2007 meeting a success!

You may have noticed we switched from using paper evaluation forms to an online meeting evaluation survey this year. We nearly quadrupled the number of responses! Survey respondents scored the overall meeting very high, finding the content useful and relevant to their career development. Respondents noted the lack of commercial bias in the presentations and appreciated the minimal number of commercial exhibitors at the conference. Many respondents noted the value of networking with colleagues from a wide variety of disciplines as a benefit to the conference and first time attendees saw the value of other attendees as a strong point. Several respondents noted the challenge of fitting a lot of programming into a limited time frame and offered suggestions for streamlining the logistics of the meeting. Poster sessions and short courses were often mentioned as highlights of the meeting. Thank you to everyone who completed the survey and offered thoughtful comments and ideas for future meetings. We are taking your ideas into consideration in planning the 2008 and the 2009 meetings. Yes, we are thinking about the 2009 meeting already!

SMDM has always been committed to supporting trainees in the field of medical decision making. The Board reiterated this commitment for 2008 by reducing the membership rate for trainees from \$120 to \$60 per year. Please help us to circulate this information throughout your department and/or institution. More

information about becoming a trainee member can be found at www.smdm.org/become_a_member.shtml.

Five new trustees were elected to the SMDM Board at the Business Meeting in Pittsburgh. New to the board are President-Elect Mark Roberts, Vice President-Elect David Sugano, and Trustees Angie Fagerlin, Heather Taffet Gold and Uwe Siebert. Please join me in welcoming these new members to the SMDM Board of Trustees.

Go to <http://www.smdm.org/board.shtml> for a full listing of trustees.

With the excitement of welcoming new members onto the board, we sadly said goodbye to other members who served our society so well during their tenure. Please join me in thanking Frank Sonnenberg, Anne Stiggelbout, Cathy Bradley, Nananda Col, Dena Bravata and Karl Claxton for their years of service to SMDM. Our society would not be what it is today without their leadership and commitment.

We are currently accepting nominations for the 2008/2009 board. Additional information can be found at www.smdm.org.

Happy New Year!

Warmest regards,

A handwritten signature in black ink that reads "Jill Metcalf". The signature is written in a cursive, flowing style.

Jill Metcalf

29th Annual Meeting Keynote Speech Summary

Mysteries versus Puzzles

By Ava John-Baptiste and Colleen Vrbic

One consistent facet of each annual meeting is an interesting and captivating keynote address. This year was no different with a fascinating talk delivered by Malcolm Gladwell, author of best-selling books *The Tipping Point* and *Blink*. The theme of his talk was the difference between puzzles and mysteries in disciplines ranging from sports to politics to medicine. It may seem like a simple and obvious differentiation, yet when Malcolm started giving examples of these two categories, it seemed like one of those Homer Simpson “D’oh!” moments! We were left asking ourselves, “why didn’t I ever think of that?” Puzzling! Or is it mysterious?

To paraphrase Mr. Gladwell’s main point, puzzles are mainly information collection problems and mysteries are information selection problems. To use U.S. military concerns as an example, the location of Bin Laden is a puzzle. We do not have enough information to say where he is. The strategy for the war in Iraq was a mystery, since there was information overload. Many problems may seem puzzling, but upon closer inspection are really mysteries and decision makers need only to make sense of the available information. The fundamental difference between puzzles and mysteries is that in puzzles, every additional piece of information helps when making decisions whereas in mysteries, more information makes decision making more difficult and complicated.

So what does this have to do with medical decision making? As decision makers in any field, we need to change the way we think about problems. Admitting when we don’t have enough information, or that we have too much information would help prevent unsupported decisions or information overload. One example Mr. Gladwell gave involved the workup of a man with a potential prostate problem. A man goes in to see his doctor and likely will end up with a PSA level, ultrasound results and even a biopsy. But now there is information overload. The result of each additional test has added more information and may have muddied a decision about whether to remove the prostate.

Although there may be no quick fixes to big medical problems, this talk at least provided food for thought. Understanding that more information may not lead to clearer decisions could save patients discomfort from additional testing, physicians may gain time from performing fewer tests which can still lead to effective outcomes. It is also necessary to distinguish when more information is necessary as well. Amazing, right?!

Interview



Being given the opportunity to see Malcolm Gladwell in person for the keynote speech was remarkable, but to then have the chance to talk to him two on one – unbelievable! Talk about being “star struck”!! One of the first things that struck us was Malcolm’s modest size, yet magnanimous presence. It was intimidating to be around him. Even though our novice interview skills were obvious, he was very kind and did not treat us as though we were amateurs. We took advantage of our time with him to clarify some questions about his talk as well as get his opinion on recent basketball drafts.

We reflected on the fact that medical care can often be thought of as a mystery. The rapid increase in diagnostic tests and treatment options, information on patient preferences, research publications and methods for assessing the validity of medical evidence make medical care increasingly complex. Because decision support systems are a key theme of SMDM, we asked Malcolm his opinion on the use of technology to assist with the mysteries of medical care, and reduce the time that is needed to solve these mysteries.

Malcolm was highly in favor of using technology to buy time, but commented that we should enrich other aspects of medical care, such as the quality of interaction with the patient, with the time that technology saves. Malcolm also suggested that decision support systems are not the only form of technology that is helping to manage the complexity of the medical encounter. Through technology such as the internet

people are researching informally and accessing information that can demystify the visit for the patient, which ultimately improves medicine.

Decision making and success in sports were also key themes of Malcolm's talk and a key theme of the SMDM conference (the conference social event featured the triennial sports symposium). Malcolm noted that success in sports has a lot to do with motivation and scouting decision makers try to assess an athlete's motivation. One of the reasons that coaches are important to success in athletics is because motivation is one of the most modifiable human traits. Malcolm suggested that health care managers and trainers should think of ways to "encourage and invigorate" motivation in practicing physicians, so that they would be willing to spend the

time necessary to unravel the mysteries of patient care. Malcolm also gave us a sneak peek in to the concept of his next book which will take a deeper look into the roots of achievement. It will surely be on our pre-order list as soon as Amazon will allow it! Only about a year and a half to go!

When Mark Roberts introduced Malcolm before the keynote address, one of the aspects Mark pointed out was Malcolm's amazing generosity, declining an honorarium or travel reimbursements. The gesture speaks volumes about his character. And to the two of us, the fact that this very busy man sat down with us to chat just solidifies what a great person he is!

2007 Award Winners

Recipients of the 2007 awards:

Career Achievement:

Peter P. Wakker, PhD, Erasmus University, Rotterdam

Outstanding Paper by a Young Investigator:

Andrea Gurmankin Levy, PhD, Dana-Farber Cancer Institute, Boston, Massachusetts

Eugene Saenger Award for Distinguished Service to SMDM:

Kathryn McDonald, MM, Stanford University, California

John Eisenberg Award in Recognition of Exemplary Leadership in the Practical Application of Medical Decision Making Research:

Harold Sox, MD, American College of Physicians, Philadelphia, PA

Lee B. Lusted Student Prize:

1st Prize:

Ylian S. Liem, MD, MSc Translating Multivariable Cox Regression Models To A Markov Process Model In The Presence Of Competing Risks

Other Winners:

Mehul Dalal, MD, MSc Prioritizing Clinical Practice Guidelines In The Primary Care Setting

Rebecca Miksad, MD Evaluation Of Progression-free Survival As A Surrogate Endpoint In Advanced Breast Cancer

Beate Sander, RN, MBA, MEdDev Time Horizon Bias In Economic Evaluations

Comments from Award Recipients

Peter Wakker

Peter Wakker received the Career Achievement Award of the Society for Medical Decision Making in 2007, at the 29th Annual Meeting of the Society for Medical Decision Making, October 24, Pittsburgh, PA, USA:

<http://people.few.eur.nl/wakker/miscella/awards/mdm2007/mdm2007.htm>

With this award the society for medical decision making expressed their interest in inputs from economists. The text of Wakker's lecture for this award is at:

<http://people.few.eur.nl/wakker/pdf/mdmlessonecon.pdf>

Peter Wakker obtained a master's degree in mathematics and a Ph.D. in economics. He works on "prospect theory" for decisions under risk, both from the empirical and from the theoretical perspective. Prospect theory is a theory developed by the psychologists Kahneman & Tversky that was awarded the economics Nobel prize in 2002 and that gave the 2nd most cited paper in the economics literature of the past quarter century (Kahneman & Tversky, 1979, *Econometrica*), but has not yet been widely applied in medicine. Wakker applied his results in many domains, with affiliations (and publications in leading journals) in medicine and further in mathematics (Mathematics of Operations Research), statistics (*Annals*

of Statistics), psychology (*Psychological Review*), business (*Management Science*), and economics (*Econometrica*). In medicine, improved measurements and applications of quality of life have resulted.

Wakker received awards and favorable rankings in these domains:

- In mathematics, his Erdős number is 2, with 511 mathematicians ranked better (<http://www.oakland.edu/enp/>;))
- In psychology, he received the New Investigator Award of the Society of Mathematical Psychology 1991.
- In business, he received the INFORMS Society Decision analysis publication award in 2002 and 2003.
- In economics, he was the most-publishing Dutch economist in 1994, 1998, 2003, and 2007.
- In Economics & Business, he had the 90th rank in the ISI-Thomson most-cited scientists of 2003.
- In medicine, he received the Dutch medical technology assessment publication award in 2001 & 2005.

Eugene Saenger Winner's Reflections on Reasons to Serve SMDM

By Kathryn McDonald

My commitment to SMDM increases with each passing year. I find it incredibly satisfying to serve our professional society. In my view, and I think many of us share this perspective, the work each member does is fascinating and meaningful. Where else can we find people who come from different fields, but share an interest in improving health care, specifically through the lens of decisions that patients, doctors, and policymakers make? I am incredibly thankful to our society for its meetings, publications and network that cultivate high-caliber science from such an interesting array of fields.

But what keeps a society like ours going? Yes, the science we do is the basis. But the other key ingredient is our tireless volunteering to create a professional home that fosters our work, our careers, and significant impact beyond what any of us can do alone.

SMDM honors volunteer efforts with the Saenger Distinguished Service Award which recognizes service to SMDM in terms of leadership, role in the operations of the Society, and the contributions to the scientific and

educational activities of the Society. When I received this award at the 2007 Annual Meeting, I was deeply moved and wished to share it with everyone who has served with me on a variety of committees and other Society activities. I hope that sharing some of my experiences serving the Society in this brief newsletter article might encourage others to offer their unique abilities to our organization.

By the end of the clinic visit, my patient appeared overwhelmed. She was conscientious and wanted to follow the doctor's orders. But I had given her too many orders. She was overweight, had diabetes, high blood pressure, high cholesterol, and osteoporosis. I made a note that next time I saw her I would prioritize and recommend the most beneficial items first.

Looking for assistance in prioritizing I searched online resources, retrieved publications and asked experienced colleagues. To my surprise I found little guidance for prioritizing. From this experience (and many others like it), I came upon my research question; that is if guidelines could be systematically prioritized, how much benefit can be gained?

Most of the volunteer work of the society is done in partnership with other members. Getting to know other members through service activities is rewarding in itself. I attended my first SMDM meeting in 1993, and quickly found my network of colleagues expand beyond my own institution as I became involved in the Publications Committee. I learned about the role a journal plays within a society and within a scholarly field. I also learned a lot about the publishing world as I headed the effort to get competitive proposals from publishers and negotiated on behalf of the Society to secure a favorable contract. Similarly, involvement in searching for a new editor allowed me to see the creative ideas the candidates had for the journal.

Participation in another committee—the Development Committee—helped me see some weaknesses of our Society. At the time, we easily built camaraderie within the circles of academia, but had mixed messages for our colleagues from other institutions. We needed to clarify our policies about conflict of interest – perceived and real. And we needed to recognize some of our shared interests – whether we hailed from universities, government or industry we were connected to SMDM

The Saenger Distinguished Service Award Honors Eugene L. Saenger

The Saenger Distinguished Service Award honors Eugene L. Saenger (1917–2007), who was the co-founder of SMDM and devoted his career to medicine. He was a leading expert in the fields of nuclear medicine and radiation science. Saenger played an integral role in establishing radiation safety standards for patients and medical personnel.

Mehul Dalal

Scott Braithwaite, who later became my primary mentor, had been working on a related problem of examining the benefits and harms of applying guidelines to older patients. After discussing my observations with him, he took me on as a mentee and we started to tackle the problem.

Being given the opportunity to present this work at SMDM was an unexpected surprise. I had once been to SMDM and had been impressed at the sophistication of the oral abstract presentations. A project that started as a casual observation in the clinic, I now had to present to one of the most scientifically rigorous audiences. (Another mentor had once referred to SMDM-folks as “wicked smart”!)

This year’s SMDM conference was one of the most engaging conferences I’ve attended and not nearly as intimidating as I had feared. The overwhelming ethos was that of open discussion, approachability and a genuine interest in helping trainees along. The thoughtful feedback was essential in helping me progress to the next

because of our interest in understanding and improving decision-making in health care. Finally, we needed to commit to building a vision that embraced all of our members, and only then would we find sources of support compatible with the vision.

Involvement on the Board of Trustees, starting with Secretary-Treasurer, gave me an appreciation for the difficulty of moving forward apace with changes in the environment with volunteers alone. We had engaged administrative management services for many years, but had not invested in any structures that would help us make persistent and efficient progress towards our shared goals from one rotation of service to the next. I feel that one of my most significant contributions to SMDM to date was building support for the notion of getting an executive director, and then heading up a national search for someone to fill this role. I’ve been very pleased with the outcome—an effective leader who works well with the Board and the membership in increasing activities that will allow SMDM to fulfill its mission more. My hope is that this investment supports more volunteerism and more rewarding experiences for those who volunteer their time, talent and other resources at their disposal.

stage of my project.

Coming back to my patient, I now see we are much closer (but a long way to go) to helping prioritize her recommendations. Ultimately, I hope this project will have a positive impact on clinical care and I thank the members of SMDM for their support and recognition of this work.

Ylian S. Liem

I’ve always tremendously enjoyed SMDM meetings. The first meeting I attended was in Baltimore in 2002 and I vividly remember being very impressed by the presentations, and feeling incredibly fortunate to listen to Daniel Kahnemann speaking. The enormous impression that meeting made on me as a medical student, contributed to my pursuing a PhD in the decision making field after my medical studies. I started my PhD with Myriam Hunink in 2003 and spent part of my research time in Boston, TA-ing for Karen Kuntz and working with John Wong and Wolfgang Winkelmayr. In between my research years, I started my first year of clinical training in Internal Medicine. Presently, four meetings later and many SMDM-friends richer, I was amazed to win a Lee Lusted

Student Prize. Although this prize reflects the rather brilliant tutoring by my supervisors on this paper Myriam Hunink, John Wong, Wolfgang Winkelmayr and Theo Stijnen, more than my own achievement, I feel very honored.

In the abstract “Translating Multivariable Cox regression models to a Markov Process model in the presence of competing risks”, we presented a method for correcting transition probabilities from Cox-regression models in the presence of competing risks for use in a Markov model. We illustrate this issue by computing transition probabilities – both uncorrected and corrected – for renal transplant patients, who can either have graft failure and return to hemodialysis, have graft failure and return to peritoneal dialysis or die. We used data from the Dutch End-Stage Renal Disease Registry (RENINE). In our example, we found no difference in estimated survival between the uncorrected and corrected

approaches. However, when hazards would be larger and cycle length longer, we showed that considerable underestimation of survival may occur. In my PhD thesis, which I hope to defend later this year, I applied this correction method to a 2nd order Monte Carlo Markov model to estimate the benefit of early living-donor renal transplantation compared with renal dialysis with possible cadaveric transplantation.

Now that I am continuing my clinical training, I realize how much I have been missing working with patients during my research years. However, life without research seems wholly unimaginable to me too, so I hope to combine these two passions and hope to continue to attend SMDM meetings as platforms to learn, and to exchange ideas with fellow scientists and friends.

[Look for the other award recipients' comments in future newsletters.](#)

Until We Meet Again...

By Bruce Lee

As outgoing Editors for the SMDM Newsletter, Beate and I were asked to write a farewell piece. Since Beate is busy with her newborn daughter Hazel (who should qualify for an SMDM Trainee Membership under Beate's support), I am writing this on behalf of both of us. This gives me the unique opportunity to say what I think Beate would say. Or at least, think like I am saying what I think Beate would say... I think.

Ironically after a couple years of gently nudging contributors to get their articles in on time, I have been very tardy in writing this final piece. Colleen Vrbn and Ava John-Baptiste, former Associate Editors extraordinaire and now Editors extraordinaire, have been very patient with me. A bout of what may have been the flu, ironically caught while working on an influenza model, and a busy schedule have been partially responsible for my delay.

But another challenge has been finding the right words to say. It is difficult to summarize an excellent two years in just a few paragraphs. Editing the Newsletter has given us a unique view of SMDM, its membership, and the reaches of the organization. How many newsletters would include articles on a New York Times bestselling author, infectious disease modeling, the former Centers for Diseases Control and Prevention (CDC) Director, and how to speak Pittsburghese? What attracted me and continues to attract me to SMDM and its membership is its diversity in interests and backgrounds.

People say that in life that you are only as good as the people around you. Few statements are truer than this one (except

for perhaps, “One who lives in a glass house should change clothes in basement.”). By far the biggest bonus of serving as Editors of the SMDM Newsletter has been getting to know Kevin Frick, Colleen, Ava, Angela Musial, Jill Metcalf, and the many other contributors to the newsletter. Working with such outstanding people has made editing the newsletter not only easy but thoroughly enjoyable.

Our transition to becoming Editors would not have been as smooth if it were not for Kevin, Jill, and Angela. As the previous Editor, Kevin set an excellent example, provided important suggestions, and left big shoes to fill. (Fortunately, with two of us, each only had to take one shoe). Angela and Jill helped shepherd us through various changes in the Newsletter format, production schedule, and operations.

Then, there are Ava and Colleen. If enthusiasm and creativity were grant money, well then everyone should start sending their grant applications to the new Editors. Working with them has been thoroughly enjoyable.

Finally, I must thank Beate. She has been everything that one looks for in a Co-Editor. Despite being five hours away in Toronto, with every issue, we have always been on the same page (or pdf).

So as they say in Pittsburgh: “sees ya. It has been fun n'at. Till we meet again.” Whatever that means...

Call for Nominations for the 2008 SMDM Career Achievement Award

The Career Achievement Award recognizes a senior investigator who has made significant contributions to the field of medical decision making. The nominee need not be a member of SMDM.

The Awards Committee offers the following questions to stimulate your thinking about worthy nominees:

1. In your area of work, whose publications are most often referred to?
2. In your work, what analytic tools do you use daily that may have been introduced by an individual in medical decision making?
3. In your institution, whose names are most often mentioned when people talk about ideas in medical decision making?
4. In your institution, when you hear others talking about medical decision making ideas, but they don't mention individual names, whom do you recognize as the originator of those ideas?
5. In your classes, whose work do you assign the students to read?
6. In your own research or teaching, whose work do you frequently cite or refer to?

•Nominations must include a one-paragraph statement describing the nominee's contributions to the field of medical decision making. A copy of the nominee's CV is desirable. If a CV is not available, the nominating statement should be more detailed.

Previous recipients of the Career Achievement Award: *Stephen G. Pauker, MD; Milton C. Weinstein, PhD; Arthur S. Elstein, PhD; Harold Sox, MD; Dennis Fryback, PhD; John M. Eisenberg, MD, George Torrance, PhD; Daniel Kahneman, PhD; Jerome P. Kassirer, MD; Joseph S. Pliskin, PhD.; Allan Detsky, M.D., Ph.D., David J. Spiegelhalter, Ph.D., Peter P. Wakker, Ph.D.*

Call for Nominations for the 2008 Eugene L. Saenger Award for Distinguished Service to SMDM

This award recognizes service to SMDM in terms of leadership, role in the operations of the Society, and contributions to the scientific and educational activities of the Society. The nominee must be a member of SMDM.

Questions to stimulate your thinking about worthy nominees:

1. Who comes to mind as a person to call on for help if you need to get something accomplished?
2. Who do you hesitate to call on because you think they already are doing so much?
3. Who calls on you to serve SMDM?
4. Whom would you feel you could not say "no" to if they called on you to serve?

•Nominations must include a statement briefly describing the nominee's duration of membership and contributions to SMDM. A copy of the nominee's CV is desirable. If a CV is not available, the nominating statement should be more detailed.

Previous recipients of this award: *Lee Lusted, MD; Stephen Pauker, MD; Dennis Fryback, PhD; J. Robert Beck, MD; Robert Wigton, MD; Robert Centor, MD; Milton Weinstein, PhD; John Clarke, MD; Michael J. Barry, MD; Margaret Holmes-Rovner, PhD; David Rovner, MD; Sankey Williams, MD; Roy Poses, MD; Arthur Elstein, PhD; Frank A. Sonnenberg, MD; John C. Hershey, PhD; Joel Tsevat, MD; Bruce E. Hillner, MD; Myriam Hunink, M.D., Ph.D., Kathryn McDonald, MM.*

Call for Nominations for the 2008 John M. Eisenberg Award for Practical Application of Medical Decision Making Research

This award recognizes sustained leadership in translating medical decision making research into practice, including taking exceptional steps to communicate the principles and/or substantive findings of medical decision making research to policy makers, or clinical decision makers, or the general public. The nominee need not be a member of SMDM.

Question: *In your work or practice, when you come across a good idea, embodying solid medical decision making principles, who has worked to bring that idea into practice?*

•Nominations must include a one-paragraph statement describing the ways in which the nominee has fulfilled the criteria stated above, including practical application and non-academic communication of medical decision making research. A copy of the nominee's CV is desirable. If a CV is not available, the nominating letter should be more detailed.

Previous recipients of this award: *Donald Berwick, MD; Harvey Fineberg, MD, PhD; Annette O'Connor, RN, PhD; Hilary Llewellyn-Thomas, RN, PhD; Jeffrey P. Koplan, MD, MPH; John M. Wennberg, MD, MPH; Harold C. Sox, M.D.*

Call for Nominations for the 2008 SMDM Award for Outstanding Paper by a Young Investigator

This award is limited to a paper published in the calendar year prior to the award (journal must be dated in 2006 for the 2007 award). The nominee must be in the first 6 years of full-time employment after the end of "training", however that is defined within the country and field of the nominee. Any dispute about the eligibility of a nominee will be resolved by the committee.

- The nominee must be the first author of the paper.
- The nominator must be a member of SMDM.
- The paper nominated must appear in a peer reviewed journal with a publication date of 2007. Online journals qualify, provided they are peer-reviewed.
- Papers will be judged for their importance and originality.
- The nominations must include a copy of the article preferably in pdf format, including complete journal citation.

A reprint or clear photocopy is acceptable, but pdf is preferred. A statement explaining the importance of the paper is optional.

Questions to stimulate thinking about worthy nominees:

1. In the past year, what paper did you notice with surprise and pleasure, as being an impressive contribution from one so young?
2. Does this paper make you think, "This person has promise?"

Procedure for all nominations:

Nominations must be received no later than **March 1, 2008**. Please submit all documentation via email to the chair of the committee, Arthur Elstein, at aelstein@sbcglobal.net.

The awards will be presented at the 2008 SMDM meeting.

Past SMDM Award Recipients

Award for Career Achievement:

Stephen Pauker, MD (1995)
Milton Weinstein, PhD (1996)
Arthur Elstein, PhD (1997)
Harold Sox, MD
Dennis Fryback, PhD
John Eisenberg, MD (2000)
George Torrance, PhD (2001)
Daniel Kahneman, PhD (2002)
Jerome P. Kassirer, MD (2003)
Joseph S. Pliskin, Ph.D. (2004)
Allan S. Detsky, MD, Ph.D. (2005)
David J. Spiegelhalter, Ph.D. (2006)

Eugene Saenger Award for Distinguished Service to SMDM:

Lee Lusted, MD
Stephen Pauker, MD
Dennis Fryback, PhD
J. Robert Beck, MD
Robert Wigton, MD
Robert Centor, MD
Milton Weinstein, PhD
John Clarke, MD
Michael Barry, MD
Margaret Holmes-Rovner, PhD--1999
David Rovner, MD
Sankey Williams, MD
Roy Poses, MD
Arthur S. Elstein, Ph.D. (2002)
Frank M. Sonnenberg, MD. (2003)
John C. Hershey, Ph.D. (2003)
Joel Tsevat, MD (2004)
Bruce Hillner, MD (2005)
Myriam Hunink, MD, PhD (2006)

John M. Eisenberg Award for Practical Application of Medical Decision Making Research:

Donald M. Berwick, MD
(2002—first year of award)
Harvey V. Fineberg, M.D., Ph.D. 2003
Annette O'Connor, Ph.D. and Hilary Llewellyn-Thomas, Ph.D. 2004
Jeffrey P. Koplan, M.D., M.P.H. (2005)
John M. Wennberg, M.D., M.P.H. (2006)

Best Paper published by a Young Investigator:

Sue Goldie for Goldie SJ, Kuhn L, Denny L, Pollack A, Wright TC: Policy analysis of cervical cancer screening strategies in low resource settings: clinical benefits and cost-effectiveness analysis. (2001)

Alan Schwartz, for Schwartz A, Hasnain M. Risk perception and risk attitude in informed consent. Risk, Decision and Policy 2002; 7:121-130.

Ida Sim, for Sim, I, Cummings S. A new framework for describing and quantifying the gap between proof and practice. Medical Care 2003;41:874-881.

Angela Fagerlin, for Fagerlin A, Schneider C. Enough: the failure of the living will. Hastings Center Report 2004(2):30-42.

Allison B. Rosen, for Rosen AB, Hamel MB, Weinstein MC, Cutler DM, Fendrick AM, Vijan S. Cost-effectiveness of full Medicare coverage of Angiotensin-Converting Enzyme Inhibitors for beneficiaries with diabetes. Ann Intern Med. 2005;143:89-99.

Andrea Gurmankin Levy, for Gurmankin Levy A., Micco E., Putt M., & Armstrong K. Value for the future and breast cancer-preventive health behavior. Cancer Epidemiology, Biomarkers & Prevention. 15(5):955-60, 2006 May.

Society For Medical Decision Making SMDM Europe 2008

June 1-4, 2008
Europäischer Hof Hotel Europe
Engelberg, Switzerland

Announcement

Dear Colleagues,

We are very pleased to invite you to the Biennial European Conference of the Society for Medical Decision Making that will be held in the lovely town of Engelberg, Switzerland, June 1-4, 2008. The conference venue will be the Europäischer Hof Hotel Europe. Engelberg is an hour's train ride from Luzern which is easily accessible by train from all Europe and easy access from Zurich airport and offers both excellent accommodations and up-to-date conference facilities. This friendly, compact village is 1050 meters above sea level and is characterized by the special charm of the Benedictine Monastery, the wonderful countryside and impressive mountain backdrop, including Titlis Glacier Park. The conference will bring together researchers and practitioners in a variety of areas within medical decision-making. Participants will be exposed to theoretical developments, applications, and implementation in practice. We look forward to a stimulating and fruitful exchange. The conference includes plenary sessions, oral presentations and posters. Parallel sessions will allow the program to focus on specific areas. Several short courses are planned for Sunday, June 1, 2008. Participants will be welcomed at a reception on Sunday evening, June 1, and the following three days will be devoted to scientific sessions. We plan an evening of entertainment and a festive dinner which will be accessible by cable car to the peak of one of the local famous ski resorts. We look forward to welcoming you among our participants.

Sincerely,

Hans Heinrich Brunner, Dan Greenberg and Joseph Pliskin
Program Co-Chairs

Topics to be Presented

The following topics are of current and continued interest, but are not meant to limit any other ideas. Both applied work and methodological contributions are welcome.

Applied Areas:

Clinical Strategies or Guidelines
Cognition, Attitudes, Psychology
Disease Management
Ethical and Legal Issues
Evidence-Based Medicine
Health Economics
Health Policy
Health Services Research
Informatics
Outcome Assessment
Patient Education
Quality of Care
Risk Attitudes
Risk Communication

Shared Decision Making
Technology Assessment

Methodological Areas:

Artificial Intelligence, Computer-Aided Diagnosis, and Expert Systems
Cost-Benefit and Cost-Effectiveness Analysis
Cost-Identification Analysis
Database Strategies
Decision Analysis
Descriptive Studies
Epidemiology
Statistics
Utility Theory

(Continued on next page)

Call For Papers

Participants are welcome to submit abstracts. Abstracts will be reviewed for acceptance on their scientific merit and should be clearly written. Presenters are invited to submit abstracts on the topics that are listed, but are not limited, to those mentioned. Kindly specify if you would prefer an oral or poster presentation. The authors will be informed in due time whether their abstracts have been accepted, and whether for oral or poster presentation. We ask our colleagues to understand that the number of slots for oral presentations is limited. Therefore, some presenters may be asked to adapt their presentations to posters. Inclusion of abstracts in the scientific program is dependent on payment of registration fees.

New Deadline For Submission of Abstracts:

February 15, 2008

Abstracts must be submitted in English and sent as an email attachment to:
smdm@targetconf.com

Instructions for the Preparation of Abstracts:

- Title should be typed in CAPITAL LETTERS, bold and left aligned.
- Presenting author's name should be underlined and bolded.
- Font: Times New Roman, size 12 points, single spacing.
- If submitting more than one abstract, each abstract must be sent as a separate e-mail message and the title should indicate that these are separate abstracts, i.e. JILL BROWN ABSTRACT 1; JILL BROWN ABSTRACT 2; etc.
- Abstracts should be no longer than 250 words.
- No end-notes, diagrams or frames are acceptable
- Please note: Faxed abstracts will not be accepted

Organizing Committee

Co-chairs

Hans Heinrich Brunner, Switzerland
Dan Greenberg, Israel
Joseph Pliskin, Israel

Scientific Committee

Johanna Bosch, The Netherlands
Marlene Glydmark, Switzerland
Jens Grueger, Switzerland
Laszlo Gulacsi, Hungary
Moshe Leshno, Israel
Rafal Nizankowski, Poland
A. David Paltiel, USA
Allison B. Rosen, USA
Mark Sculpher, UK
Uwe Siebert, Austria
Helmut Sitter, Germany



Visit our site at: www.smdmeurope2008.com



The Society for Medical Decision Making would like to thank the following members for their support of the Lee B. Lusted Student Prize Fund

(Markov Level Continued)

Pareto Level

Joseph King ('06, '07)
Frank Sonnenberg ('06)

Edwards Level

John Wong ('06, '07)

Tversk Level

Michael Barry ('06, '07)
Robert Beck ('07)
Mark Helfand ('05, '07)
William Lawrence ('06)
David Meltzer ('07)
Stephen Pauker ('06)
Mark Roberts ('08)
Joel Tsevat ('06)
Sankey Williams ('06, '07)

von Neumann-Morgenstern Level

Nananda Col ('05, '06, '07)
Dennis Fryback ('05, '06, '07)
David Paltiel ('07)
David Rovner &
Margaret Holmes-Rovner ('05, '06, '07)

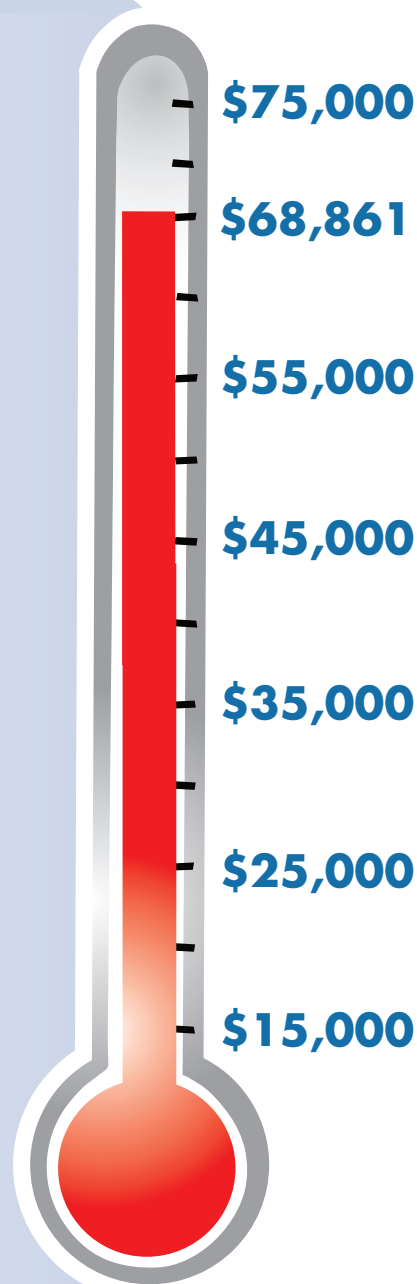
Markov Level

Amber Barnato ('05, '07)
Cathy Bradley ('07)
Dena Bravata ('06)
Scott Cantor ('07)
Phaedra Corso ('06, '07)
Neal Dawson ('05, '06, '07)
Mark Eckman ('06)
Elena Elkin ('07)
Arthur Elstein ('06, '07)
Kathryn McDonald ('07)

Jill Metcalf ('07)
Richard Orr ('05, '06)
Brian Rittenhouse ('07)
Allison Rosen ('07)
Bruce Schackman ('06, '07)
Alan Schwartz ('07)
David Sugano ('07)
John Thornbury ('05)
George Torrance ('05)

Bayes Level

Ahmed Bayoumi ('06)
Randall Cebul ('06)
Rowland Chang ('06, '07)
Ted Ganiats ('05)
Lee Green ('07)
Amit Gupta ('06)
Robert Hamm ('06)
Myriam Hunink ('05, '06, '07)
David Katz ('08)
Kerry Kilbridge ('05, '07)
Sun-Young Kim ('07)
Sarah Knight ('05, '06, '07)
Miriam Kuppermann ('06, '07)
Steven Kymes ('05, '06, '07)
Gillian Sanders ('07)
Marilyn Schapira ('07)
Seema Sonnad ('06, '07)
James Stahl ('06)
Ewout Steyerberg ('06)
Anne Stiggelbout ('06)
Carol Stockman ('05)
Danielle Timmermans ('07)



*Contributions for the period Oct. 2005 - Jan. 9, 2008

Introduction to Board Members

President-Elect



Mark Roberts, MD, MPP is Professor of Medicine and Chief of the Section of Decision Sciences and Clinical Systems Modeling at the University of Pittsburgh, where he also has joint appointments in Health Policy and Industrial Engineering. He also serves as the Associate Director for the Institute

for Clinical Research Education, where he directs the core curriculum for clinicians seeking master's level training in clinical research methods. He received his BA in Economics from Harvard College, and completed Medical School at Tufts while also earning a Master's in Public Policy from the Kennedy School of Government. His entire academic career has been shaped by the Society for Medical Decision Making, attending his first meeting in Boston in 1982 as a 3rd year medical student, and winning the Lee Lusted prize as a fellow in 1989 for the application of Monte Carlo methods to evaluate Markov processes. He has participated in virtually every meeting since (with a few misses during residency) and has served the society in many capacities. He was a member of the nominations committee in 1994, chairman of the membership committee (1999-2001), the short-course co-chair for the annual meetings in 2000 and 2001, the scientific Co-Chair for the annual meeting in 2003, Vice President Elect of the Society in 2001, and Vice President in 2002, where he concentrated on activities of the education committee as that committee's chair. This year, he was Co-Chair of the 2007 meeting in Pittsburgh. In addition, he was an associate editor of *Medical Decision Making* from 1999-2006. His participation in the society has formed the foundation for his research, teaching and his mentoring experiences. Throughout his career he has concentrated on teaching decision sciences and quantitative concepts applied to problems in health and medicine. He taught the introductory decision analysis course and developed and taught the "hands-on" advanced course in decision analysis for the Society's annual meeting for many years, winning the "Best Short Course" award in 2002, and he has co-developed and taught a new course over the past three

years on Markov Decision Processes. In addition, he has taught decision analysis courses for the Society for General Internal Medicine, the American College of Physicians, and the International Society for Pharmacoeconomics and Outcomes Research.

His research has been directed towards developing and enhancing decision analytic methods in order to build models that are more clinically realistic and directed towards clinical and policy decisions. Over the past ten years, he has helped to advance the applications of analytic techniques from Industrial Engineering and Management Science, such as simulation and optimization to problems in health and medicine.

Dr. Roberts will serve as President of SMDM beginning in October 2008.

Vice President-Elect



Dave Sugano is Vice President, Global Health Outcomes Strategies at Schering-Plough Corporation. He graduated from UCLA with a BA in mathematics and MS and Dr.P.H. in biostatistics and epidemiology.

Prior to joining Schering, David directed a research center at SRI International (formerly Stanford Research Institute), and also developed and directed an occupational/environmental epidemiologic research program at Ford Motor Company. His current research interest is in health technology assessments and health economics methodologies applied to new drugs in a variety of therapeutic areas. He has among other things served as a lecturer at the Fuqua School of Business, chairman of the corporate advisory board for the University of Washington School of Pharmacy as well as a reviewer for a number of different journals.

David has been a member of SMDM since 1990. He has served the society as short course instructor, member of the Board of Trustees, Chairman of Membership Committee, on the Search Committee for the Executive Director, and is currently on the Development Committee.

Dr. Sugano will serve as Vice-President of SMDM beginning in October 2008.

New Trustees



Heather Taffet Gold is Assistant Professor of Public Health in the Division of Health Policy at Weill Cornell Medical College in New York City. She graduated from the University of California at San Diego with a BS in Biology (1992), earned an MA in Public Policy Studies from the University of Chicago (1994), and then worked as a health policy analyst for the Physician Payment Review Commission (US Congress) and the American Cancer Society National Government Relations Office. Dr. Gold earned her doctorate in Health Services Research and Policy from the University of Rochester and received a Lee Lusted prize from SMDM in 2002 for her dissertation research. Dr. Gold's research continues to apply econometric and survey methods to analyze the cost effectiveness of and population variation in cancer treatment, as well as the diffusion of new technology. Her methodological interests include the use of econometric modeling to overcome selection bias and applications of geographic information systems to evaluate socioeconomic and geographic disparities in cancer care. Additionally, she works with the NCI-sponsored HMO Cancer Research Network to study social and economic issues related to cancer treatment and health outcomes. Her work currently is supported by an American Cancer Society Mentored Research Scholar Grant.

Dr. Gold has been an active member of SMDM since 1998. She is currently serving her first of two years as Co-Chair of Scientific Review for the annual SMDM meeting. Dr. Gold was previously the Mentoring Program co-coordinator and an active member of the Education Committee (2002-2006). Under her leadership, the Mentoring Program expanded from a one-time activity to include a year-long mentoring program, as well as an informal program to encourage involvement by newer Society members (Meandering Meeting Mentors). Dr. Gold developed and helped run the Career Panel (2003, 2005) and is a panelist for the short course, "How to successfully obtain a career development award."

She has been on the Scientific Review Committee since 2003, including as a subcommittee co-chair (2003-2005), and has also served on the SMDM Nominations Committee (2005) and the Lee Lusted Student Prize Committee (2004, 2006).



Angie Fagerlin is a Research Assistant Professor at the University of Michigan and a Research Health Science Specialist at the Ann Arbor VA HSR&D. She is also a member of the Center for Behavioral and Decision Sciences in Medicine. She graduated from Hope College and received her PhD in experimental psychology from Kent State University.

Angie's research focuses on the role of cognitive biases and risk communication in medical decision making. Her primary interest is applying basic psychological principles to the design and use of decision aids. Much of Angie's work has tested how to best present the risks and benefits of treatments within the context of decision aids. She has also tested the effectiveness (or actually the lack thereof) of living wills and received the "Outstanding Paper by a Young Investigator" award from MDM in 2005 for a paper written on this topic.

Angie first attended SMDM in 2000 and has been a regular attendee of the conference since then. She currently serves on the Publications committee and was on the committee that oversaw the hiring of the current MDM editor. She is also a member of the editorial board of MDM.



Uwe Siebert, MD, MPH, MSc, ScD, Professor of Public Health, is the Chair of the Department of Public Health, Medical Decision Making and Health Technology Assessment at the University of Health Sciences, Medical Informatics and Technology (UMIT) in Austria. He is also Associate Professor of Radiology at Harvard Medical School and he has an adjunct appointment at the School of Public Health and Epidemiology at the University of Munich.

After medical school, Dr. Siebert worked for several

years as a physician in international public health projects. He then earned an MPH at the Munich School of Public Health, and completed an MSc in Epidemiology and a ScD in Health Policy and Management with a concentration in decision sciences at the Harvard School of Public Health. Before he started his faculty position at Harvard Medical School, he was the Director of the Bavarian Public Health Research and Coordinating Center at the University of Munich, Germany, and completed a Visiting Scholarship at the Harvard Center for Risk Analysis.

Dr. Siebert is a member of the 'International Expert Committee advising the Institute for Quality and Efficiency in Health Care (IQWiG) on the Methods for Economic Evaluations in Health Care'. He is the Chairman of the Working Groups 'Health Economics'

and 'Medical Decision Making' of the German Society for Medical Informatics, Biometry and Epidemiology (GMDS). He teaches courses in decision sciences, health technology assessment (HTA), and advanced epidemiologic methods at several universities in Europe and the US. He advises several government agencies, academic institutions and the industry regarding the conduct and impact of health technology assessments on policy and reimbursement decisions. He has authored more than 150 publications including several government HTA reports and textbook chapters for decision analysis.

Drs. Gold, Fagerlin and Siebert have already begun service as trustees for a term ending in October 2008.

Call for Board Nominations

The SMDM Nominations Committee is soliciting potential candidates for officers and trustees. The officers to be elected include President-Elect, Vice President-Elect, Treasurer-Elect, and 3 Trustees.

We invite you to submit the names of SMDM members who you believe would serve the Society well. Self-nominations are encouraged.

The Nominations Committee will consider all submitted names. At least 2 nominees will be selected for

each position to be elected. Upon approval of the slate by the Board of Trustees, the list of nominees will be sent to all SMDM members. Additional nominees then will be accepted by petition, as described by the Society's regulations.

Please submit your nominations to David Meltzer, Nominations Committee Chair, prior to March 28, 2008, or contact him directly if you have any questions regarding the nomination or election process.

Call for Short Courses

WHAT SHORT COURSES DO YOU WANT TO SEE AT THE 2008 SMDM ANNUAL MEETING?

Are there courses we're not teaching at SMDM that we should? Are there courses you have taken (or heard of) that you'd recommend SMDM teach again? Are there courses you are interested in teaching? We want to hear from you. Please submit your topic ideas to the SMDM Short Course Co-Chairs, Ken Smith

(smithkj2@upmc.edu, 412 647-4794, fax 412 246-6954) or Jalpa Doshi (jdoshi@mail.med.upenn.edu, 215-898-7989, fax 215-898-0611) by February 21. **Deadline for short course submission is March 5.**

New Members Feature

The Society for Medical Decision Making would like to extend a warm welcome to its new members. A new members feature will run in each issue, with information on individuals that joined the Society in the preceding quarter. The list will help current members get to know the names of future committee and board members, as well as future presidents and vice-presidents. Once again, welcome to you all!

New Regular Members

Robert Boer	Pfizer, Inc.
Romsai Boonyasai, MD	Johns Hopkins University
Chung-Chou Chang, PhD	University of Pittsburgh
Peggy Crawford, PhD	Cincinnati Children's Hospital Medical Center
Cham Dallas, PhD	University of Georgia
Dana Grzybicki	Sewickley, NJ
Brett Hauber, PhD	RTI Health Solutions
A. Patrick Jonas, MD	Family Health Connections, Inc.
Jason Jones, PhD	Chatham, NJ
Stanley Shih-Chen Kuo, RPh, MSCP	University of Pittsburgh Diabetes Institute
Wendy Leng, MD	University of Pittsburgh
Jim Levin, MD, PhD	Children's Hospital of Pittsburgh
Elizabeth Masters, MPH	Pfizer, Inc.
Alec Morton, BSc, MSc, PhD	Department of Management, London School of Economics
Ipek Ozer-Stillman, BScEng, MScEng	United BioSource Corporation
Stephen Palmer, MSc	Centre for Health Economics, UK
Arwen H. Pieterse, PhD	Leiden, Netherlands
Joanne Protheroe, MB,ChB;MRCGP; MRes;Ph	National Primary Care Research and Development Centre, UK
Eric Z. Silfen, MD	Philips Research
Timothy Victor, Ph.D.	Endo Pharmaceutical
Stacie Waldman, MPH	Massachusetts General Hospital
Carol June Ewan Whyte	Core-Main Medical Center

New Trainee Members

Eran Bendavid, MD	Stanford University
Matan J. Cohen, MD, MPH	Hadassah-Hebrew University Medical Center
Catherine Fullerton, MD,MPH	Harvard Medical School
Aniket Kawatkar,	Artesia, CAB Pharm, MS
John Limouse, BA	University of Pennsylvania School Of Medicine
Luis Jose Novoa, MSC	Universidad De Los Andes, Colombia
Georges Potworowski, MA	University of Michigan
Shawn Standbridge, DO, MBA	University of Cincinnati
Dana Teltsch, MSc	McGill University
Dr. Harindra Wijwysundera, MD	Toronto, Ontario

Members in the News

By Christa B. Teston

Dr. Anirban Basu, Assistant Professor in the Department of Medicine at University of Chicago, was awarded an Alan Williams Health Economics Fellowship from the University of York in December 2007 for a project that aims to explore joint distributions of potential outcomes in treatment evaluation and its implications for decisions about cost-effectiveness and coverage. Generally, Dr. Basu's research interests include cost-effectiveness of medical interventions, decision analysis methodology, health econometrics, and applied health services research. Dr. Basu will be visiting the University of York for three months in the spring of 2008. Way to go, Dr. Basu!

Dr. Murray Krahn, a scientist in the division of clinical decision-making and health care at Toronto General Research Institute, was presented the Dr. David Sackett Senior Investigator Award by the Canadian Society of Internal Medicine at their Annual Scientific Meeting for his work on "Three Scientific Paradigms in Health Technology Assessment". Some of the objectives of Dr. Krahn's research include the exploration of current health technology assessment initiatives in Canada, and an investigation into the relationship between clinical epidemiology, decision modeling and, health economics and ethics. The Senior Investigator Award is supported by an unrestricted educational grant from Merck Frosst/Schering Pharmaceuticals. Hats off to you, Dr. Krahn!

Congratulations to **Dr. Katia Noyes**, who has recently been promoted to an Associate Professor of Community and Preventive Medicine position at the University of Rochester School of Medicine. Dr. Noyes' research interests include studies in cost-effectiveness in medicine and health, health services utilization in geriatric illness, quality of life assessment, medical decision-making, and analysis of clinical trials. Dr. Noyes has been a member of SMDM since 2000. We congratulate you, Dr. Noyes!

Dr. Ellen Peters, a Senior Research Scientist at the Decision Science Research Institute in Eugene, Oregon, was appointed as a Voting Member of the newly formed Risk Communication Advisory Committee for the Food and Drug Administration. The Committee will counsel the FDA on how to strengthen the communication of risks and benefits of FDA-regulated products to the public. Dr. Peters conducts research areas including decision making, affect and emotion, risk perception, numeracy, and aging, and is particularly interested in the development and application of psychological theory to problems in health and financial domains. Great news, Dr. Peters!

Please email Colleen Vrbin at cvrbin@prhi.org for any good news about yourself or another SMDM member's great achievements! We encourage nepotism for this column!!

UPCOMING DEADLINES

Euro Abstract Submissions - February 15

Nominations for SMDM Awards - March 1

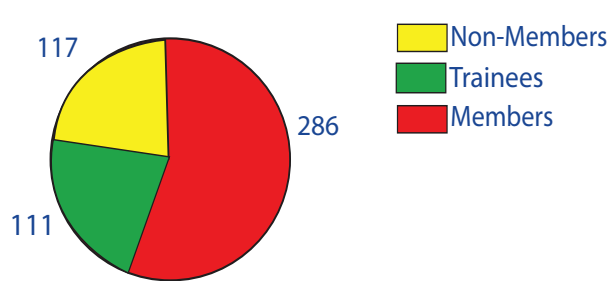
Short Course Submissions - March 5

Board Nominations - March 28

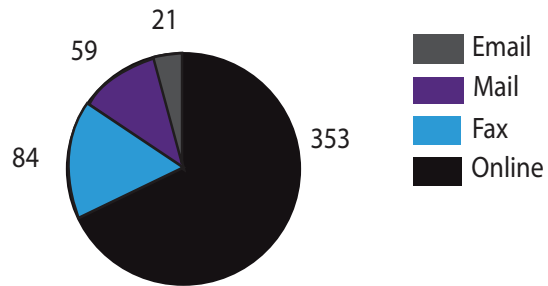
SMDM Abstract Submission - June 6

Fun Facts

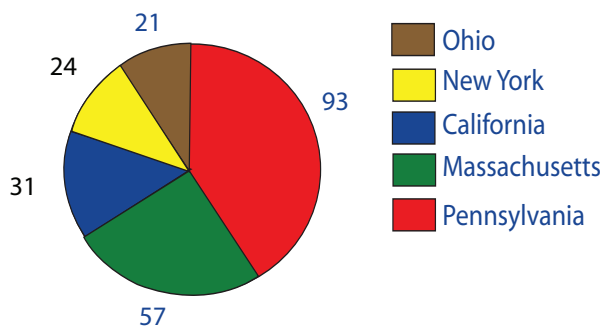
29th Annual Conference Registration Summary



Registration Counts

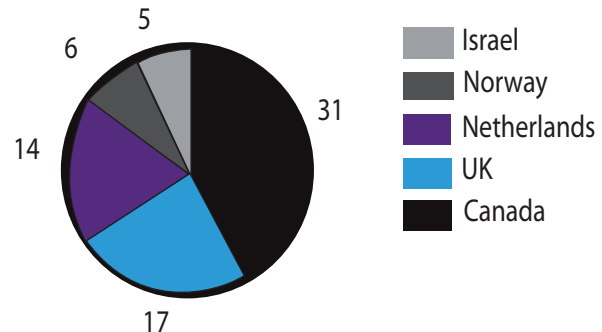


How Did People Register?

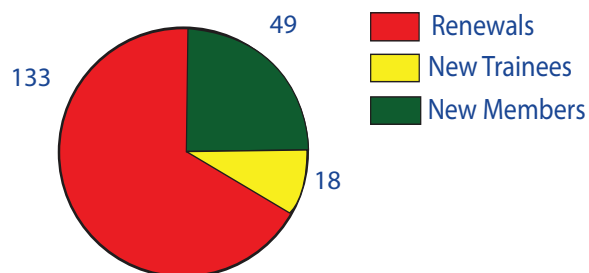


U.S. Attendance

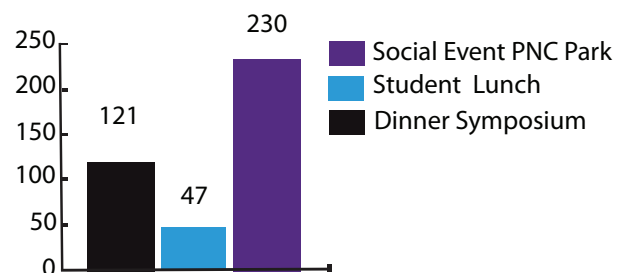
(States with a fewer than 20 not represented)



International Attendance



Membership at time of Registration



Event attendance

General SMDM News



As a reminder, there are several important deadlines coming up.

ESMDM abstract deadline has been extended to February 15, 2008

2008 Call for Award Nominations are due by March 1, 2008

Call for Board Nominations are due on March 28, 2008

For more information, please go to www.smdm.org.

Discounted registration for trainees

Great news! SMDM has decreased membership rates for trainees in 2008. The rate will be \$60 instead of the former \$120. Register today at www.smdm.org!

Call for Additional Associate Editors for the Newsletter

We already have a new associate editor, Christa Teston, who will be helping to continue to make the SMDM newsletter a useful and interesting publication. Past editors have taught us that sharing the load is optimal. Anyone else interested in becoming involved should contact either Ava at a.john.baptiste@utoronto.ca or Colleen at cvrbin@prhi.org. Thank you!

Keep a lookout for...

In the Spring Newsletter, look for more comments from award recipients from this past SMDM annual meeting as well as a call for abstract details.

Also in the next newsletter, look for an introduction to one of the new Associate Editors, Christa Teston.

Look for a summary from Malcolm Gladwell based on his keynote speech in an upcoming issue of MDM.

Note from the Editors:

We will be starting a new feature in the next issue about opportunities for service, with chairs of various committees and activities writing about their needs for help. Kathryn McDonald will be chairing the Finance Committee for the next term and welcomes hearing from anyone with investment background. She can be reached at kathy.mcdonald@stanford.edu.

Position Title:

Sr. Scientist - Office of Clinical Affairs

Organization Name:

Blue Cross Blue Shield Association, Chicago, Illinois

Job Description:

The Blue Cross and Blue Shield Association (BCBSA) is a membership organization of independent health insurance companies and is the strategic leader behind the Blue Cross Blue Shield brand, one of the most recognized brands in America and the choice of more than 99 million Americans for their health care coverage. All 39 independent Blue Cross Blue Shield Plans across the country and internationally depend on the BCBSA's consulting and operational support.

BCBSA now has a great career opportunity within the Technology Evaluation Center (TEC). Founded by BCBSA, TEC pioneered the development of scientific criteria for assessing medical technologies through comprehensive reviews of clinical evidence. TEC has been recognized nationally for leadership in producing evidence-based systematic clinical reviews, and is designated as one of 14 Evidence-based Practice Centers (EPCs) for the federal Agency for Healthcare Research and Quality (AHRQ). Visit TEC at <http://www.bcbs.com/tec/> for more information.

Responsibilities include:

This clinically oriented project management position is responsible for authoring complex evidence-based assessments of the medical literature for new medical diagnostic and therapeutic technologies including pharmaceutical agents. Depending on prior experience, this position may involve mentoring and supervision of other TEC staff. Please note that this position is not in computer information technology.

The qualified candidate will have:

- Doctoral-level preparation in the clinical, biomedical or biostatistical sciences or evaluation research.
- Five years' experience in evidence-based analysis of clinical or biomedical research.
- Strong scientific writing skills and proficiency in the analysis, synthesis and reporting of clinical research as demonstrated by production of publishable scientific papers.
- Ability to communicate the results of clinical research to a variety of audiences including clinical researchers and practitioners and non-clinical BCBS Plan management, legal and policy staff.
- Prior experience working on topics related to genetics/genomics or oncology (diagnosis and treatment) is preferred.

Contact:

BCBSA offers career advancement opportunities, work and family balance, competitive salaries, a diverse workplace, business casual dress, in-house fitness center and an attractive flexible benefits package that includes medical and dental, vision and a 401(k) plan.

Please apply online by going to:

https://bcbsa.igreentree.com/CSS_External/CSSPage_Welcome.asp and search for job number 07-161-.
www.BCBS.com. EOE.

Position Title:

Associate Director, Office of Clinical Affairs

Organization Name:

Blue Cross Blue Shield Association, Chicago, Illinois

Job Description:

The Blue Cross and Blue Shield Association (BCBSA) is a membership organization of independent health insurance companies and is the strategic leader behind the Blue Cross Blue Shield brand, one of the most recognized brands in America and the choice of more than 99 million Americans for their health care coverage. All 39 independent Blue Cross Blue Shield Plans across the country and internationally depend on the BCBSA's consulting and operational support, enabling them to gain a competitive edge in their respective markets. BCBSA now has a great career opportunity available at our downtown Chicago headquarters.

Responsibilities include:

This leadership position in evidence-based clinical medicine is responsible for authoring systematic reviews as a key member of the Technology Evaluation Center (TEC) team (<http://www.bcbs.com/tec/>). This position also involves working closely with medical directors and medical policy staff from the Blue Cross and Blue Shield Plans.

The qualified candidate will have:

- MD or DO degree with current medical licensure.
- Five plus years' experience in the analysis of clinical or biomedical research, including at least three years in technology assessment and evidence-based systematic reviews.
- Three years of project management experience involving direct supervision of professionals
- Proficiency in the analysis, synthesis and reporting of clinical research.
- Ability to communicate the results of clinical research to a variety of audiences, including clinical researchers and practitioners and non-clinical management, legal and policy staff in Blue Cross Blue Shield Plans.
- Prior health plan or health care administrative experience is desirable.

Contact:

BCBSA offers career advancement opportunities, work and family balance, competitive salaries, a diverse workplace, business casual dress, in-house fitness center and an attractive flexible benefits package that includes medical and dental, vision and a 401(k) plan.

Please apply online by going to:

https://bcbsa.igreentree.com/CSS_External/CSSPage_Welcome.asp and search for job number 07-1617. www.BCBS.com. EOE.

Organization Name:

Health Services Researcher in Measurement, Psychometrics, and Outcomes Research
Rochester, Minnesota

Job Description:

The Division of Health Care Policy and Research (HCPR) has an opportunity for a doctoral prepared (Ph.D., Sc.D., Dr.P.H., etc.) health services researcher who has considerable quantitative skills in measurement, psychometrics, or instrument development.

HCPR fosters a collaborative multidisciplinary team environment. High level expertise already exists in economics, biostatistics, health services research, operations research (OR), and quantitative methods in the social sciences. This position will supplement existing skills at HCPR by focusing on new measures of quality and safety; and on the development of measures applicable to assessing patient and organizational outcomes in both naturalistic and experimental settings. We are particularly interested in applicants who have experience working with behavioral data and measurement. An additional plus would be experience and interest in exploring Bayesian approaches to measurement and statistical summary (meta-analyses). Our staff is expected to act as consultants to clinicians in practice and to support research and practice improvement as well as to develop independent research careers, including peer-reviewed publication.

We are seeking applicants who have interests and educational experiences that indicate potential success in the applied research mentioned; we are less interested in disciplinary background. This position is fully funded. Nevertheless, ability to generate external funding is a definite plus. The person hired for this position will be encouraged to pursue a collaborative research program with HCPR staff and clinicians as well as participate in the education of clinicians enrolled in both training and degree granting programs.

This position will work closely with faculty of HCPR and the Mayo Knowledge and Encounter Research Unit in the creation of a Knowledge Translation Research Unit (K-TRU), a core lab of the NIH-funded Mayo CTSA that will significantly contribute to translational research and innovation at Mayo Clinic.

Faculty appointment will be at an entry to mid-career level. The salary is competitive with an excellent benefit package. HCPR and Mayo Clinic actively support the career and professional development of faculty.

Mayo Clinic is a nonprofit organization that integrates research with clinical practices and education in multicampus environment. Mayo offers an attractive benefit package. Salary will be determined by the successful candidate's experience.

Contact:

Applications, including curriculum vitae and bibliography, summary of past accomplishments, and the names and e-mail of references, should be sent to:

Brian Nelson
Research Administrator
Mayo Clinic
Plummer 5
200 First Street SW
Rochester, MN 55906

Position Title:

Faculty Positions

Organization Name:

THE UNIVERSITY OF MICHIGAN

Department of Industrial and Operations Engineering



Job Description:

The Department of Industrial and Operations Engineering at the University of Michigan invites applications and nominations for faculty positions beginning September, 2008. We seek outstanding candidates for faculty positions in the following areas:

- Assistant/Associate/Full Professor in Health Systems Engineering. Expertise and primary research focus in healthcare systems including delivery, management and/or quality but exceptional candidates in all areas of health engineering, broadly construed, are encouraged to apply.
- Associate/Full Professor in Financial Engineering (FE). Expertise in financial, energy, or insurance markets, risk management, and/or engineering of financial systems is especially welcome but exceptional candidates in all areas of FE, broadly construed, are encouraged to apply.

Candidates must have a Ph.D. and must demonstrate a strong commitment to high-quality research and evidence of teaching potential. Experience related to manufacturing and/or service operations is desirable. Candidates for Associate or Full Professor should have a commensurate record of research publications and are expected to provide organizational and research leadership, develop sources of external funding, build relationships with industry, and interact substantively with faculty colleagues.

Candidates should provide (i) a current C.V., (ii) a list of references, and one page summary statements describing: (iii) career teaching plans; and (iv) research plans. The application review process will begin on December 1, 2007, but the positions will remain open and applications will continue to be reviewed until appointments are made.

We seek candidates who will provide inspiration and leadership in research and actively contribute to teaching. We are especially interested in candidates who can contribute, through their research, teaching and/or service, to the diversity and excellence of the academic community. The University of Michigan is responsive to the needs of dual career families.

Contact:

Send inquiries and responses to:

Professor Lawrence M. Seiford, Chair
Department of Industrial and Operations Engineering
University of Michigan
1205 Beal Avenue
Ann Arbor, MI 48109-2117

The University of Michigan is a non-discriminatory, affirmative action employer.



i3 Innovus services the biopharmaceutical industry to help pharmaceutical companies make scientific and commercially-driven decisions about their products. With recognized experts in late phase research, health economics and outcomes, data analysis, and strategic consulting, i3 Innovus delivers the scientific evidence that helps products succeed in the real world. As a UnitedHealth Group company, i3 Innovus is part of a worldwide health care service organization that uses innovation, integrity, and commitment to prepare for the future. It's a rare combination for success that only a career with i3 can provide.

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We currently require:

Sr. SAS Research Analyst: Boston or Minnesota

The Sr. Analyst is involved in all aspects of research activities contracted by i3 Innovus. This includes responsibility for technical support and planning and performing economic/outcomes evaluations in health care research, and analysis and reporting of studies. Designing and implementing the technical components of health economic studies including proposal development, analysis and interpretation. Responsible for using SAS to analyze large medical claims database files (PC and UNIX) to support pharmacoeconomic modeling efforts. Preparation and quality assurance of study deliverables, including models, final reports, manuscripts, posters and presentations. Performs programming, statistical analyses and/or modeling and prepares required graphs, tables and figures using the appropriate software tools.

Experience Required:

Training and/or experience in the health care delivery field. Post graduate degree in a related field and a minimum of 3 years of relevant experience. 2 years of SAS programming experience required. Training and/or experience in health economics and/or outcomes research. Training and/or experience with the following software as appropriate: statistical, database, spreadsheet, decision support, graphics and text processing. Training and/or experience in computer programming. Associate Director: Boston, Reston, VA or Basking Ridge, NJ

The Associate Director will oversee the execution of complex pharmacoeconomic evaluations, including construction of disease models used for cost-effectiveness and budgetary impact analyses for major pharmaceutical clients. The Associate Director position combines senior-level project oversight with front-line responsibility for client relations, project timelines, and deliverables. This high-visibility role provides excellent opportunities for collaboration with thought leaders in the field, and for publication and presentation of study findings.

Experience Required:

Post-graduate degree in a related field plus 7 years directly relevant experience (or PhD and 5 years). Training and experience in advanced health economics and outcomes research methods. Familiarity with clinical and epidemiologic research methodology. Training and experience with statistics, quantitative methods and/or computer programming. Experience with business development, client relations and project management. Track record of publications and presentations. Proficiency in Microsoft Office (e.g., Access, Excel, Word); experience with statistical software (SAS, SPSS), and Visual Basic for Applications a plus

Senior/Project Manager: Boston or Minnesota Reporting to the Director, Health Economic Modeling, the Project Manager/ Senior Manager will manage and executing complex economic/outcomes evaluations, and contribute to business development.

Project Manager – Post-graduate degree in a related field plus 3 years relevant experience.

Senior Manager – Post-graduate degree in a related field plus 5 years experience (or PhD and 3 years)

Training and/or experience in advanced health economics and outcomes research methods. General knowledge of clinical and epidemiologic research methodology. Training and/or experience with statistics, quantitative methods and/or computer programming

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Statistical Research Associate II/III #KSW-21046

The Public Health Sciences Division of the Fred Hutchinson Cancer Research Center in Seattle is recruiting a Statistical Research Associate (SRA). The SRA will partner with project investigators to address research questions in prostate cancer prevention, screening, and prognosis with emphasis on statistics and simulation modeling. The SRA will analyze patterns of cancer care, support development of public health policy and cost effectiveness models, and provide statistical consulting for biomarker development studies.

Many analyses will use statistical software, while model development or implementing new statistical methods may use compiled languages. The SRA will also document and maintain project datasets and may co-author manuscripts and present posters or abstracts at conferences.

Major duties:

- Collaborate with investigators to conduct analyses of patterns of care and cancer trends
- Design and implement models simulating population interventions for disease control

- Project economic and clinical outcomes for cancer prevention and screening programs
- Implement novel analysis methods and statistical algorithms
- Summarize methods and results in written and graphical form

A master's degree in a related quantitative field (e.g., statistics, mathematics, health economics) with enthusiasm for using these skills for public health research is required, as are excellent computing skills and experience programming in R or other statistical software. Knowledge of C, Python, or another object-oriented language is highly desirable. Excellent organizational skills, the ability to work independently, and excellent written and verbal communication skills are essential to success in this position.

Full time position. Salary DOE + excellent benefits

**To apply, select "Apply Now" on our jobs web page:
<http://www.fhrc.org/about/jobs/>. You will be asked to paste in a non-formatted version of your cover letter and resume.**

The Fred Hutchinson Cancer Research Center and the Seattle Cancer Care Alliance are equal opportunity employers, committed to workforce diversity.

Position Opening

Assistant or Associate Professor
Center for Primary Care and Outcomes Research
Stanford University School of Medicine

The Center for Primary Care and Outcomes Research (PCOR) at Stanford University School of Medicine (<http://healthpolicy.Stanford.edu>), in conjunction with the departments of medicine and of health research and policy, seeks an assistant or associate professor in the University Tenure Line with expertise in medical decision sciences, cost-effectiveness analysis, including modeling of chronic disease.

PCOR is closely affiliated with Stanford's Center for Health Policy and works with multiple departments throughout the university. We are seeking individuals with demonstrated interest and expertise in medical decision sciences, or closely related areas such as cost-effectiveness analysis, cost-benefit analysis or disease modeling. An interest in evaluating health interventions both in international and domestic settings is desirable. Applicants should have a Ph.D. degree or an M.D. with Ph.D.-level expertise in a discipline related to medical decision sciences, such as medical decision analysis, economics, management science, statistics or biomedical informatics.

PCOR is a multidisciplinary group with programs in Primary Care Policy and Practice Advancement, Clinical Decision Making and Guideline Development, Medical Outcomes, and Medical Technology Assessment. The successful candidate may

participate in any of these programs and in the Center for Health Policy but is expected to focus on the Program in Clinical Decision Making and Guideline Development. Further information about PCOR and the Center for Health Policy can be found at <http://healthpolicy.stanford.edu>.

Stanford University is an equal opportunity employer and is committed to increasing the diversity of its faculty. It welcomes nominations of and applications from women and members of minority groups, as well as others who would bring additional dimensions to the university's research, teaching and clinical missions.

To be considered for this position, please send a letter describing your interest, your curriculum vitae, and the names and addresses of three references to:

Mary K. Goldstein, MD, MS
Center for Primary Care and Outcomes Research and Center for Health Policy
Stanford University School of Medicine
C/O Mary Herda
117 Encina Commons
Stanford, CA 94305-6019
PHONE: 650-723-1803
FAX: 650-723-1919
e-mail: mherda@stanford.edu



Senior Researcher/Health Economist

i3 Innovus, a division of Ingenix, provides a scientific view of the marketplace, giving an expert perspective to help pharmaceutical companies make smart decisions about their products. With recognized experience in health economics and outcomes, data analysis, and strategic consulting, i3 Innovus delivers the scientific evidence that helps products succeed in the real world. As a division of Ingenix, which is a UnitedHealth Group company, i3 Innovus is part of a worldwide health care service organization that uses innovation, integrity, and commitment to prepare for the future.

Apply your research and analysis experience to this senior-level position with our fast-paced team. While focused on health economics and outcomes research studies, you would enjoy unmatched visibility, variety and advancement potential with a Fortune 100 healthcare leader.

Major Responsibilities

- Provide scientific leadership and project management on outcomes research and health economic studies
- Conduct or oversee econometric/statistical analyses
- Disseminate study results via manuscripts, reports, and conference presentations
- Manage client relationships
- Manage study budgets and timelines
- Provide internal review of deliverables including proposals, reports, manuscripts

Requirements

- Demonstrated applied econometric experience is strongly desired
- Doctoral degree in health services research (HSR), health economics, or related field; or a master's degree plus two years of research experience
- A minimum of two years experience with SAS, STATA, or other analytic software.
- Excellent oral and written communication skills are required
- Experience with health care claims data preferred
- Additional degree in statistics a plus but not required

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