Emory forms partnership with St. Joseph's Hospital

Saint Joseph’s is a 410-bed, acute-care hospital founded in 1880. Its medical staff includes 750 physicians.

Earlier this month, Emory Healthcare and Saint Joseph's Hospital announced a partnership between the two systems that will form the largest health care system in the state.

From the Interim EVPHA

What's in a name?

Well, in the case of the newly christened Emory-Children's Pediatric Research Center, the answer is "a lot." Earlier this month, Woodruff Health Sciences Center (WHSC) and Children's Healthcare of Atlanta leadership officially announced the name of their new collaborative research center, but the name means much more than words in a press
The arrangement establishes a joint operating company (JOC) that would give Emory Healthcare a majority ownership of Saint Joseph's, with a 51/49 percentage split, and allow the joint health care system to expand services. Saint Joseph's will retain involvement in governance of the JOC, including super majority voting rights on certain issues critical to Saint Joseph's mission and values.

The arrangement is subject to review by the Catholic Archbishop of Atlanta, and Saint Joseph's Hospital is anticipated to continue as a Catholic facility sponsored by the Sisters of Mercy.

"At our cores, both Emory Healthcare and Saint Joseph's Hospital share compatible values and a common purpose: to provide outstanding health care to North Georgia and the state," said John Fox, president and CEO of Emory Healthcare. "Combining the excellence of our physicians, skill and experience of our clinical staffs, and promise of our research capabilities only strengthens what we offer patients."

"While complementing each other well, each organization brings unique features to the JOC that will enable us to better care for our community, while positioning us to meet the growing challenges of health care and industry reform," said Paul Johnson, CEO of Saint Joseph's Hospital.

The financial details of the transaction are not being publicly disclosed at this time, but the governing boards of both parties have reviewed the terms of the transaction in detail and have determined that each party has contributed adequate and fair consideration for its interest in the proposed new company.

Together, Saint Joseph's and Emory will submit formation documents to the Georgia Attorney General and the Federal Trade Commission for review. Regulatory reviews will likely take four to six months at a minimum. As such, any changes in ownership likely will not take place until mid to late 2011. This transaction is also subject to approval by certain Catholic entities.

Rollins/Tech receive $8 million to study health effects of air pollution

The Woodruff Health Sciences Center and Children's have been working together to build a new pediatric center that will significantly enhance the care we provide to children in need throughout the region by bringing together the number one children's health provider in the nation with our outstanding faculty across multiple disciplines and our distinctive programs in education, research, and patient care. This exciting new research center is a crucial part of that collaboration.

Through our joint fundraising efforts, along with the generosity of the Whitehead and Woodruff Foundations and others, WHSC and Children's are developing a 200,000-square-foot research building designed to accommodate 65 principal investigators, with 115,000 gross square feet dedicated to pediatric research. We expect to break ground on the Haygood Drive site this summer.

The building will be connected to the Emory-Children's Center by a bridge (see below), and it will also bridge our two organizations' programs and services. Many of the leading pediatric clinicians and researchers from across the country will be drawn to Atlanta by the strength of our collaborative pediatric research center, making the Woodruff Health Sciences Center and Children's Healthcare of Atlanta the destinations of choice for cutting-edge and compassionate pediatric care.

Please let me know your thoughts.
You are sitting in your car in early morning rush hour, nervously tapping your hand on the steering wheel as you watch the minutes tick by on the clock. You don't need anyone to tell you that traffic congestion and commuting times in metro Atlanta have grown worse; you feel it every day. But what are all those traffic emissions doing to your health?

Paige Tolbert wants to find out. Tolbert, chair of environmental health in the Rollins School of Public Health, is co-director of the new Southeastern Center for Air Pollution and Epidemiology (SCAPE), established recently by an $8 million, five-year grant from the Environmental Protection Agency to study the public health impacts of air pollution. The other co-director is Armistead (Ted) Russell, of the School of Civil and Environmental Engineering at Georgia Tech. The center is one of four national clean air research centers funded by EPA.

Researchers at Rollins will analyze data linking air quality with health endpoints in children and adults, including birth outcomes, asthma, and cardiac illness. Air quality engineers and scientists from Georgia Tech will develop new modeling techniques to identify and track contaminants in the air and mixtures of these contaminants suspected of having adverse health effects. Among the planned projects is an intensive study of metro Atlanta commuters to examine exposure to complex particulate mixtures during auto commuting and mechanisms of acute cardiorespiratory outcomes. The study will be among the first to measure several highly sensitive biomarkers of oxidative stress in relation to air pollution exposure.

SCAPE researchers also will study air quality and acute health outcomes in five U.S. cities to understand how differences in the mix of air pollutants, weather, population susceptibility, and other factors explain differences in the association between air pollution and cardiac and respiratory illness across the cities. The results will clarify the combined impact of these factors on acute cardiorespiratory morbidity across the United States.

"We hope to make major breakthroughs in understanding health effects of ambient air pollution," says Tolbert. "We anticipate that we'll achieve insights into what aspects of the air pollution mixture are most harmful and how the pollutants act together, information that can be used to target control measures to protect the public's health."

$5 million gift to Winship for breast cancer research and screening

Research bridge adds gateway to campus

Much of the work in the newly named Emory-Children's Pediatric Research Center will take place in a building expected to begin construction this summer. A two-level bridge (above), with offices and "dry" research space, will connect the new research building to the current Emory-Children's Center and will serve as a new gateway to campus from the southeast. Emory worked with officials from DeKalb County to be able to construct this bridge—the first structure designed for occupancy to be built over a county road.

New rankings

Following are newly reported numbers for Emory schools and programs in U.S. News & World Report's latest guide to school rankings:

• Public health, 6 (last rank, 7)
• Nursing, 21 (last rank, 26)
• Medicine, 21 for research (last rank, 20) and 33 for primary care (last rank, 25)
Emory’s Winship Cancer Institute recently received $5 million from the Wilbur and Hilda Glenn Family Foundation to establish the Glenn Family Breast Program at Winship.

The Winship breast team will use the gift in a number of ways:

• expand breast cancer tumor biobanking efforts and leverage collaborations with the Avon Comprehensive Breast Center at Grady and Emory University Midtown Hospital

• increase screening efforts in women at high risk for breast cancer

• provide seed grants to support the work of young investigators in four areas: new therapeutics, early detection, health disparities, and imaging

• contribute to new clinical trials

• strengthen Winship’s survivorship program to include an online database to match patients and caregivers with trained peer partners who offer support and guidance throughout treatment

• enhance Winship’s community outreach in cancer screening and early detection

Up-and-coming Emory technology

In the past 20 years, Emory has brought 27 products to market and earned more than $788 million in licensing revenue *(see profile below)*. Emory’s Office of Technology Transfer (OTT) recently selected four groups that are standouts and primed to add to those products and licensing revenue counts. OTT honored them at its fifth annual celebration of innovation and technology.

Start-up of the Year: Cardiothoracic surgeon Vinod Thourani and colleagues from Georgia Tech have started Apica Cardiovascular to develop a proprietary “access and closure” device that provides access to a beating heart during surgery without loss of blood. By eliminating blood loss that occurs with conventional sutures, the device improves safety, decreases procedure time, and patient costs. Last year Apica received $5 million in venture capital funding.

Match Day 2011

More than 100 Emory students gathered at noon on March 17 for Match Day, joining about 16,000 students who applied for residency positions at U.S. teaching hospitals through the National Residency Match Program (NRMP) that annually matches students with residency programs. Of the 128 Emory graduating seniors, 125 participated in the NRMP; 39 will remain at Emory for training. Emory students also be training at institutions such as as Yale, Harvard, Hopkins, Duke, and Stanford. Watch video.

Now it's official

As of March 1, Emory Johns Creek Hospital is now fully owned by Emory Healthcare, which purchased Hospital Corporation of America’s share of the facility. Over the next three months or so, EJCH employees will be transitioned over to the Emory Healthcare system. The north metro area hospital is a 110-bed acute care facility with 635 employees and more than 700 physicians, including 247 Emory faculty. More info.
Deal of the Year: Rafi Ahmed, director of the Emory Vaccine Center, and immunologist Jens Wrammert, for their flu antibodies deal. Ahmed and Wrammert identified more than 400 antibodies with broad cross-reactivity that could be used to develop a possible vaccine against various strains of flu.

Innovation of the Year: Urologist Niall Galloway and his son, James Galloway, for their periurethral injection technology for treatment of incontinence. An injection with a bulking agent is the conventional treatment for incontinence, but additional injections are often needed because of needle puncture into the urethral epithelium. The new technology provides a guidance system for the injection by dividing the urethra into three regions to allow three injections that will prevent leakage from one region to another. The Galloways' original prototype was fashioned out of a knitting needle, Styrofoam, and PVC pipe. OTT connected the Galloways with an engineering group to make the final prototype.

Significant Event of the Year: Pediatrician John Lollar’s therapeutic for acquired hemophilia A entered phase 3 trials in December. The therapeutic is expected to stop bleeding in patients with acquired hemophilia A, for which no effective drug exists. The therapeutic went through a number of licensing deals over the past 12 years but now is advancing in its development with Inspiration Biotherapeutics.

Nursing marks a milestone

Administrators, faculty, staff, and students in the Nell Hodgson Woodruff School of Nursing raised their Cokes and Sprites in a recent noonday toast in honor of the school's having surpassed its $20 million campaign fundraising goal ahead of schedule.

But the school isn’t resting on any laurels, says Emory trustee and alumnus J. David Allen, who is co-chairing nursing's campaign with his wife Beverly, also an alum. “Nearly 80% of our students need financial aid. As long as there are initiatives that need additional resources, we have a job to do.”

The school's support has come from more than 3,000 individuals, corporations, and

New doctorate in environmental health sciences

A new doctorate this fall in environmental health sciences is being offered this fall. The program will bridge the interdisciplinary areas of populations- and laboratory-based toxicological and analytical chemistry research. Gary Miller, associate dean of research in Rollins School of Public Health, directs the program.

Radiology updates its image

The med school's Department of Radiology has officially changed its name to the Department of Radiology and Imaging Services to better describe its current imaging technology.

Notable

Elizabeth Buffalo (Yerkes National Primate Research Center) received a $50,000 Troland Research Award for her study of the hippocampus and the neural basis of memory.

John Fox, president and CEO of Emory Healthcare, was elected to the board of trustees of the Georgia...
Match-, money-, market-maker

Todd Sherer, director of the Office of Technology Transfer (OTT), sometimes describes his office as a dating service, matching Emory scientists and their discoveries with the industry personnel who can get these discoveries to market.

Over the past two decades, such matches have resulted in more than $788 million in licensing revenue from drugs, diagnostics, devices, and consumer products. This income subsidizes research and education, including new initiatives, buildings, and—particularly enticing to researchers—unrestricted funds for labs or projects involved in the discovery. The researchers themselves also get a share.

The impact on humanity is even greater. Take, for example, the Emory Cardiac Toolbox, software developed by Emory nuclear medicine expert Ernest Garcia, which helped revolutionize diagnosis of heart disease by enabling clinicians to better interpret images from cardiac imaging technology. This still-evolving collection of software is used in 4 million heart imaging tests a year. Or consider one of the largest academic licensing and royalty deals in history: the development and commercialization of HIV/AIDS drugs discovered by Ray Schinazi and Dennis Liotta. More than 90% of Americans and Europeans on antiretroviral therapy for HIV, and thousands more around the world, take at least one of these drugs, estimated to have saved more than 3 million lives.

There are currently 27 licensed therapeutic products in the marketplace based on Emory discoveries and another 12 in various stages of development.

Here’s how the process works.

Getting players ready—First, Sherer’s team connects with Emory researchers whose work might have commercial potential. Next, the team persuades the researcher to disclose enough information so office interns, many of them postdocs, can scour the scientific and patent literature to see what already is available. If the discovery still looks promising, the OTT attorney applies for patent protection.

Seeking out suitors—Patented discoveries then are marketed on the OTT website, in various technology listings on the web, or directly to companies whose research and development programs overlap with the discovery.

Negotiating the deal—What Sherer and his team are selling is not the discovery itself but rather a license to do the necessary research and development to move it to market. Emory may have to invest as much as $100,000 in patent protection alone as part of the process of getting a discovery to this point; a big pharmaceutical company may then spend...
$800 million to get a new drug developed, tested, and approved or tens of millions to get a new medical device in production. 

Creating a start-up—Sometimes no interested corporate partner can be found, so Emory decides to create a company itself. Thus far, Emory has spun off 51 such start-ups.

Changing times—The Emory OTT was established in the mid-1980s, shortly after the Bayh-Dole Act allowed universities to take ownership of their own inventions. A little slow out of the starting gate, Emory has more than made up for lost time. Since Sherer arrived in 2003, his office's budget has grown to $3.5 million, the staff from eight to 20 (mostly case managers and licensing associates), and the track record to roughly 40 successful agreements per year. Sherer himself is currently president-elect of the Association of University Technology Managers.

Meanwhile, scientific achievement has burgeoned. In a recent article in New England Journal of Medicine, Emory ranked fourth among federally funded research institutions for discovery of new pharmaceuticals and vaccines, bested only by big hitters such as NIH, the University of California system, and Memorial Sloan-Kettering Hospitals.

The mindset of researchers everywhere also has changed. When Sherer first entered the field 20 years ago, department chairs considered tech transfer at best a distraction from the real work of publications and grants, at worse tainted money. Today scientists and administrators recognize their obligation to get work to the public as quickly as possible—and the potential for economic benefit (slim, infrequent, but nonetheless real). Whereas Sherer once spent time assuaging doubts, he now spends more time managing expectations, including why Emory cannot patent and market all of the many good discoveries made here. It's a good problem for a matchmaker.