Beer for Endurance Exercise Recovery

By Christine Podolak, MS

Could a beer really have a positive impact on your body after high endurance running? The research team took a road trip to the KEYS100 Ultramarathon event in Key West, FL to find out. Although enjoying a beer after an ultramarathon sounds trivial, exercise-associated hyponatremia (EAH) is the most serious medical threat to ultramarathon runners since it is difficult to test in the field, is insidious in onset with generic symptoms, and can result in seizure, coma, or death. This was a randomized, controlled trial that tested blood sodium levels of runners who finished the KEYS100 Ultramarathon before and after a regular beer or non-alcoholic beer intervention. "In theory, the free water diuresis caused by drinking an alcoholic beverage (via inhibition of AVP secretion) should be enough to clinically improve an athlete suffering from exercise associated hyponatremia," said Dr. Joslin. With research oversight from Dr. Jeremy Joslin as the PI and clinical assistance from Dr. Dana Finch, Lauren Pacelli and Chrissy Podolak were successfully able to enroll 43 participants into this study. Preliminary results are still underway, but 27 participants were able to finish the race after running 50 or 100 miles and agreed to continue participation in what was known as the “Beer Study.” An i-STAT POC was utilized to test blood before and after the beer intervention. During the study period, the participant was asked to complete a survey, a clock drawing test, and to provide a urine sample as applicable. According to Dr. Joslin, “the number one health threat to ultra-endurance athletes is hyponatremia. Luckily for athletes, a focus on education is demolishing its incidence; unfortunately for us, it’s simultaneously demolishing our affect size.” We would not have been successful implementing this pilot study if not for the support from Race Director, Bob Becker and the Florida Ultra Running Research Team; notably Professors Dr. Steven Hammer and Dr. James Agnew. Because this research was essentially a pilot study, we have high hopes of obtaining funding in the future in order to research this important topic at future high endurance events.

For questions regarding this publication, please contact Christine at PodolakC@upstate.edu
When I would think about summer before I started working here, things like baseball (GO YANKEES!), sunshine, cookouts, and ICE CREAM came to mind. Now that I’m in this role, summer not only means all of those things, but it also means brand new research assistants, which is equally exciting. And let me tell you, we’ve hit the JACKPOT this summer. It’s perfect timing too because research is heating up in the department (get it)!! We have interns, med students, and new research assistants, oh my!

Our interns (pictured below) include: two SYNERGY students—Muno Sheekh-Nuur (LeMoyne) and Dhuha Al Bayati (SU) — and two Presidential Scholars — Hisham Ghanam (SU) and Christopher Nichols (SU). The SYNERGY Program is run through Upstate’s Diversity and Inclusion Office with the goal being to provide minority students from the city of Syracuse, who are currently enrolled at a college/university, an opportunity to advance their academic and professional careers. Similarly, the Presidential Scholars, who are sponsored by the Office of the President, are recently graduated, underrepresented minority college students who are looking to gain a meaningful and relevant experience to prepare them for employment in the health care setting. All four of them have been nothing short of amazing this summer and we’ve been so grateful to have them.

Summer is wonderful too because we get help from our very own medical students. This year we have Elena Wolner and Theodore Robak. Not only do they help our faculty with projects, they also dedicate time in the ED. If that’s not good enough, we also have new RA’s: Lester Carmante Aquino (Sancti Spiritus, Cuba) Emily Converse (LeMoyne), Emily Lehmann (SU), Emilee Mercuri (SU), Robin Kompf (RIT/SU), and Rafael Ramos (RPI/SU). Having them all on board has proven to be incredibly beneficial to the productivity of our department’s research. In other words, bring on the research studies!!

Our EDRA’s are an integral part of our success in conducting research in the ED and we appreciate your kindness to them. They are trained to respect what you do and to understand the busy environment that is the ED, which is why we strive to limit both the amount of questions they have to ask you and their need of your expertise. If any issues arise in how they interact, please inform us so we may provide additional training. They are in the role to soak up as much knowledge as they can, so I am grateful to you for giving them some of your time. We value the good example you set during your interactions with them as many of these individuals are aspiring doctors, nurses, and dentists; therefore, are the future of our healthcare.

Pictured left to right: Dhuha Al Bayati, Muno Sheekh-Nuur, Hisham Ghanam, and Christopher Nichols
EMMED Excellence in Research

Congratulations!

Willie Eggleston, PharmD; Ross Sullivan, MD; Susan Wojcik, PhD; Michael Keenan; Christine Podolak, MS; & Lauren Pacelli on acceptance of abstract entitled 'Assessment of simulated naloxone administration by community members' to the NACCT 2017 conference.

Michael Hodgeman, MD & Christine Stork, PharmD on acceptance and presentation of poster entitled 'Nicotinic Acid Overdose Mimicking Sepsis' at the annual European Toxicology Meeting in May 2017.

Michael Hodgeman, MD; Jeanna Maraffa, PharmD; Susan Wojcik, PhD; & William Grant, EdD for manuscript entitled 'Serum Calcium Concentration in Ethylene Glycol Poisoning' published in the Journal of Medical Toxicology.

Catherine Marco, MD; Jay Brenner, MD; Chadd Kraus, MD; Norine McGrath, MD; Arthur Derse, MD for article entitled 'Refusal of Emergency Medical Treatment: Case Studies and Ethical Foundation' published in Annals of Emergency Medicine.

Marvin Heyboer, III, MD; Garrett Smith BS, William Santiago, MD, & Susan Wojcik, PhD for manuscript entitled 'Effect of Hyperbaric Oxygen Therapy on Blood Pressure' published in the Undersea and Hyperbaric Medicine Journal.

Deepali Sharma, MD; Marvin Heyboer, III, MD; Kavitha Murugan, MD; & Susan Wojcik PhD for acceptance of poster entitled 'Carbon Monoxide Exposure and Timely Hyperbaric oxygen Therapy' to the UHMS Annual Scientific Assembly.

Deepali Sharma, MD; Shane Jennings, MD; Monica Morgan, MD; William Santiago, MD; Lorena Gonzalez, MD; & Marvin Heyboer, III, MD for acceptance of poster entitled 'Failed Flap Successfully Treated with Hyperbaric Oxygen' to the UHMS Annual Scientific Assembly June 29–July 1, 2017. In addition, Dr. Deepali Sharma will be presented these posters as an oral presentation at UHMS on June 30, 2017. Good work Dr. Sharma!

Matthew Thornton, MD on the publication entitled 'Lower-Extremity Weakness in a Teenager Due to Thyrotoxic Periodic Paralysis' published in the Journal of Emergency Medicine April 2017.

Richard Cantor, MD on presenting at two meetings of National significance: ACEP Pediatric Emergency Medicine Assembly and the Essentials in Emergency Medicine Meeting.

Michael Hodgeman, MD & Christine Stork, PharmD on acceptance and presentation of poster entitled 'Nicotinic Acid Overdose Mimicking Sepsis' at the annual European Toxicology Meeting in May 2017.

Dr. Vince Calleo’s Oral Presentation

Kara Welch’s Poster Presentation

2017 CORD Conference

S U N Y U P S T A T E M E D I C A L U N I V E R S I T Y
Part III Manuscript Series: Results

By William Grant, EdD

Once the research protocol has been implemented and the data analyzed it is time to present your results. While you have been driving to this moment, when you are developing your paper, poster, presentation this part of your paper is counterintuitive. The Results section is just that. It explains what you found. Some will find it difficult to avoid redundancy between the text, tables, figures and graphs. The Results should be crisp and logically follow the paper from its initial statement of the problem. If there are three parts to the investigation the Results should have three parts in the same order as presented early in the text.

It is important to go back to the “instructions for authors” of your target journal. You should also review recent issues. How is data presented: Charts or tables? How many charts, tables, figures does the journal prefer? Some have very strict limits. Does the journal allow for full color (if so, is there a related publication cost?). Double check to be certain that you are not presenting the same data multiple places. Graphs are nice but if you can be crisp in a table, use the table. Remember that most journals will reset the tables but not the graphs or figures. Unless the graphs and figures approach a high level of fidelity, leave them out.

Charts, graphs, tables should be stand alone. Imagine you have printed your paper with each table or graph on a separate page. Now pick out a table by itself. Is the table complete enough - - titles, units, keys for how data is displayed (i.e. n[%]), are there appropriate units indicated, are the graphs appropriate labeled, axes clear. title, key. etc.? Each of them should stand alone. One you have gotten close, then reduce the table or graph to the size likely to be printed and be certain that it is still legible.

It is perfectly acceptable to point out important, curious, or otherwise interesting findings. But not to completely explain the table. It’s fine to say; “As can be seen in Table 1a there is a unexpected negative significant relationship between oranges eaten and weight loss.” It is not acceptable to go on to say something like “The relationship is shown to be R=-2.78, p<0.05, 95%CI 2.46 to 3.10” That should already be in the table.

Your detailed explanations and your interpretations and extensions of your thoughts on the implications of whether the data support your initial intent and the implications of the findings all belong in the Discussion Section. It is there where you may wax elegant. Results are Results.

Announcements

Reminder: 1st Year Residency Completion Milestones
Due July 31, 2017
⇒ Completion of CITI Training
⇒ Development of Research Question
⇒ Literature Review
⇒ Identify MD Faculty Mentor

Please contact Dr. Bill Grant or Dr. Susan Wojcik with questions or concerns regarding resident research projects.

Reminder: 2nd Year Residency Completion Milestones
⇒ Research protocol, data collection instruments, and IRB application should be complete.
⇒ July–December 2017: Data Collection

Upcoming Annual Conferences
⇒ SOFT: September 9-14, 2017
⇒ AACT: October 13-15, 2017
⇒ ACEP: Oct 30–Nov 2, 2017

IRB Submission Deadlines

Meeting Date: September 11, 2017
New project submission: August 8, 2017

Meeting Date: October 11, 2017
New project submission: September 5, 2017

Website: https://www.irbnet.org

Research compliance education (CITI training) is now required by all faculty. Please complete as soon as possible.

For inquiries, please contact us:
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