

Year End Report Provides In-Depth Look At Source, Causes, And Evolution Of Ebola Outbreak

It's no secret that the response to the outbreak of Ebola in West Africa has been judged inadequate by many observers. The large numbers of cases and deaths, larger than for any previous outbreak, speak for themselves.

Too little, too late has been an often heard refrain. But what really best explains the ability of the Ebola virus to spread in an unprecedented manner in West Africa may involve a larger set of causative factors. Now the World Health Organization has published a set of 14 papers examining the entire one year period

from the likely index case of the epidemic in Guinea to the present day with over 21,000 cases and 8,400 reported deaths. Looking forward to 2015, the report also seeks to identify how the outbreak may evolve further and what must be done in the coming months to bring the countries to zero cases.

Index Case

The index case appears to have been a 2 year old boy living in Meliandou, a remote village with only 31 households in the Forest Region of Guinea. He fell ill in late December

- Ebola continues on next page

Top Ten Epidemiology Monitor News Stories Of 2014

What very often constitutes big news in epidemiology is not big news outside the field. 2014 was an exception. The Ebola outbreak centered in West Africa, the most important epidemiology story of the year, was also the most important story in medicine, public health, and quite possibly in world news. As of the new year, Ebola is off the front pages but still not under control.

Other significant headlines in epidemiology were the surprising revelations early last year about the late Pat Buffler's ties to industry and the questions and concerns raised about conflicts of interest for epidemiologists. On the lighter side, our marriage vow contest proved to be very popular with our readers and many voted to select the most humorous vow.

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2013 and died two days later. He infected his immediate family who died rapidly in the first wave of cases along with traditional healers, midwives, and health workers. In a second wave, members of an extended family who participated in funerals and patient care were infected.

Diagnosis

Initial suspicions focused on cholera and Lassa fever as potential causative agents. It took more than 12 weeks between the onset date of the index case and eventual confirmation of the diagnosis as Ebola by the Institut Pasteur in Lyon France. By then, 49 cases and 29 deaths had been officially reported and the outbreak was widely dispersed and had also spilled over into neighboring countries of Liberia and Sierra Leone which also took additional weeks to be recognized. At this point multiple chains of transmission were established and cases became too numerous to trace.

Animal Reservoir

Interestingly, deforestation in the area of the infected village may have brought potentially infected wild animals and the bat species thought to be the reservoir into closer contact with village residents. WHO reports that the young index case was seen playing in his backyard near a hollow tree heavily infested with bats.

Causal factors

The list of reasons given for failing to control the outbreak in West Africa are numerous and varied. It is difficult to identify the root causes from a long list of contributing

causes. In summing up the causes of the outbreak in broad terms, the WHO states that the first cause was a tenacious and unforgiving virus, and the second was fear and misunderstanding that fuelled high risk behaviors. But were these really the root causes?

In examining the more particular causes, it is difficult to escape the conclusion that the lack of familiarity with Ebola in West Africa and its associated lack of preparedness have been root causes of the increased spread in West Africa. In Equatorial Africa where the virus has appeared multiple times and the health systems know what to do, Ebola has been controlled successfully. Likewise, authorities in Senegal, Nigeria, and Mali, although part of West Africa, knew ahead of time that Ebola had appeared in the region and were able to implement control measures before the virus was widespread.

It is difficult to argue that the virus itself was more tenacious or virulent in Guinea, Liberia, and Sierra Leone than it was in the other West African countries or that the fears and misunderstandings were less in the countries with imported cases. Even in the US, the fears and misunderstandings were widely prevalent.

Most plausibly, the multiple factors often listed as causes for the failure to control the outbreak such as lack of resources, cultural practices, population mobility, poor communication, and occurrence in urban rather than only rural areas

served to amplify the spread which was already out of control when the outbreak was first recognized. Perhaps the familiar refrain of too little, too late should be modified to say too late, too little.

Requirements for Control in 2015

In an equally exhaustive paper in the series, WHO identifies four key lessons learned in 2014 and what will need to happen in 2015 to bring about zero cases in West Africa.

Lesson 1. Countries with weak health systems and few basic public health infrastructures in place cannot withstand sudden shocks. WHO calls for fair and inclusive health systems to help countries withstand future challenges.

Lesson 2. Preparedness including a high level of vigilance for imported cases and a readiness to treat the first confirmed case as a national emergency made a night and day difference

Lesson 3. No single control measure is powerful enough to bring an epidemic of this size under control. Control measures must be implemented in unison.

Lesson 4. Community engagement or cooperation underlies the success of all other control measures. Communities must be given incentives to comply.

Getting to zero cases will mean breaking all the chains of transmission and working within the context of existing cultural beliefs and practices to implement control measures, as was done to improve the safety of burials.

Specific Actions

More specifically and urgently to get to zero cases, WHO has called for a long litany of actions. The list is daunting and includes:

- tackling community resistance,
- improving the quality and completeness of contact tracing,
- tailoring response strategies to match distinct local needs,
- developing capacity to respond with more agility to changing disease patterns,
- solving logistical problems to build community confidence that control measures are effective and worthwhile,
- establishing fully functional emergency operation centres in local areas to enhance basic field epidemiology capacity,
- sharing information more widely and effectively,
- more analytical epidemiology to achieve high quality surveillance and case-finding and comprehensive contact tracing,
- reducing case-fatality rates in affected countries
- cross-border coordination to limit transmission between countries,
- development of a well-functioning health system
- more research to develop vaccines, better treatments, diagnostic tests, and
- improving incentives for all workers both national and international,

To view the WHO report, visit

<http://tinyurl.com/mzu3nqc> ■

" No single control measure is powerful enough..."

"Community engagement or cooperation underlies the success of all other control measures."

Below in rough chronological order are the top headlines from The Epidemiology Monitor in 2014 with a note about each story with links to each on our website.

"...it is still unclear what changes, if any, have been adopted or implemented..."

1. Investigative Report Raises Questions About The Late Pat Buffler's Multiple Relationships With Industry

A detailed report by [David Heath](#) from the Center for Public Integrity has revealed that the late [Pat Buffler](#), the well-known and much-loved University of California Berkeley epidemiologist, served as a consultant for private industry for many years without publicly disclosing these activities and relationships. Because of the large number of these relationships, her failure to disclose them in journal articles or grant applications, and the variety of tasks she performed for industry, the article raises the possibility that Buffler rendered opinions that were influenced by the money she received rather than the scientific evidence itself.

Epi Monitor Article
<http://tinyurl.com/m3er6cz>

[Ed. Note: One year later, it is still unclear what changes, if any, have been adopted or implemented by epidemiologists, professional associations, universities and other relevant organizations. We do know the International Joint Policy Committee of the Societies of Epidemiology has taken up the topic of conflicts of interest. We are interested in learning of any changes our readers are aware of in guidelines

or in actual practice.]

2. Epidemiologic Mysteries Still Surround MERS-CoV Outbreak In The Middle East

The mysteries surrounding MERS-CoV have only deepened in the past few weeks as the cases have increased dramatically. There is no convincing explanation yet for the sudden increase in cases. According to [Marjorie Pollack](#), Deputy Editor of ProMED, a listserv used as an informal surveillance system, "Two years since the first news reports, MERS remains a mystery. With more cases reported in a single month than in the two years combined, no one is certain how people become infected."

Epi Monitor Article
<http://tinyurl.com/kg8nh5d>

[Ed. Note: The spike in cases last April has suggested that MERS has a seasonality, but if so, that observation does not square easily with the belief that camels and bats may be the sources of exposure. Saudi Arabia reports 837 total cases and 361 deaths to date, a case fatality rate of 43%. The latest World Health recommendations call for continued surveillance but no travel restrictions at this time.]

3. List of Public Health Issues Appears To Be Growing

What makes calling an issue a public health issue so powerful? Judging from recent articles which have appeared in the mass and medical literature on topics as diverse as bullying and hoarding, it appears that

- Top Ten continues on next page

"... camels and bats may be the sources of exposure."

seeing social concerns or problems through the lens of public health offers benefits that many advocates seek.

Epi Monitor Article
<http://tinyurl.com/kjdyno2>

[Ed. Note: The beat goes on. Just this month we write about attempts to look at crime as a public health problem and to further develop a subspecialty called "epidemiological criminology".]

4. Large Gains In Life Expectancy Reported By WHO

People everywhere are living longer, according to the "World Health Statistics 2014" published by WHO. Based on global averages, a girl who was born in 2012 can expect to live to around 73 years, and a boy to the age of 68. This is six years longer than the average global life expectancy for a child born in 1990.

Epi Monitor Article
<http://tinyurl.com/ls5gg6a>

[Ed. Note: The Global Burden of Disease study published in The Lancet recently attributes the drop in death rates in high income countries to a 15% decline in death rates from most cancers and a 22% decline in cardiovascular diseases. In low income countries, deaths caused by diarrhea, lower respiratory infections, and neonatal disorders have fallen.]

5. Double Entendres Selected In Marriage Vow Humor Contest

After months of creative thinking by epidemiologists both nationally and internationally, we announced a winner of The Epidemiology Monitor Marriage Vow Humor Contest.

Winning Slogan:
I vow to you that my love for you will have a 100% survival rate over a lifetime.

1st Runner Up:
I promise that you'll always have the power to rule out all my explanations.

2nd Runner Up:
I promise that no matter how many times we are tested, that I will never adjust our level of significance.

6. New Field Of "Energy Epidemiology" Emerging In Response To The Threats Of Climate Change

Non-health researchers with broader interests have conceived of health as only one part of what epidemiology is capable of addressing. A striking example of this thinking is the adoption of epidemiology and the epidemiologic approach by engineers, sociologists, physicists, and other scientists interested in studying end-user demand for energy in built environments. Their goal, as stated by the new Centre for Energy Epidemiology (CEE) at University College London is to adapt the full range of experience of 150+ years of medical epidemiology to provide an overarching structure to "energy end-use demand research", and to provide

"This is six years longer than the average global life expectancy for a child born in 1990."

" I vow to you that my love for you will have a 100% survival rate over a lifetime."

- Top Ten continues on next page

a stream of insight to guide policy formation and evaluation.

Epi Monitor Article

<http://tinyurl.com/oche2mb>

[Ed. Note: The stated goal says it all and reminds us of the power of epidemiology.]

7. Lancet Issue Highlights The State Of Health Of Americans

"Americans deserve better health, particularly given the amount of money they spend on health care. We have made progress, but can do much better." That's how CDC Director Tom Frieden and Associate Director for Science Harold Jaffe conclude their commentary on the state of health in the US. They were writing at the invitation of The Lancet as part of a set of review papers on US health published in the July 5, 2014 issue by CDC authors.

Epi Monitor Article

<http://tinyurl.com/l79yqoe>

[Ed. Note: Writing about challenges in 2014, CDC focused on cardiovascular diseases, smoking, and an impressive list of new and old infectious disease threats such as AIDS, Ebola, and antibiotic resistance.]

8. From Containment To Crisis In 5 Minutes---Ebola "Out Of Control" In West Africa Says Doctors Without Borders

"Given that surveillance and response measures have held this [Ebola]

disease in check for the past decade, why has the situation gotten so far out of hand this time?"

This is the complex question for epidemiologists and public health officials raised by the West African Ebola outbreak in Guinea, Liberia, and Sierra Leone and posed so clearly by Dick Thompson, a former WHO communications official who specialized in outbreak communications during his tenure at WHO, writing recently in National Geographic News. Several epidemiologists and health officials close to the outbreak have shared their insights in trying to answer this question.

Epi Monitor Article

<http://tinyurl.com/o7soz4t>

[Ed. Note: A special report from WHO this month seeks to pinpoint the causes of failure to control Ebola in West Africa (see article this issue). In our opinion, blame "delayed recognition" for entrenching the disease, "business as usual thinking" for underestimating the disease, and then factors too numerous to count among poor West African countries for amplifying disease spread.]

9. More Than 1,000 Epidemiologists Converge On Anchorage for Triennial Meeting Of The International Epidemiological Association

The scenery did not disappoint, nor did the summer weather. More than

- Top Ten continues on next page

"Americans deserve better health,"

"...blame "delayed recognition" for entrenching the disease,"

1,000 epidemiologists from more than 30 different countries made their way to cool, sunny, and beautiful Anchorage Alaska in mid-August to participate in the 20th triennial meeting of the International Epidemiological Association. The meeting was bookended by an opening Cruickshank Lecture on climate change by Australia's Tony (AJ) McMichael and a closing Richard Doll lecture on halving premature mortality given by Oxford University's Richard Peto. Indigenous dancers also helped to entertain participants and kick off the meeting on the theme of Global Epidemiology in a Changing Environment: The Circumpolar Perspective".

Epi Monitor Article
<http://tinyurl.com/owpqvza>

[Ed. Note: Sadly, Tony McMichael passed away shortly after his Alaska keynote address. Called a "gentle giant" in epidemiology, a video of his memorial event in Australia is available on You Tube at: <http://tinyurl.com/o6wbcd4>]

10. Researchers Call For Setting Quantitative Health Target Of Preventing 40% Of Under Age-70 (Premature) Deaths By 2030

Inspired by the value of setting plausible goals and the fact that death in old age is inevitable but death before old age is not, researchers writing in The Lancet in September provide analyses of decreasing national mortality trends which they hope will influence the United Nations in setting disease and death

reduction targets for the next round of international development goals. The current set of goals, called the Millenium Development Goals are set to expire in 2015 and will be replaced by a new set of Sustainable Development Goals.

Epi Monitor Article
<http://tinyurl.com/lk5kkpn>

[**Ed. Note:** The sustainable development goals are a new, universal set of goals, targets and indicators that UN member states will be expected to use to frame their agendas and political policies over the next 15 years. The SDGs follow, and expand on the millennium development goals which were agreed by governments in 2000, and are due to expire at the end of this year. For a clear and graphic explanation of the goals, visit: <http://tinyurl.com/kfn6uau>] ■

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"Called a "gentle giant" in epidemiology..."

"... death in old age is inevitable but death before old age is not,"

Steven Coughlin Saga Recounted In New Book

A new book by New York Times reporter James Risen about the war on terror since 9/11 entitled “Pay Any Price: Greed, Power, and Endless War” includes a segment chronicling the difficulties encountered in doing research by former Veterans Affairs epidemiologist Steven Coughlin. While studying the health of veterans, Coughlin encountered pressures to suppress or modify data showing possible health effects of war related exposures during the Gulf War and the war in Iraq and Afghanistan.

According to Risen, Coughlin came to believe that the VA has a conflict of interest in doing research on veterans’ health because the agency is also responsible for paying benefits when health risks are identified. Coughlin resigned from the VA in 2012 after working there for about 4 years. He testified in Congress in 2013 about the research malpractice he observed and was eventually vindicated by an internal investigation at the VA.

Coughlin received the Research Integrity Award for his courage from the International Society for Environmental Epidemiology at its 2014 meeting. The segment in Risen’s book is of interest to any researchers working for or with organizations which have a stake in suppressing data. That includes a large cohort of epidemiologists.

ISEE Research Integrity Award

<http://tinyurl.com/l42x8bo>

News report

VA Concedes Whistleblower's Allegations Were True, Including That It Ignored Veterans' Suicidal Tendencies

<http://tinyurl.com/lba3h95>

Book Review of Risen’s Book

<http://tinyurl.com/m7gvarl>

British Epidemiologists Interviewed About Findings On Inequality

A lengthy and interesting interview with Richard Wilkinson and Kate Pickett, British epidemiologists and co-authors of “The Spirit Level – Why Greater Equality Makes Us Stronger” has been published online by Too Much, a monthly commentary on excess and inequality. According to Wilkinson and Pickett, people in more unequal developed nations can be from 2-10 times more likely than people in more equal nations to be obese or get murdered, to mistrust others or have a pregnant teen daughter, to become a drug addict or stuck in poverty. Put another way, the authors state that problems related to social status, as all these problems are, get bigger when inequality and status differences increase. And this occurs not just for the poor at the bottom of the ladder but across all societal groups. These views are politically and economically provocative and much opposition and resistance to these findings have occurred. Read the full interview at the link below and also read more about their provocative thinking in a free pamphlet.

The Interview published at Too Much

<http://toomuchonline.org/>

The free pamphlet written by Wilkinson and Pickett entitled “A Convenient Truth”

<http://tinyurl.com/onfmsb>

New Version of “Studying Populations” Released

Studying Populations, the computer assisted learning package for epidemiological methods, is available in an updated version dated November 2014. According to the creators, it now covers many basic epidemiological concepts in a set of over 80 interactive exercises and simulations.

Download the package

<http://tinyurl.com/m3ygs1b>

New Software Tool Under Development To Help “Connect The Dots” Between Outbreak Cases

A new software tool for epidemiologists called "Outbreak Investigator" is being developed at the University of Washington School of Public Health by Neil Abernethy and his research team. According to Abernethy, the program was set up to follow outbreaks of TB but could be used to follow the spread of other infectious diseases. In an interview with *Close Up*, a school publication, Abernethy says the tool can be used to ask very straightforward questions not possible with other databases because the various types of data, such as lab data, are kept separately. This tool will help to bring data together to help detect patterns. It will be piloted in the coming year, according to Abernethy

UW Close Up

<http://tinyurl.com/m96srwa>

Sandro Galea, New Dean At Boston University, Shares Vision For Public Health

Knowledge generation, knowledge transmission to our students, and knowledge translation to the broader community. That’s how Sandro Galea, Boston University School of Public Health’s new Dean explains the roles for schools of public health in his first interview with *BU Today*. He added, “We have a responsibility to take our knowledge ‘off the shelf’, to use what we learn to inform and influence the public conversation. As dean, I’m committed to making sure SPH carries out that responsibility.”

Galea also envisages an expanded role for schools of public health “to help move public

health to the vibrant center of our global society, shaping broader societal conversation and elevating health as a value that animates public discussion and policy making.” Readers can get to know more about Galea’s background and views by reading the original interview.

BU Today

<http://tinyurl.com/mu23dfh>

Law Professor Wants To Use Epidemiology To Investigate Crime

“I think there’s a real need for epidemiological evaluation of what legal interventions work – or don’t,” says Mary Fan, a law professor and graduate student in the epidemiology at the University of Washington. In the school’s *News* publication, Fan explained that epidemiology offers a valuable approach for addressing social challenges. This view is consistent with the growing interest in using epidemiology outside the health realm.

An example is the use of epidemiology to study energy use described in a previous issue of the *Epi Monitor*.

Crime is another non-health topic amenable to the methods of epidemiologists. According to Fan, “Something I really miss in the law is the rigorous data-based investigation of fiercely-debated issues. According to the article, the disciplines of epidemiology and criminology have come together to form a new field called “epidemiological criminology” or “epicrim” for short.

UW SPH News

<http://tinyurl.com/pknqsmm> ■

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Top Ten Public Health Stories and Challenges Published by CDC And Berkeley School of Public Health

"...the health of Americans depends on stopping the outbreak in West Africa."

As is common at the turn of the year, multiple groups with interests in health as well as other topics are quick to compile their lists of the most significant events. Not to be left out, The Epidemiology Monitor has compiled its list of the most notable stories published in 2014 (see related article). Examples of other lists covering topics of interest to our readers are those compiled by the Centers for Disease Control which identified top public health challenges tackled in 2014 and by the Berkeley School of Public Health which identified the top public health stories published in 2014.

Top Ten Public Health Stories Of 2014 According To Berkeley School of Public Health

Ebola as expected is on this list, but the focus was on Ebola in the US and the misinformation and panic that ensued. Some of the other topics on the list are:

- the growing sales and regulation of E-cigarettes,
- the controversy about calling into question the role of saturated fats,
- the legalization of medical marijuana in many states and for recreational use in some states,
- closer scrutiny for the medical advice given by Dr Oz,
- outbreaks of vaccine preventable diseases caused by refusals to vaccinate children for religious and other reasons,
- concerns about antibiotic resistance,
- the adoption of a city tax on sugar containing soft drinks in Berkeley (a penny per ounce),

"...prescription drug overdose which kills an estimated 44 people every day."

- the implementation of the Affordable Care Act resulting in an increase of 8 million medically insured persons, and
- FDA proposals for large changes to nutrition food labels.

Top Ten Public Health Challenges of 2014 According to the CDC

Again Ebola was first on the list as the agency's largest outbreak response ever "because the health of Americans depends on stopping the outbreak in West Africa". Other challenges were:

- antibiotic resistance,
- the mysterious outbreak of Enterovirus D-68 possibly the cause of paralysis in some children,
- Middle Eastern Respiratory Syndrome (MERS-CoV) reported from Saudi Arabia and with a sudden increase in cases in 2014,
- the continued fight against the HIV pandemic and
- the end-stage battle to complete the eradication of polio,
- achieving an even higher standard of safety in light of the breaks in safety occurring at CDC,
- the continued efforts to reduce chronic diseases such as heart disease and
- the preventable deaths caused by smoking.

Perhaps most surprising on the list is what CDC called "the silent epidemic" of prescription drug overdose which kills an estimated 44 people every day.

■

People in the News



Appointed: Jeff Duchin, as interim local health officer for Public Health – Seattle & King County on January 5. Duchin was serving as chief of the department's Communicable Disease Epidemiology and Immunization Section when appointed. He will split his time between the two positions.



Honored: Lewis Kuller, with the John Snow award from the American Public Health Association at its annual meeting in 2014 in New Orleans. According to the APHA spokesperson, Dr Kuller was selected because of not only his enormous body of work contributing to the field of epidemiology, but also his impact on students and the next generation of epidemiologists." In accepting the award, Kuller pointed out that "APHA's recognition of our work...is a testament to the skill and expertise of our team at Pitt Public Health."



Died: Joseph McLaughlin, 66, unexpectedly on December 10, 2014. Dr McLaughlin was President of the International Epidemiology Institute which he co-founded in 1994. According to the Institute, he led many large studies and was considered an expert on kidney cancer. A full obituary can be found at <http://www.iei.us/JKMBio.html>



Died: David Callahan, 50, unexpectedly on January 6, 2015. He was team supervisor of Career Epidemiology Field Officers in the Office of Public Health Preparedness and Response at the Centers for Disease Control and Prevention. Dr Callahan was a former Epidemic Intelligence Service (EIS) Officer. According to the EIS Alumni Association News obituary, at the time of his death, Dr Callahan was doing what he loved most – guiding epidemiologists and working with state and local partners to advance public health.



Awarded: to Perry Hystad, Oregon State University epidemiologist, the Early Independence Award from the National Institutes of Health. The award is for \$250,000 a year for up to five years. Hystad will investigate the global health impacts of air pollution which kills an estimated 3.2 million persons a year. He told the local media "When people first look at this they say, 'This can't be real – the numbers are too high,'" he said. "But that's because this is something everybody is exposed to."

Methods in Epidemiologic Research



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"...those with a statistical background can use it to learn to speak the language of epidemiologists; those with an epidemiologic background can use it to learn to speak the language of statisticians"

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HIV/STI Care Researcher at Kaiser Permanente Southern California

Kaiser Permanente Southern California is searching for an HIV / sexually transmitted infection researcher to join our growing and dynamic research team. This is an open-rank position for a doctorally prepared researcher in health services research/implementation science or behavioral science, epidemiology, or clinical research. Expertise and experience in care delivery, population health management, substance abuse, HIV, hepatitis B and C, other infectious diseases, or research methodologies is required.

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Director of the 'Centre for research in Epidemiology and Population Health' Position in the Paris area (FRANCE)

The Centre for research in Epidemiology and Population Health (*Centre de recherche en Epidémiologie et Santé des Populations, CESP, Villejuif*) invites applications for the position of its Director for the period 2015-2019, renewable. This is a position with tenure, either as Professor at Paris Sud University or Research Director at Inserm, the French National Institute for Health and Medical Research (*Institut national de la santé et de la recherche médicale*).

For more information, see the CESP website, <https://cesp.inserm.fr/fr/>

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Icahn School of Medicine at Mount Sinai

POST-DOC POSITION EPIDEMIOLOGY OF SPINAL DISEASES Icahn School of Medicine at Mount Sinai New York, NY USA

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A PhD in Epidemiology or related disciplines

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DEPARTMENT OF EPIDEMIOLOGY GEISEL SCHOOL OF MEDICINE AT DARTMOUTH

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The Geisel School of Medicine at Dartmouth invites applications for tenure-track Assistant or Associate Professor position with a research emphasis in molecular epidemiology. The appointment will be in the Department of Epidemiology with an affiliation with the Center for Molecular Epidemiology at Dartmouth. Additional affiliations within a broad range of innovative interdisciplinary research centers available including the Norris Cotton Cancer Center, Dartmouth SYNERGY and the Children's Environmental Health and Disease Prevention Research Center. Teaching and interaction with undergraduate, graduate, and post-doctoral fellows are available, including through our Institute of Quantitative Biomedical Sciences PhD program and other programs.

Applicants should hold a doctoral degree (PhD, MD) or the equivalent - for MD applicants a MPH or MS degree in epidemiology is desirable. Strong preference will be given to applicants with an established track record in interdisciplinary collaboration as well as innovative ideas and experience from which to build a strong extramurally funded research program.

Founded in 1797, the Geisel School of Medicine at Dartmouth draws on the resources of Dartmouth College, Dartmouth-Hitchcock Medical Center and the Norris Cotton Cancer Center to support broad interdisciplinary programs in biomedical research, education, patient care and service. The newly formed Department of Epidemiology offers a growing research program with diverse areas of expertise such as molecular-genetic epidemiology, nutrition and chemoprevention, epigenetics, children's health, cancer, environmental health, pharmacoepidemiology, global studies, and much more.

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Epidemiology@Dartmouth.edu

For further information and full position description, please visit the Department of Epidemiology: <http://epidemiology.dartmouth.edu/>, and the Center for Molecular Epidemiology: <http://sites.dartmouth.edu/molecepi/>

Geisel School of Medicine is an equal opportunity/affirmative action employer with a strong commitment to diversity. In that spirit, we are particularly interested in receiving applications from a broad spectrum of people, including women, persons of color, persons with disabilities, veterans or any other legally protected group.



Biostatistician

Locations: San Francisco, Boston, New Jersey or United Kingdom

The Fountain Group maintains Partnerships with 25 of the leading Biologic and Pharma companies in the United States and the United Kingdom. We are seeking to hire Biostatisticians for roles that require programming experience and roles that do not require programming experience. At this time, we are hiring junior, mid level and senior Biostat professionals. The successful applicants will be responsible for supporting various phases of clinical trials.

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For immediate consideration please contact:

Sloane Holt Sloane@thefountaingroup.com
Director of Clinical Services



School of Public Health

Postdoctoral Position Clinical Epidemiology Boston University. Available July 1, 2015

Candidates should: Be a US citizen or permanent resident, have a doctoral degree in epidemiology or biostatistics, w/ excellent programming & communication skills. The Department with over \$10 million in federal grants focuses on the epidemiology of musculoskeletal disorders, rheumatic diseases and aging. Prospective candidates should be highly motivated with an ability to work well in groups and communicate ideas clearly to persons of different academic backgrounds. Please submit a cover letter summarizing your experience, research interests and career goals, PDF of up to 3 representative publications and CV including names and contact information of 3 references by email to Sharon Tomlinson stomlin@bu.edu

Boston University is an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.



PROFESSOR AND DIVISION HEAD DIVISION OF EPIDEMIOLOGY AND COMMUNITY HEALTH SCHOOL OF PUBLIC HEALTH, UNIVERSITY OF MINNESOTA

The University of Minnesota's School of Public Health (SPH) is seeking a tenured Professor and Head for the Division of Epidemiology and Community Health (EpiCH) to provide strategic and academic leadership for the Division's 52 primary faculty, more than 300 graduate students, 400 staff, and approximately \$25 million annually in sponsored projects research on the etiology and prevention of disease. Visit <http://sph.umn.edu/epi> for more information on the Division.

Reporting to the Dean of the School of Public Health, the Professor and Head will:

- serve as the chief administrator of the Division and as a member of the SPH Executive Team, building and nurturing its strategic vision and resources to achieve its missions in collaboration with SPH leadership;
- supervise, prepare, implement and monitor the Division budget that encompasses all funding sources and ensures compliance with grant, legislative, and institutional guidelines as well as effective management of Division resources;
- be responsible for advancing and participating in the Division's diverse spectrum of interdisciplinary research, teaching, and service by leveraging and expanding the Division's, School's, and University's strengths;
- support collaborative activities that cut across the University and community;
- recruit and retain excellent faculty, particularly those from underrepresented backgrounds, and encourage their development with strong and effective mentorship;
- foster a learning environment that attracts a diverse student body;
- strengthen collegial and collaborative culture that is inclusive, diverse, supportive, and values strong faculty governance; and
- maintain an active scholarship portfolio including external funding and peer-reviewed publications.

Candidates must have a Ph.D., Sc.D., M.D., or equivalent degree in a health-related field and credentials commensurate with appointment as a tenured full professor in the SPH. Candidates are expected to have a nationally/internationally recognized record of research and scholarship, including external funding; demonstrated excellence in graduate program teaching; and documented experience in mentorship, leadership and management in a large diverse academic institution. Applications will be reviewed beginning March 15, 2015, and the position will be open until filled. To apply for the position, please submit a cover letter, CV including publications list, and a list of at least three referees on-line using the following link: <http://employment.umn.edu/applicants/Central?quickFind=126753>. Reference requisition number 196055. Salary will be competitive and commensurate with qualifications and background.



Residential Summer Course in Epidemiology, Florence, 22 June – 10 July 2015

Contact: eepe@eepe.org and <http://www.eepe.org>

The course, now in its 28th year, is intended for epidemiologists, statisticians, clinicians and public health practitioners with an interest in epidemiology. The course offers in the first two weeks five general modules on epidemiological study design and statistical analysis of epidemiological data, and in the third week seven special modules on topics of current relevance for health and advanced methodological issues. The course is taught in English by lecturers mostly from European universities and research institutes and is held in residential form in the "Studium" centre on the hills of Florence.

Week 1, 22 June – 26 June 2015

- Epidemiological methods I : Basic principles and introduction to study design. *Neil Pearce, Lorenzo Richiardi, Franco Merletti*
- Statistical methods in epidemiology I: Basic principles. *Simon Cousens and Costanza Pizzi*

Week 2, 31 June – 3 July 2015

- Epidemiological methods II: Case-control studies. *Jørn Olsen, Manolis Kogevinas*
- Statistical methods in epidemiology II: Analysis of cross-sectional and case-control studies. *Cono Ariti, Aurelio Tobias*
- Computer analysis of epidemiological data sets. *Manolis Kogevinas, Stefano Mattioli, Aurelio Tobias, Stefania Curti, Jørn Olsen*

Week 3, Special Modules 6 July – 10 July 2015

- Advanced statistical topics. *Per Kragh Andersen, with Annibale Biggeri, Corrado Lagazio and Michaela Baccini*
- Key and advanced concepts in epidemiology. *Jan Vandenbroucke*
- Environmental epidemiology. *Josep M. Antó and Jordi Sunyer*
- Clinical Epidemiology. *Patrick Bossuyt*
- Fertility and Pregnancy: an epidemiologic perspective. *Debbie Lawlor*
- Concepts and methods in causal mediation analysis. *Bianca DeStavola*
- From personalized to global public health. *Nicole Probst-Hensch and Nino Künzli*

Evening Distinguished Lectures: *Rodolfo Saracci, Jørn Olsen and Nino Künzli*

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