

A monthly update covering people, events, research and key developments

Conference At University of Connecticut Will Examine Challenges Facing Science and Society Trying To Make Sense and Good Use Of Data

Epidemiologists are only too familiar with the criticism that their research can prove confusing to the public and policy makers when new findings are reported about the possible role of specific risk factors and health. Perhaps the most widely-circulated cartoon in epidemiology circles is the one from a 1997 issue of the Cincinnati Enquirer. It depicts a newscaster on a TV program called "Today's Random Medical News (from the New England Journal of Panic Inducing Gobbledygook) showing how the newsman reports from the New England Journal by spinning roulette wheels depicting different exposure factors, disease outcomes, and target groups to obtain different combinations of findings. Because they vary so randomly, or so it would appear, the results seem to be nonsensical. When subsequent findings conflict with earlier ones, the situation can become even more confusing.

Other Challenges

But confusing or conflicting findings are only one sort of communication

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Large \$14M Grant For Epidemiologists To Identify Modifiable Risk Factors For Breast Cancer In Women Younger Than Fifty

Etiology Of Breast Cancer Has Become Very Complex Over The Years

The more we learn, the more we need to know. This paradox would appear to apply only too well to breast cancer where much has been learned about the disease, its risk factors, and treatments over the years, yet new knowledge has brought a host of new questions. News reports of a \$14 million grant to a team of researchers led by Michigan State University epidemiologist <u>Ellen Velie</u> have accentuated the fact that the etiology of the disease remains unclear despite years of research and the successful identification of numerous risk factors. The grant is to carry out a populationbased case-control study (The Young Women's Health History Study, YWHHS)) of 2,000 breast cancer cases to be diagnosed during the next five years. The co-principal investigators are <u>Kendra Schwartz</u> from Wayne State University and the Karmanos Cancer Institute in Detroit and <u>Katherine</u> <u>Henderson</u> from the City of Hope National Medical Center in Duarte California near Los Angeles. In This Issue:

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Online at: www. epimonitor. net

> NOVEMBER 2010

VOLUME THIRTY-ONE

> NUMBERS ELEVEN

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"Minds can get made up too quickly in response to newly reported risks..."

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challenge. According to <u>Lawrence</u> <u>Silbart</u>, Professor at the University of Connecticut and lead organizer of an upcoming conference on communication in public health, public reaction and resulting public policy following early reports of new potential risks can often get too far ahead of the science. He cited the recent book by Albert Einstein College of Medicine's epidemiologist <u>Geoffrey Kabat</u> on "Hyping Health Risks" to buttress his point.

Part of the reason for this according to Silbart is that the risk from initial reports often gets exaggerated, or at least the interpretations of that risk get exaggerated because people have a natural tendency to fear the worst case scenario. The situation is made all the more challenging because the larger body of data needed to approach a scientific consensus on the topic often only comes years after the initial reports of potential risk, he added. "Minds can get made up too quickly in response to newly reported risks," according to Silbart, and he wonders if there might not be a better way for scientists and society to address and communicate about findings.

The Conference

Researchers at the University of Connecticut are planning a one-day conference in October 2010 to provide further examples of the challenges in communicating about and making policy around research findings related to risk factors. Entitled "Mixed Messages in Public Health—'It's No Wonder Folks Are Confused'", the conference will seek to raise awareness about the challenges of dealing with risk information. The stakes for society to meet this challenge more effectively are very high as in the case of climate change, childhood vaccine programs, and other science policy areas.

Conference Speakers

To kick off the conference, Silbart's group has invited Kabat as keynote speaker on "Cell Phones, Science, and Fear: How Our Society Manufactures Hazards". Other speakers will be on hazard assessment as it relates to Bisphenol A (BPA) in plastic, mercury and fish consumption, and nanotechnology and potential toxic effects.

A challenge of a different sort is communicating effectively about findings even when the findings are consistent and appear to point to a course of action. Getting through to the public and policy makers in the Internet age when society faces a glut of information is more challenging than ever before. Doing so in highly polarized societies where trust is low adds another layer of difficulty. If ever it was true that the facts speak for themselves, that era has disappeared, and a better approach to making use of data is needed.

At least one such new approach will likely be presented at the conference because the featured speaker at lunchtime will be <u>Randy Olson</u>, the author of the recent book entitled "Don't Be Such A Scientist". Olson, formerly a marine biology professor turned filmmaker, has argued for scientists to pay attention to style as well as substance in communicating with the public, and to lead with the heart, not the head. His book admonishes scientists not to be so cerebral, literal-minded, and unlikeable. He calls for scientists to become better storytellers.

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National Research Council's Report Proposes New Framework For Making Risk-Based Public Policy Decisions

Concerns about the inability to translate data into action or into sound public policy are widespread in the scientific community. Gridlock or stalemate on climate change, stem cell research, and vaccines and autism have become the "standard set" of examples used to illustrate this new reality of failure to move forward in articulating public policies.

The Report

A recent report by the National Research Council entitled "Science and Decisions – Advancing Risk Assessment" has noted that the Environmental Protection Agency (EPA) regulatory risk assessment and decision-making on risk assessment more generally are "bogged down" with some assessments taking up to 10 years to complete. Among the causes of this gridlock cited by the NRC are uncertainty of scientific data, lack of participation by community groups, environmental organizations, industry, and consumers in the decision-making process, and finally disconnects between the available data and the information needs of decision makers. These causes may operate at the broader level of science policy making on non-environmental issues as well.

In order to help break these stalemates, the NRC has recommended a new framework for risk-based decision making. It is grounded on the earlier risk assessment framework created by the NRC in its well known "Redbook" report in 1983, but it extends the framework on both the front end and back end of the technical assessment at the core of the model.

New Model

The new model describes risk-based decision making as taking place in three phases. Phase I is about problem formulation and scoping, phase II is centered on planning and conducting the technical risk assessment, and phase III is about risk management.

The new emphasis on the front end of the risk-based decision making process emphasizes the importance of getting agreement on the front end of the process on what the important and relevant questions are. Otherwise, a risk assessment may turn out to be technically sound, but actually will be irrelevant to decision makers who may have a different question in mind or have different options to choose from which were not specifically addressed by the technical assessment.

Public Participation

The solution to this deficit, according to the NRC, is to involve a wider group of stakeholders in the formulation of the problem and of the options that are possible or of interest in addressing this problem. Once these parameters of the decision making have been agreed to, the model then proceeds to the second phase in which technical assessments of risk can then be carried out for each of the agreed upon options. The model also calls for participants to agree on the front end that the planned for technical assessments are appropriate for answering the questions that are being posed. This up front work is designed to make the ultimate scientific results of the assessment more useful and acceptable to decision makers.

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Proven Risk Factors

"Creating a single causal model which integrates all of these risk factors is challenging..."

"Breast cancer is no longer seen as a single disease entity..." The news about the grant provides an opportunity to get an update on our understanding about the etiology and prevention of breast cancer. For example, the list of proven risk factors for breast cancer (1) is long and now includes family history in a first-degree relative or genetic predisposition (BRCA1), height, benign breast disease, mammographically dense breasts, parity, age at first birth greater than 30 years compared to less than 20 years, lactation of long duration, menopause at greater that 54 years versus less than 45 years, high endogenous estrogen levels, postmenopausal hormone use, ionizing radiation exposure in childhood, menarche at less than 12 years compared to greater than 14 years, high postmenopausal body mass index, high premenopausal body mass index, and alcohol use of one or more drinks per day.

Other Risk Factors

The list of risk factors unconfirmed but based on substantial data includes current oral contraceptive use, and physical activity level. Limited evidence suggests that high prolactin levels, high premenopausal insulin-like growth factor I levels, in utero exposures, and non-steroidal anti-inflammatory drug use also influence the risk of breast cancer.

All of these risk factors have been found to increase breast cancer risk except parity, lactation, premenopausal body mass index, and physical activity which have been associated with decreases in risk.

Biologic Mechanisms

Creating a single causal model which integrates all of these risk factors is challenging, and the broad conceptual framework for how the known risk factors for breast cancer may be operating to cause disease has been changing over the years.

Paradigm Shift

Perhaps the most notable change in thinking about the mechanisms for breast cancer is the concept that breast cancer risk might originate in utero and in early life especially during the growth period of early life and during the prenatal period in premenopausal years. It is clear that the timing of exposure in a woman's life is important since the effects of a single factor (e.g., radiation exposure) can vary if experienced in early life versus later life (1).

More Than One Disease

Another critical change in how breast cancer is viewed comes from the fact that risk factors vary for breast cancer cases according to their estrogen receptor status and progesterone receptor status. Breast cancer is no longer seen as a single disease entity but rather as multiple diseases.

Michigan Study

In planning the YWHHS, researchers have used a conceptual framework for breast cancer which envisages exposures over a woman's life forming a chain with earlier life factors such as childhood growth and age at menarche working to modify other more current risk factors in adult life such as body size.

Controversy Over Breast Cancer Screening Heightened By Two Additional Studies

How Many Women Should Be Hurt To Save One Life Is The Key Question At The Heart Of The Controversy

Two new studies from Sweden and Norway showing benefits from screening women over 50 and benefits ranging from a 10-26% reduction in the risk of death from breast cancer among women 40-49 have added to the confusion of women and the medical and public health communities about what screening to do, if any, for women, particularly those in the 40-49 age group. The controversy began last year when the US Preventive Services Task Force did not recommend routine mammography for women under 50 years of age. Public reaction against the recommendation was widespread to the point where politicians got involved. Also, the standing recommendations of the American Cancer Society and the National Institutes of Health continue to recommend mammography for women forty years of age and older.

Swedish Study

The Swedish studies compared two counties with and without voluntary mammography screening for women 40-49 starting in 1986. Women were followed for an average of 14 years. There was a total of 803 breast cancer deaths for 7.3 million person years in the county with screening compared to 1,238 deaths for 8.8 million person years in the county without screening. There was a 26-29% percent reduction in deaths depending on whether all women invited to screening or only screened women were included in the denominator.

Norwegian Study

The Norwegian study was focused primarily on screening benefits for

women 50-69. The study included both concurrent and historical controls. The study showed a reduction in deaths of 7.2 per 100,000 for the screened group and 4.8 for the unscreened group, showing a benefit of screening but also a downward trend in breast cancer deaths independent of screening. The overall difference attributable to screening was 2.4 deaths per 100,000 which was estimated to be only a 10% decline overall in breast cancer deaths due to screening.

Source of the Problem

These studies are contributing to the controversy because they suggest that breast cancer screening works, albeit perhaps less effectively than previously thought because of improving death rates over time, and suggested a 26-29% reduction for women 40-49. Since it has been shown before that screening is more worthwhile for women over 50, the contrary evidence in favor of a larger effect for younger women will stir further debate.

The controversy involves differences of opinion about whether the benefits of screening are worth more than the harms. As one University of Michigan observer stated, "It's not enough just to know how many women were saved, we have to know how many were hurt to save them." Or as another commentator put it, "One thing is certain. Mammography has been shown in study after study to reduce the risk of breast cancer in women 40-49. What we're talking about is the debate about how many women need to be screened to save one life." ■

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"What we're talking about is the debate about how many women need to be screened to save one life." - Grant for Epi, con't from page 3 This broad outline about the possible causes of breast cancer and the mechanisms that may be involved have been used to help select the questions to be answered and the design of the newly funded YWHHS.

"African-American women under <40 have a higher incidence rate than white women"

"...breast cancer incidence can be altered after birth." According to Velie, the disease is less common in women under 50 and less well-studied and understood despite being more deadly. Thus, interest in younger women is high. In that category, African-American women under <40 have a higher incidence rate than white women, and an understanding the reasons for the differences by race could improve overall understanding of the disease, says Velie.

Also, several energy balance factors in adult life such as fatness and physical activity and genetic variants of these, as well as energy balance factors in early life such as growth and age at menses increase risk, and the investigators are keen to examine these since many are potentially modifiable. Evidence that breast cancer may be related to socioeconomic status also suggests that breast cancer incidence can be altered after birth.

Since the information about varying lethality by tumor type is relatively recent, and tumor characteristics have not always been taken into consideration in earlier studies, the YWHHS will collect and analyze data by tumor subtype.

Largest Study

According to Velie, investigators are planning to conduct what will amount to the largest study of breast cancer in younger African-American women and this is why they chose to collect cases from populations in LA and Detroit which produce the largest number of such cases. Researchers will obtain questionnaire data, anthropometric measurements, photographs, blood, and tumor tissue. The objectives of the study are to investigate--in a socioeconomically diverse population of black and white women--whether life course energy balance factors or polymorphic variation in candidate genes in energy balance pathways are associated with breast cancer risk overall and by molecular tumor subtypes.

1. Hankinson SE, Colditz GA, and Willett WC. The Lifelong Interplay of Genes, Lifestyle, and Hormones. Breast Cancer Res 2004, 6:213-218

-NRC Report, con't from page 3 Technical Assessments

The NRC also proposed changes in the phase II technical assessments which involve characterizing and communicating about the uncertainty and variability in all the key computational steps of the risk assessment, being more explicit about the default assumptions used in the assessment, using a unified doseresponse approach for both cancer and non-cancer effects, and considering a wider range of potential influences on risk such as those coming from multiple sources or aggregated exposure over a longer time period to one source of risk.

Risk Management

In phase III, risk management, the risks and benefits of the different options are evaluated and a choice made in the preferred course of action to manage the risk. During this phase, both risk and non-risk related information must be integrated in making the actual choice about a preferred option. Some of these non-risk related considerations include

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those related to economic feasibility, and compatibility with legal requirements and stakeholder and decision maker preferences. The NRC is careful to point out the potential for manipulation of the results by preferences of the risk managers and urges that safeguards be taken to avoid such an outcome.

The NRC recognizes that risk assessments cannot continue to be handled as they have in the past and that their recommendations for EPA are "tantamount to 'change-the-culture' transformations in risk assessment and decision making in the agency." These culture changing practices in seeking to use data for action may also apply at the broader level of science policy making in society where epidemiologic data on a wide variety of both environmental as well as non-environmental exposures are often brought to the fore. ■

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- University Conference, con't from page 2 Another Prescription

As evidenced by a review of Olson's book in Science in January 2010, the topic of the relationship between science and society is a timely one with scientists bemoaning popular misunderstandings of science regarding global warming, stem cell research, and childhood vaccination programs and the public becoming increasingly aware that science is not free from personal values. The reviewer of Olson's book has his own prescription which involves listening to and respecting your audience. He claims that scientists are poor communicators because they do not know how to listen and can be stunningly dumb when it comes to dealing with people. He adds, "...to win people's minds you must first get them to listen, and people will listen only if they feel that they are respected."

Another group which has recently reported on how best to address risk information and achieve greater utility of scientific data is the National Research Council which has recommended tying risk assessments more closely to the questions to be answered and doing so by involving a wider group of participants in all stages of the risk-based decision making process. (See related story in this issue)

Information and registration for the conference can be found at *www.cag.uconn.edu/ahs/mixedmessages* The total list of sponsors includes the College of Agriculture and Natural Resources, the Department of Allied Health Sciences, or the Center for Environmental Health and Health Promotion at the University of Connecticut. The contact person is <u>Nancy Madrak</u> at 860-486-2834 or by email at nancy.madrak@uconn.edu

"...their recommendations for EPA are 'tantamount to 'change-theculture' transformations in risk assessment and decision making in the agency."

"... to win people's minds you must first get them to listen, and people will listen only if they feel that they are respected."

2011 To Be The Year Of Congresses Meetings in Canada And Scotland On The Drawing Boards

The new year 2011 promises to be more interesting than usual for epidemiology meetings. Plans are underway to organize two separate Congresses next summer. The first to take place will be the 3rd North American Congress of Epidemiology to be held in Montreal Canada on Tuesday thru Friday June 21-24, 2011, and the second will be the 19th World Congress of Epidemiology sponsored by the International Epidemiological Association (IEA) to be held in Edinburgh Scotland on Sunday thru Thursday August 7-11, 2011. (See Table for Key Facts about each Congress).

Themes

The theme of the IEA World Congress will be "Changing populations, changing diseases: Epidemiology for Tomorrow's World". The North American Congress will have no theme other than epidemiology, according to its organizers. The idea behind having no specific theme is to "showcase and promote the diversity of study, practice and policy within Epidemiology and to identify areas of commonality across different substantive areas of the field."

Types of Sessions

A common denominator of the Congresses is that they will showcase the key research and other issues in epidemiology today through the use of three modes of presentation — invited plenary session speakers, symposia sessions of 2-5 speakers on a topic proposed by epidemiologists and selected for the meeting, oral presentations submitted by abstracts from epidemiologists and selected for presentation, and poster presentations submitted by participants and accepted by the organizers. The North American Congress will in addition sponsor preconference workshops on topic ideas submitted by the epidemiology community. The deadline for submitting these items are listed on the accompanying table in this issue.

Distinctiveness

The North American Congress occurs every five years and is distinctive because of the large number of professional epidemiology and epidemiology related professional societies which sponsor or co-sponsor the meeting. The IEA Congress occurs every three years and stands out for the international perspective it brings to the field of epidemiology. The organizers of the IEA Congress are aiming to have representatives from every country in the world at the Scotland meeting. Among the topics to be presented at the IEA Congress are addresses on global problems such as economic inequality, climate change, food supply, and population changes and talks on neglected conditions such as tropical diseases.

Other Features

Highlights of the Congresses will include specially featured plenary session speakers and invited lectures honoring former epidemiologists. The IEA stands out for having three such invited lectures in honor of John Snow, <u>Richard Cruickshank</u>, and <u>Richard Doll</u>. The North American Congress has not listed any honorary lectures on its program; however, the Congress will make awards to honor the contributions of selected epidemiologists. ■

Key Facts On Upcoming Epidemiology Congresses

Key	Meetings				
Features					
Location	Montreal, Canada	Edinburgh, Scotland			
Date	June 21 – 24, 2011	August 7 – 11, 2011			
Sponsor(s)	ACE, APHA, SER, CSEB and co- sponsors	IEA			
Theme	Nore	Changing populations, Changing Disease: Epidemiology For Tomorrow's World			
T yp es of Sessions	 Invited Plenary Speakers Symposia Oral Presentations Poster Sessions Pre-Congress Workshops 	 Invited Plenary Speakers Symposia Oral Presentations Poster Sessions 			
URL	http://www.epicongress2011.org	http://www.epidemiology2011.com			
Deadlines	Abstracts: January 5, 2011 Symposia: October 31, 2010	Abstracts: January 21, 2011 Symposia: October 22, 2010 Early Registration: April 29, 2011			
Meetings in Conjunction	SPER • June 20 – 21 CPHA • June 19 – 22	Nore			
Registration Fees	Not listed but to be reduced for members of the four sponsoring societies.	IEA £300 – Early £375 – Late £425 – Onsite Non-IEA £340 – Early £415 – Late £465 – Onsite			
Honotary Lectures	NotListed	•Richard D oll Lecture •John Snow Lecture •Robert Cruickshank Lecture			
Awards Multiple		NotListed			

EPI Job Bank

The Epi Job Bank provides capsule listings of all known job opportunities currently available in epidemiology. Any employer may list one or more available jobs free of charge until filled. Listings are revised and updated monthly. To add new listings or to notify us when vacancies have been filled, please call the Epi Monitor: 770/594-1613 or fax: 770/594-0997. Bullets (•) before state indicate new listings. Asterisks (*) indicate fax numbers. Oao=open as of (the date listed). Cd=closing date of (the date listed).

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MD	College Park	Univ. of Maryland	Professor Positions	PHD	Sue Anne Swartz	*309/405-2542	sswartz@umd.edu	oao 09/23/10
MD	Hyattsville	NCHS	Health Policy Fellow	PHD Candidate	Beth Johnson	*209/292-6800	nchs@academyhealth.org	oao 09/27/10
MD	Rockville	FDA	PH Analyst	adv. epi train	Cheryl Reynolds		cheryl.reynolds@fda.hhs.gov	oao 09/09/10
MD	Rockville	FDA	Branch Chief	MD/MPH	Robert Wise	*309/827-5218	robert.wise@fda.hhs.gov	oao 09/27/10
MD	Rockville	FDA Center for Biologics	Epidemiologists	MDD/MPH,equiv	Robert Wise	*309/827-5218	robert.wise@fda.hhs.gov	oao 09/27/10
MD	Rockville	FDA-CBER	Medical Epi	Doctoral Degree	Robert Wise	309/827-6089	robert.wise@fda.hhs.gov	oao 09/27/10
MD	Rockville	Westat	Biostatistician	PHD	R. Carow	309/294-2092	hrhs@westat.com	oao 09/09/10
MD	Rockville	Westat	Sr. Epi/Int'l Stud	MD/PHD	R. Carow	309/294-2092	hrhs@westat.com	oao 09/09/10
MD	Rockville	westat	Study Mgr	Masters	R. Carow	309/294-2092	hrhs@westat.com	oao 09/09/10
VID	Rockville	westat	Epidemiologist	PHD	R. Carow	309/294-2092	hrhs@westat.com	oao 09/09/10
VIE	Augusta	ME DHHS	Intections Epi	MPH	Virginia Roussel	209/287-1873	virginia.roussel@maine.gov	oao 09/09/10
ME	Augusta	ME DHHS	Epidemiologist	MPH	Virginia Roussel	209/287-1873	virginia.roussel@maine.gov	oao 09/27/10
VII	Okemos	MPHI University of Minne	Epidemiologist	Master's	Tracy Thompson	517/381-0260	hr@mphi.org	oao 09/27/10
VIN	winneapolis	Univ. of Winn	Pre/Post Epi	MS/PHD		*400/040 000-	rossx014@umn.edu	oao 09/27/10
IVIN	iviissoula	UNIV. OT MIN	violecular Epidemiologist	IND/PHD	Andrij Holian	r409/243-2807	andrij.holian@umontana.edu	oao 09/27/10

Sta	te City	Institution	Description	Degree	Contact	Phone/*Fax	Email/Fax	oao/cd
•MT	Helena	MT DPHHS	Sr. PH Epi	Doc/Master's	Tina Berkshire	409/444-4450	tberkshire#mt.gov	oao 09/27/10
•NC	Chapel Hill	UNC	Post-doc	PHD in PH,epi	Rachel Larsen		reclarsen@gmail.com	oao 09/27/10
•NC	Chapel Hill	UNC	Proj Coordinator	MPH, epi	Jennifer Smith	919/966-7450	jsssmith@email.unc.edu	oao 09/27/10
NC	RTP	RTI Int'I	Genetic Epi	PHD	Eric O. Johnson	919/990-8347	ejohnson@rti.org	oao 09/23/10
NC	RTP	RTI Int'I	Research Epi II	PHD	L Andrusyszyn	919/541-6765	landrus@rti.org	oao 09/23/10
NC	RTP	RTI Int'I	Sr. Enviro Epi	PHD/MD	Ellen Benzine	919/571-2716	ebenzine/contractor@rti.org	oao 09/27/10
NJ	Springfield	ClinForce, LLC	Epi Specialist	MPH	Cathy Zeier	*919/941-0071	czeier@clinforce.com	oao 09/09/10
NY	Bronx	Albert Einstein	Cancer Epidemiologist	PhD in epi or MD	Thomas Rohan		rohan@aecom.yu.edu	oao 09/27/10
NY	New York	Albert Einstein	PD Fellow	PHD epi/biostat	Robert Kaplan	*718/430-3588	rkaplan@aecom.yu.edu	oao 09/09/10
•NY	New York	Mt. Sinai SOM	Genetic Epi	PHD/MD MS/MPH	Paolo Boffetta	*212/996-0407	paolao.boffetta@mssm.edu	oao 09/27/10
•NY	New York	Mt. Sinai SOM	Ad/dementia Epi	Phd/MD MS/MPH	Paolo Boffeta	*212/996-0407	paolo.boffetta@mssm.edu	oao 09/27/10
•NY	New York	NYC DHMH	PH Res/Advisor	MD,PHD,ScD,DrP	H Debbie Lew		dlew@health.nyc.gov	10/30/2010
NY	Rochester	Univ of Rochester	Infectious Dis Epi	PhD-epi or related	Susan Fisher	*585/461-4532	Susan_Fisher@URMC.Rochester.edu	oao 09/27/10
NY	Rochester	Univ. of Rochester	Epidemiologist	PHD	Lois B. Travis		lois_travis@urmc.rochester.edu	oao 09/27/10
OH	Columbus	OH State Uni	Ass't/Assoc Prof	PHD/MD	Eric Lutz	614/292-2590	elutz@cph.osu.edu	oao 09/26/10
•OH	Columbus	OSU	Ass't/Assoc/Full Prof	PHD/MD	Kat Marriott	614/688-5746	phpid@osu.edu	oao 09/27/10
OH	Kent	KSU	Sr. Fac. Positions Epi	PHD	Shelley Sullivan	*850/650-2272	shelleysullivan@greenwoodsearch.com	oao 09/27/10
•OH	Kent	KSU	Sr. Fac in Epi	PHD	Shelley Sullivan	*850/650-2272	shelleysullivan@greenwoodsearch.com	oao 09/27/10
•OR	Portland	OSU	FacultyAss't - Epi	BS	Jessina McGregor	509/494-4722	mcgregoj@ohsu.edu	oao 09/27/10
•OR	Portland	OSU	Postdoc Scholar	PhD,MD	Jessina McGregor	*509/494-8797	mcgregoj@ohsu.edu	oao 09/27/10
PA	Horsham	Johnson & Johnson	Sr. Safety Scientist	MSc, MPH in epi	Ray Barber	609/730-3302	rbarber@its.jnj.com	oao 09/23/10
PA	Philadelphia	Drexel University	PHD epidemiology	PHD in epi	Craig J. Newschaffe	r *215/762-1174	cnewscha@drexel.edu	oao 09/09/10
•PA	Philadelphia	Temple University	Tenure Track	doctoral degree	Deborah Nelson	*215/204-1854	dnelson@temple.edu	oao 09/27/10
PA	Philadelphia	Westat	Biostatistician	PHD	R. Carow	*309/294-2092	hrhs@westat.com	oao 09/09/10
PA	Philadelphia	U of Pennsylvania	Clin Epi/Hlth Srv Res Fell	Adv degree	Jennifer Kuklinski	215/898-0861	jkuklins@mail.med.upenn.edu	oao 09/27/10
ΤN	Nashville	Meharry College	Jr. Epidemiologist	MPH or related	Roger Zoorob	*615/327-5634	rzoorob@mmc.edu	oao 09/26/10
TN	Nashville	Vanderbilt Univ	Post-doc Fell Cancer Epi	PhD,Dr.PH or MD	+MPH Wei Zheng	615/936-0682	Wei.zheng@vanderbilt.edu	oao 09/27/10
TN	Nashville	Vanderbilt Univ	Post Doc Fellow	PhD	Wei Zheng	*615/936-1269	wei.zheng@vanderbilt.edu	oao 09/27/10
VA	Arlington	Degge Group	Epi Project Mgr	DPh/PhD;MD;MPI	H Robert Keelin	709/276-0069	apply_to_hr@yahoo.com	oao 09/27/10
•VA	Arlington	Degge Group	Epi Proj Manager	DPh/PHD	Robert Keelin	709/276-0069	apply_to_hr@yahoo.com	oao 09/27/10
VA	Arllington	Degge Group	Epi Project Mgr	DPh/PHD/MD/MP	H Robert Klein	709/276-0069	apply_to_hr@yahoo.com	oao 09/27/10
VA	Richmond	VA Comm. Univ	Pdoc Fellow pharmacoepi	doctoral in epi	Kate Lapane	+000/000 0770	kllapane@vcu.edu	oao 09/23/10
VA	Richmond	VCU	PD Fellow	PHD, MPHw/MD	Yi Ning	*809/828-9773	yning2@vcu.edu	oao 09/23/10
VT	Burlington	VIDOH	PH Analyst	PHD	Laurel Decher	*809/652-4157	Idecher@vdh.state.vt.us	oao 09/27/10
•VF	Burlington	VIDOH	PH Analyst III	PHD	Jenniter Hicks	809/863-7264	jenniter.hicks@ahs.state.vt.us	oao 09/27/10
WA	Seattle	Fred Hutchinson	PD Fellow	PhD	Scott Canavera	^209/667-4051	scanavera@thcrc.org	oao 09/27/10
WA	Seattle	GHR Institute	Postdoc Fellow	PHD/MD	Lacey Greene	^209/287-2871	t32womenshealth@ghc.org	oao 09/27/10

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EPI Job Bank Foreign Listings

Count	ry City	Institution	Description	Degree	Contact	Phone/*Fax	Email/Fax	oao/cd
Brazil	Rio de Janeiro	GlaxoSmithKline	Dir. of Epi	MD/PHD	Sholeh Dadressan	215/751-3660	sholeh.2.dadressan@gsk.com	oao 07/10/10
CA	Calgary	Alberta CR Brd	Post D in Epi	PHD in epi	Sue Robinson	*403/476-2416	careers@cancerboard.ab.ca	oao 09/23/10
CA	Quebec City	Universite Laval	Post Doc Fellowship	PHD	Marc Brisson	*418/682-7949	marc.brisson@uresp.ulaval.ca	oao 09/23/10
CA	Quebec City	Universite Laval	Research Assistant	MSc	Marc Brisson	*418/682-7949	marc.brisson@uresp.ulaval.ca	oao 09/15/10
CA	Calgary	Alberta Cancer	Res. Stat. Sci	PHD	Sue Robinson	403/521-3713	suerobin@cancerboard.ab.ca	oao 09/24/10
CA	Edmonton	CNHWG	PD - Epi Res	PHD	Karen Goodman	*780/492-6153	karen_j_goodman@yahoo.ca	oao 09/23/10
CA	Edmonton	Univ of Alberta	PD Fellow	PHD	Karen Goodman	*780/492-6153	karen.goodman@ualberta.ca	oao 03/11/10
CA	Montreal	McGill University	Cancer Epi	PHD	Armen Aprikian	514/934-8353	lina.maglieri@muhc.mcgill.ca	oao 09/23/10
CA	Toronto	OAHPP	Epi - Hos Infection	MPH	Ami Au-Yeung	647/260-7132	careers@oahpp.ca	oao 09/23/10
CA	Toronto	OAHPP	Epi - Chronic Dis	MPH	Ami Au-Yeung	647/260-7132	careers@oahpp.ca	oao 09/23/10
CA	Toronto	OAHPP	Senior Epi	MPH	Ami Au-Yeung	647/260-7132	careers@oahpp.ca	oao 09/23/10
CA	Toronto	OAHPP	PH Epi	MPH	Ami Au-Yeung	647/260-7132	careers@oahpp.ca	oao 09/23/10
CA	Montreal	McGill University	Postdoctoral Pos.	PHD/equiv	Eduardo Franco	*514/398-5002	eduardo.franco@mcgill.ca	oao 04/10/10
Canada	Alberta	Alberta Cancer Board	Statistical Associate	Masters-biostat,st	at HR	*403/270-3898	careers@cancerboard.ab.ca	oao 09/24/10
Canada	Alberta	Alberta Cancer Board	Research Associate	Masters-epi,ph,co	m HR	*403/270-3898	careers@cancerboard.ab.ca	oao 09/24/10
Canada	Alberta	Alberta Cancer Board	Research Associate	MSc Epidemiolog	Theresa Radwell	*403/270-8003	tradwell@cancerboard.ab.ca	oao 09/24/10
Canada	Fredericton	New Brunswick Cancer N	et Senior Epidemiologist	PHD in Epi w/ 4 y	s. Amanda Carroll	506/444-2360	www.gnb.ca/0163/employ-e.asp	oao 09/24/10
Canada	Fredericton	New Brunswick Cancer C	enter Biostatistican	Masters in Biostat	Amanda Carroll	506/444-2360	www.gnb.ca/0163/employ-e.asp	oao 09/24/10
Canada	Calgary	Alberta Cancer Brd	Res. Biostat. Sci	PHD	Sue Robinson	403/521-3713	suerobin@cancerboard.ab.ca	oao 09/24/10
*Canada	a Calgary	Alberta Cancer Brd	PD Fell-Epi	PHD	Sue Robinson	403/521-3713	suerobin@cancerboard.ab.ca	oao 09/24/10
Canada	Montreal	Univ. de Montreal	Postdoc Cancer Epi	PHD	Anita Koushik	*514/890-8000	anita.koushik@umontreal.ca	oao 05/10/10
Canada	Montreal	McGill University	Professorship	Doctorate	Holly Nazar	514/398-4501	admincoord.pot@mcgill.ca	oao 08/13/10
 Canada 	Toronto	Mt. Sinai	Res Coordinator	MS in epi	James Wickham	*416/586-8404	wickham@lunenfeld.ca	oao 09/27/10
 Canada 	Toronto	Mt. Sinai	Res. Coordinator	MS in epi	Rayjean Hung	*416/586-8404	rayjean.hung@lunenfeld.ca	oao 09/27/10
 Canada 	Halifax	Capital District	Director	MSc/PHD	Hala Finians	902/ 473-3203	hala.finians@cdha.nshealth.ca	oao 09/27/10
•FR	Lyon	IARC/WHO	Postdoc Fellow	Phd/MD	Eve El Akroud	*330472738080	fel@iarc.froao	09/27/10
 France 	Lyon	IARC	Scientist	MD/PHD in epi	HR	33472738457	www.who.int/employment	oao 09/27/10
Greece	Athens	Univ. of Athens	Biostatistician	PHD/MSc w/pub	Elena Riza	*+30/2107462058	eriza@med.uoa.gr	oao 09/23/10
Peru	Lima	Int'l Potato Center	Leader of Agriculture	PHD in Epi	Rosario Marcovich	+51 1 349 6017	CIP-Recruitment@cgiar.org	oao 09/23/10
PR	Ponce	Ponce SOM	Director (PH)	Doctoral	R. Ivan Iriarte	787/840-2575	iiriarte@psm.edu	oao 04/23/10
Spain	Barcelona	CREAL	Research Position-Biostat	solid biostat back	Josep-Maria Anto		jmanto@imim.es	oao 09/23/10
Switzerl	and	Fearn Associates	Molecular Epidemiologist	PhD-biostat or epi	Information		info@fearn-associates.com	oao 04/23/10
•UK	London	LA-SER	Pharmacoepi	Masters in epi	A Hammon	00442031375800	ahammond@la-ser.com	oao 09/27/10
•UK	London	LA-SER	Director	PhD in epi or PH	A Hammond	00442031375805	ahammond@la-ser.com	oao 09/27/10

PROFESSOR AND FOUNDING CHAIR DEPARTMENT OF BIOSTATISTICS The University of Florida Health Center

The University of Florida Health Science Center is conducting a search for Professor and Founding Chair of the Department of Biostatistics, a newly configured department administered jointly by the College of Medicine and the College of Public Health and Health Professions. Qualifications for the position include a doctoral degree in Biostatistics or a related quantitative discipline. A record of academic accomplishments, scholarly recognition, external research support, and leadership responsibilities to warrant appointment at the level of professor is essential.

Establishment of a dedicated joint Department of Biostatistics was approved in June, 2010 as part of a reorganization plan within UF's Health Science Center, although the new department builds upon existing academic and administrative foundations. The chair will have an opportunity to expand and strengthen the department through strategic faculty hires, creative approaches to master's (MPH and MS) and PhD academic programs, and leadership of strong biostatistics and computational biology research and consulting groups. In addition, the chair provides leadership and oversight of all aspects of departmental functions, including practice and service, finances, human resources, and governance structures. The chair works with the deans and the faculty to assure an infrastructure and culture that promote academic career development and facilitate appropriate tenure and promotion of faculty members. The Biostatistics Department chair participates with other chairs in the leadership and policy infrastructures of both colleges. An important function of the new department is to promote collaborative research among Health Science Center colleges, and to assure that biostatistics and computational biology skills are available and accessible to investigators, especially those involved in clinical and translational research. The department will be housed in a new state-of-the-art, carbon-neutral, LEED Platinum facility, located in the heart of the Health Science Center, and constructed specifically to promote collaborative endeavors in clinical and translational research.

The Health Science Center consists of six accredited colleges – dentistry, medicine, nursing, pharmacy, public health and health professions, and veterinary medicine. As a result of a long-term strategy to create physical facilities and provide strong academic support for collaboration, UF is a leader in interdisciplinary research and education. Major institutes and centers, including the Emerging Pathogens Institute, the Institute on Aging, the UF Shands Cancer Center, the UF Genetics Institute, the McKnight Brain Institute, and the Clinical and Translational Science Institute provide state-of-the-art environments for faculty from many colleges to address critical health-related research issues. In addition, collaboration across the UF campus, especially with the Department of Statistics, is frequent and encouraged. The University of Florida is a land-grant university, the oldest and largest public university in Florida, and a member of the Association of American Universities. The university is recognized as a Research 1 Institution by the Carnegie Commission on Higher Education and the Florida State University System Board of Governors.

Application review will begin November 1, 2010 and continue until a suitable applicant pool has been established. Interested applicants should send a letter of interest referencing PS# 00026011, Curriculum Vitae, and three letters of reference to J. Glenn Morris, MD, MPH&TM, Search Committee Chair, c/o Ms Audrey Duke, P.O. Box 100014, Gainesville, FL 32610-0014 (Phone: 352-733-1706; Fax: 352-733-1707; Email: dukea@ufl.edu or jgmorris@epi.ufl.edu).

The University of Florida is An Equal Opportunity Employer. Individuals with minority and/or disability status are encouraged to apply. If an accommodation due to a disability is needed to apply for this position please call 352-392-1251 or TDD 352-392-7056.

Department of Health and Human Services National Institutes of Health National Institute on Alcohol Abuse and Alcoholism



Staff Scientist Positions Available

The National Institute on Alcohol Abuse and Alcoholism (NIAAA), a major research component of the National Institutes of Health (NIH) and the Department of Health and Human Services (DHHS), is seeking two exceptional candidates for Staff Scientist positions within the Laboratory of Epidemiology and Biometry, Division of Intramural Clinical and Biological Research, NIAAA. Successful candidates will be part of a multidisciplinary research laboratory involved in designing, planning and analyzing cutting-edge human genome epidemiological studies. The current focus of the Laboratory is the planning of a large (N=50,000) nation-wide genetic epidemiologic study that will include whole genome sequencing.

Candidates are sought from two different backgrounds:

<u>Epidemiologists/Survey Statisticians</u>: Experience in the analysis and interpretation of health data; development of statistical methods for analyzing large in-house and public use data files; statistical analysis using SAS, SUDAAN and other software packages; planning and monitoring national studies and preparation of survey instruments and documentation.

<u>Genetic Epidemiologists</u>: Experience in the design and statistical analysis of whole genome data to identify genetic variants associated with alcohol, drug and related psychiatric disorders and to elucidate gene-gene and gene-environment interactions; experience using statistical programs and packages like R, SAS, PHASE and PLINK to analyze whole genome data within the context of large datasets.

Candidates must have a Ph.D. or equivalent doctoral degree in epidemiology, genetics, statistics, biostatistics, molecular epidemiology, statistical genetics, behavior genetics or related field and at least 3 years of postdoctoral expertise. Criteria for selection include demonstrated expertise and experience in the design and analysis of epidemiologic or whole genome data and contributions to complex genetic or epidemiological research programs.

<u>Application Process</u>: Salary is competitive and commensurate with experience and a full package of Civil Service benefits is available including retirement, health and life insurance, long term care insurance, leave and savings plan (401K equivalent). To be considered for this position, please submit a curriculum vitae, bibliography, the names, addresses, contact numbers (phone and fax) and e-mail address of at least three references and a brief statement of research experience, interests and goals (via pdf or Microsoft word format only – paper applications will not be accepted) by the closing date to **the following e-mail account**:

E-mail: LEBStaffSciRecruit@mail.nih.gov

The closing date for receipt of applications is December 30, 2010

The NIH encourages the application and nomination of qualified women, minorities and individuals with disabilities. This position is subject to background investigation.



Post Doctoral Trainee for Global Health Research

Case Western Reserve University is seeking a qualified post-doctoral scholar for interdisciplinary post-doctoral training in global health. The post-doctoral training program in global health, funded by the Fogarty International Center and the National Institute of Nursing Research, combines a mentored research project designed by the fellow in collaboration with faculty mentors in the Departments of Epidemiology, Anthropology, and Nursing, with a specialized curriculum of formal training in global health and self-management of lymphatic filariasis.

One post doctoral scholar each in the fields of epidemiology, anthropology, and nursing will combine on-campus training with long term field experience in collaboration with cutting edge research on the elimination of lymphatic filariasis in Papua New Guinea. No previous experience with lymphatic filariasis is necessary.

Salary and international living funds are highly competitive. Start date in early 2011.

Please submit a cover letter, CV and the names of two references by 12/15/2010 to: Daniel Tisch, Ph.D., Department of Epidemiology and Biostatistics, Case Western Reserve University, Cleveland, OH 4410-4945 or Daniel.Tisch@case.edu.

In employment, as in education, Case Western Reserve University is committed to Equal Opportunity and Diversity. Women, veterans, members of underrepresented minority groups, and individuals with disabilities are encouraged to apply.

Two Epidemiology Faculty Positions East Tennessee State University College of Public Health

College of Public Health, East Tennessee State University (ETSU) – Recruiting two Tenure-Track Faculty Positions in Epidemiology.

The Department of Biostatistics and Epidemiology is inviting applications for two full-time epidemiology faculty positions at the Assistant/Associate/Full Professor level.

The Department has a Graduate Certificate and the MPH degree in both biostatistics and epidemiology and a DrPH degree in epidemiology. Current research focuses include cancer prevention, genetic research, and improving the health of underserved populations. The College website is at: http://www.etsu.edu/cph

Applicants must possess a doctoral degree in Epidemiology or a doctoral degree in a related field and substantial relevant experience. A record of peer-reviewed scholarship is required and evidence of a strong funded research program is highly desired. The successful candidate is expected to obtain competitive extramural salary support within 4 years. Graduate teaching and mentorship of students is expected. Salary will be commensurate with qualifications and experience. Positions will be opened until filled. It is desired that the successful applicant will start by August of 2011 at the latest.

ETSU is a public university with about 12,000 undergraduates and 2,000 graduate and professional students. ETSU also has Colleges of Medicine, Pharmacy, Nursing and Clinical and Rehabilitative Health Sciences. Johnson City is located in scenic east Tennessee surrounded by mountains and lakes.

All Applicants must submit an online ETSU Employment Application at eJobs, https://jobs.etsu.edu/ . AA/EOE For questions about application process, contact Human Resources at (423) 439-5890. Send position questions to Ms. Rickie Carter at carterrh@etsu.edu<mailto:carterrh@etsu.edu>. Search Committee Chair is James Anderson, MD, MPH, PhD, Associate Professor, ETSU Department of Biostatistics and Epidemiology, Box 70259, Johnson City, TN 37614-

School of Public Health University of Maryland College Park Department of Epidemiology and Biostatistics POSITION VACANCY: DEPARTMENT CHAIR

The University of Maryland College Park, School of Public Health is searching for a Chair of its Department of Epidemiology and Biostatistics. We invite applications and nominations for this tenured, full time faculty position at the professor level. The Chair will provide strategic research and academic leadership for this young and dynamic department. The Department's mission is to conduct methodological and collaborative research to examine, develop, test and apply established and novel epidemiological and biostatistical methods for the purpose of addressing the public health needs of population at risk for disease through a social-behavioral lens. The Department offers a MPH degree with concentrations in Epidemiology or Biostatistics, and a PhD in Epidemiology.

The position represents an opportunity to lead a growing department and make important contributions to an exciting research agenda and graduate student training program. The Chair will provide senior academic and strategic leadership and advance the teaching, research and service activities of the Department and the School and will serve as a member of the School's senior leadership. Management responsibilities include overseeing Department budgets, mentoring and developing faculty, students and staff; communicating activities and disseminating research findings nationally and internationally; and representing the Department to the university, community and organizations. The Chair also will initiate and conduct research, publish in peer-reviewed journals, and participate in teaching.

The applicant must have a doctoral degree in epidemiology or related disciplines and must have substantive and documented expertise as a Principal Investigator of funded epidemiologic research. In addition the applicant must have national recognition as a scholar of epidemiology, strong academic and administrative experience and should be eligible for appointment as a tenured Professor. This is a 12-month tenured appointment. Salary is competitive and commensurate with qualifications and experience. Appointments may begin July 2011 or a mutually agreed upon date.

For full consideration, applicants should submit a letter of application clearly indicating how they meet the qualifications and their research interests and future research plans; a current curriculum vitae, and contact information for three references. For best consideration candidates should submit their application by January 15, 2011. Review of applications will begin until the position is filled. For the full announcement, additional information and to submit applications electronically go to: https://jobs.umd.edu. Position number 105990 is listed under faculty section. If you have any questions, please email Karen L. Mackey – KLMACKEY@UMD.EDU.

The School of Public Health and the University of Maryland is an Equal Opportunity, Affirmative Action, Equal Access institution. Applications from minority and women candidates are strongly encouraged. For further information on the Department of Epidemiology and Biostatistics, please visit our Web Site: http://www.sph.umd.edu/epib/

UTMB

Job Opportunity Faculty Position in Women's Health (Assistant Professor) The University of Texas Medical Branch at Galveston

The University of Texas Medical Branch at Galveston (UTMB) is recruiting to fill a faculty position in UTMB's Center for Interdisciplinary Research in Women's Health (CIRWH). Candidates with a background in socio/behavioral science or epidemiology/biostatistics with a primary interest in women's health issues are invited to apply. Research strengths of CIRWH faculty include reproductive health, risk behaviors, family planning, obesity and substance use.

UTMB was established in 1891 as the first academic health center in Texas and is among the oldest in the nation. It includes four schools (Medicine, Nursing, Health Professions, and Graduate School of Biomedical Sciences), three institutes for advanced study, a major medical library, a network of hospitals and clinics, and numerous research facilities. UTMB is one of four health sciences centers in the University of Texas system.

The successful candidate is expected to develop an independent research program in women's health which will include obtaining extramural funding. There will also be an opportunity to teach and mentor postdoctoral fellows in Reproductive Health. In addition to UTMB's CIRWH, there will be opportunities to collaborate with faculty in the Institute for Translational Sciences as well as other university related programs.

Applicants must have a doctoral degree (PhD or DrPH) in a social science, epidemiology, demography, public health, or related field. Candidates must have relevant postdoctoral experience and show promise of ability to develop an independent research program in women's health.

The position will start on or before September 1, 2011 contingent on receipt of funding. Salary will be commensurate with experience and qualifications. Interested applicants should submit a letter of interest with description of experience, research interests, and career goals in women's health issues, along with their curriculum vitae and contact information for three professional references. Send materials to the Search Committee Chair, Dr. Abbey B. Berenson (abberens@utmb.edu).

The University of Texas Medical Branch at Galveston is an equal opportunity, affirmative action institution which proudly values diversity. Candidates of all backgrounds are encouraged to apply.

Faculty Position in Statistics for Health	Oregon State University
Services Research - #TD0209D	Tenure-Track Epidemiology Faculty Positions
The Dartmouth Institute for Health Policy & Clinical Practice, Dartmouth Medical School The Dartmouth Institute for Health Policy & Clinical Practice is seeking a statistician to join a highly productive health services research program in Hanover, NH. Requirements: Doctorate in statistics or related field with strong methodological skills; experi- ence in health services research and epidemiology; strong collaborative skills. Appointment will be at the assistant, associate or full Professor level depending on qualifications and experience. Interested applicants should address cover letter to Julie Bynum, MD, MPH. Submit cover letter and curriculum vitae electronically to: Kathy.Stroffolino@dartmouth.edu (sub- ject line: TD0209D) EOE: Dartmouth Medical School is an affirmative action/equal opportunity employer and strongly encourages women and minority candidates to apply.	As part of a strategic plan to establish a CEPH-accredited College of Public Health and Human Sciences, Oregon State University (OSU) is recruiting 2 new tenure-track epidemiology faculty. These positions are full-time, 9-month tenure-track appointments at the rank of Assistant or Associate Professor (rank depending on qualifications). Responsibilities including development of an independent research portfolio, teaching graduate and undergraduate courses, providing service to the commu- nity and field of public health, and assisting in the CEPH accreditation for the new College. Although all areas of research focus will be considered, we are particu- larly interested in candidates with expertise in chronic diseases, physi- cal activity, injury, infectious disease, environmental health or public health nutrition, and those with a focus on under-served and interna- tional populations. Required qualifications include a doctorate in Public Health, Epidemiology, Exercise Science, Nutrition, or related field; training and experience that fulfill CEPH accreditation require- ments for core public health faculty in epidemiology, i.e. a graduate degree in Epidemiology; demonstrated expertise in public health as reflected by academic training, research, teaching and/or service, and a research focus aligned with the focus of the College. OSU is located in Corvallis, in the heart of the Oregon's beautiful Willamette valley, within 90 minutes of the Portland Metropolitan area, world class skiing and the spectacular Oregon coast. Corvallis has been recognized as one of the best college towns and one of the top ten places to live in the U.S., and is particularly known for its hiking and biking trails, nearby wineries, local farmer's market and area festivals. Check the website for the full position description. To apply for the position, you MUST apply online at the OSU job site, search for posting #0006367:https://jobs.oregonstate.edu/applicants/jsp/shared/Welcom e_css.jsp . For questions regarding the positions, please conta

The Department of Biostatistics and Epidemiology, College of Public

Health, The University of Oklahoma Tulsa Schusterman Center

The University of Oklahoma – Tulsa Schusterman Center is recruiting for a tenure-track faculty position. Candidates must have either a doctoral degree in epidemiology or an MD with an MPH or MS in epidemiology, and experience conducting collaborative epidemiologic research. Teaching experience at the graduate level is desirable. Epidemiologists in all areas are encouraged to apply. Responsibilities include teaching graduate-level courses in epidemiology, maintaining an active collaborative and independent research program, mentoring MPH, MS, PhD and DrPH students in epidemiology and M.D. students and residents in the School of Community Medicine (SCM), and participating in professional service. The new faculty will have a joint appointment in the Department of Biostatistics and Epidemiology within the College of Public Health at the University of Oklahoma Health Sciences Center in Oklahoma City and the University of Oklahoma – Tulsa School of Community Medicine. The position is located at the University of Oklahoma Schusterman Center in Tulsa.

Opportunities exist for interdisciplinary and collaborative research initiatives and training programs with the School of Community Medicine, as well as other departments and centers in Tulsa and the University of Oklahoma Health Sciences Center in Oklahoma City. The Schusterman Center is the hub of the OU-Tulsa campus and provides new, state-of-the-art educational facilities and faculty offices. Located approximately 90 miles northeast of Oklahoma City in the forested rolling foothills of the Ozark Mountains, Tulsa has a rich history of art, culture and architecture and was recently named by Forbes as one of America's most livable large cities. The Department of Biostatistics and Epidemiology is one of four departments in the College of Public Health, which also includes five funded research centers.

Between the Tulsa and Oklahoma City campuses, the department currently mentors approximately 50 students in MPH, MS, PhD and DrPH programs and performs active research in health disparities, tobacco control, genetic epidemiology of cardiovascular disease, environmental toxicants and reproductive health, neuroepidemiology, communicable diseases and international health. Individuals interested in applying should send a letter outlining their qualifications, research interests and teaching experience, current curriculum vitae, a preferred address for confidential correspondence, and the names and contact information of three references. The search is confidential and applicants will be contacted prior to requesting letters of reference. All materials should be sent to:

> Gary Raskob, Ph.D. Dean, College of Public Health 801 NE 13th St, CHB 139 Oklahoma City, OK 73104 or deanna-debus@ouhsc.edu

Applications will be accepted until the position is filled.

The University of Oklahoma is an Equal Opportunity / Affirmative Action Employer. Women and minorities are encouraged to apply. Please visit our web sites at http://tulsa.ou.edu/ and http://www.coph.ouhsc.edu/coph/bse/BSE.asp.

Assistant Professor

The University of Nevada, Reno, School of Community Health Sciences is seeking candidates for a full-time faculty position in Epidemiology. Research and teaching interests in environmental epidemiology are preferred. Duties include: teaching, advising graduate and undergraduate students, developing an independent program of scholarship, engaging in community and professional service appropriate to a university faculty member. For complete position description and requirements, contact Wei Yang, weiyang@unr.edu; Bonnie Coker, sph@unr.edu or view at http://hhs.unr.edu/schs/ and http://jobs.unr.edu.

Application reviews will begin December 15, 2010. For full consideration, please complete your application prior to December 15, 2010.

Advertise your job, event, book and/or software in The Epidemiology Monitor!

> Contact: Cynthia Wright, Director of Operations

The Epidemiology Monitor 2560 Whisper Wind Court Roswell, GA 30350

> Tel: 770/594-1613 Fax: 770/594-0997

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University of Massachusets Amberst School of Public Health and Health Sciences

Assistant Professor in Epidemiology Tenure Track Position

The University of Massachusetts-Amherst, School of Public Health and Health Sciences (www.umass.edu/sphhs/) is seeking applicants for a tenure track position in Epidemiology at the Assistant Professor level.

Position: This is a fully funded (9-month) tenure track position. The successful candidate will join the faculty in the Division of Biostatistics and Epidemiology, Department of Public Health. Responsibilities will include research; teaching, at the undergraduate and graduate level; and advising masters and doctoral students enrolled in MS, MPH and PhD programs. Candidates will be expected to develop their own research program, and engage in collaborative research. The Division of Biostatistics and Epidemiology consists of five epidemiologists and seven biostatisticians actively engaged in research and teaching. Division members collaborate extensively with colleagues from other units in the School of Public Health and Health Sciences and the university, and with investigators from the University's Medical School, the Pioneer Valley Life Sciences Institute and the Baystate Medical Center. Present areas of epidemiologic research include cancer, genomics, nutrition, diabetes and reproductive health. The University is located in the scenic Pioneer Valley of Western Massachusetts, which is home to five colleges (Amherst College, Mount Holyoke College, Smith College and the University of Massachusetts) with easy access to several major metropolitan areas.

Qualifications: Candidates for the position must meet the following requirements: Ph.D. in Epidemiology or equivalent degree Evidence of independent and collaborative research potential Demonstrated interest and ability in teaching at the undergraduate and graduate level

First Review: The application review process will begin December 20, 2010 and will continue until the position is filled. Anticipated start date is September, 2011.

Salary/Benefits: The University offers a competitive salary with an attractive benefits package.

Applications: Interested candidates should submit their curriculum vitae, a description of their research and teaching interests, and three letters of reference. Applications may be submitted by mail or electronically.

Dr. Susan Sturgeon, Search Committee, 407 Arnold House, 715 N. Pleasant St., University of Massachusetts, Amherst, MA 01003-9304; phone (413)-577-1364; email:

YUTMB

NRSA T32 Postdoctoral Fellowship Interdisciplinary Women's Reproductive Health

The University of Texas Medical Branch in Galveston, TX is accepting applications for one postdoctoral fellow interested in pursuing an academic career in women's health research. This 2-year NIH funded fellowship provides formal and informal training in theory and methods as well as practical experience in conducting clinical research. Program faculty include national experts in statistics, epidemiology, and women's health who can offer many opportunities to participate in data analysis, manuscript preparation, and grant writing in a collaborative environment.

Who may apply: Applicants who have completed a MD, PhD, or equivalent degree in epidemiology, biostatics, public health or related field and have a strong interest women's health. Must be US citizen, noncitizen national or permanent resident and able to commit full time effort to the program for 2 years.

To apply, send 1) a personal statement including career goals, a brief description of proposed research, and how this training will help achieve your career goals; 2) a current CV; and 3) 3 letters of reference to:

Abbey Berenson, MD, MMS at abberens@utmb.edu

Associate/Full Professor PEDIATRIC AND PERINATAL EPIDEMIOLOGY

Department of Epidemiology and Population Health, Albert Einstein College of Medicine

Applications are invited for a full-time Associate/Full Professor in pediatric and perinatal epidemiology in the Department of Epidemiology and Population Health (DEPH) and the Department of Pediatrics at the Albert Einstein College of Medicine, a leading research institution with a strong commitment to excellence in research. The DEPH is well recognized for its multi-disciplinary programs in epidemiologic, prevention, and health services research and is currently undergoing considerable expansion of its faculty base, and the Department of Pediatrics cares for one of the largest pediatric populations in the country and has a robust basic, translational, and clinical research portfolio. The position will provide opportunities for diverse research collaborations in a highly collegial environment and for teaching medical and graduate students.

The epidemiologist who occupies this position will take the lead in developing a major research program in pediatric and perinatal epidemiology, including an envisaged longitudinal study of the children of the Bronx that will be able to leverage the electronic medical record system used by the Department of Pediatrics. An attractive start-up package will be provided for this purpose, including support for additional faculty positions and multiple research support staff.

The successful candidate will have either a PhD in epidemiology or an MD with advanced training in epidemiology, particularly in areas of neonatal, pediatric and/or adolescent epidemiology supported through peer-reviewed funding. Rank will be commensurate with experience.

Interested candidates should submit a cover letter describing their research and teaching experience and listing three referees, together with their curriculum vitae, to:

Tom Rohan, M.D., Ph.D. (Ref: AECOM-PE), Chairman, Department of Epidemiology and Population Health Albert Einstein College of Medicine, Jack & Pearl Resnick Campus, 1300 Morris Park Avenue, Bronx, New York 10461 Phone: (718) 430 3355, Fax: (718) 430 8653, E-mail: thomas.rohan@einstein.yu.edu, Website: http://eph.aecom.yu.edu

Applications will be accepted on a continuing basis until the position is filled. Albert Einstein College of Medicine is an equal opportunity employer.



Albert Einstein College of Medicine

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Opportunities This Month

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