Huan Vinh Dong MD MS

Pediatric Infectious Disease Fellow UCLA

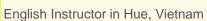
GloCal Fellow 2016 – 2017 Hanoi Medical University, Vietnam



Personal / Professional Background









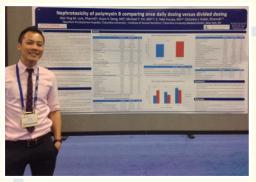






University of California Global Health Institute GloCal Health Fellowship

Research Background Prior to GloCal



2012 - Chart Review for Pharmacy resident

Review > AIDS. 2014 Sep 10;28(14):2119-31. doi: 10.1097/QAD.000000000000363.

Osteoporosis and fractures in HIV/hepatitis C virus coinfection: a systematic review and meta-analysis

Huan V Dong, Yamnia I Cortés, Stephanie Shiau, Michael T Yin

PMID: 24977441 PMCID: PMC4940983 DOI: 10.1097/QAD.000000000000363

Free PMC article

Abstract

Objective: There is growing evidence that fracture risk is increased in individuals with HIV and/or hepatitis C virus (HCV) infection. We systematically reviewed the literature to determine whether prevalence of osteoporosis and incidence of fracture is increased in HIV/HCV-coinfected individuals.

Design: A systematic review and meta-analysis.

Methods: A search was performed of Medline, Scopus and the Cochrane Library databases, as well as of abstracts from annual retroviral, liver and bone meetings (up to 2013) for studies with

2012-2013: Meta-Analysis with ID/Metabolics



2013-2015 Qualitative assessment NYC DPH

Nutrit Bytes

UCLA

Ingestion of monosodium glutamate (MSG) in adult male rats reduces sperm count, testosterone, and disrupts testicular histology

Huan V. Donga, Wendie A. Robbinsb

*David Geffen School of Medicine, *School of Nursing and Fielding School of Public Health University of California, Los Angeles, Los Angeles, California, USA

ARSTRAC

Objective: Monosodium glutamate (MSG) is a widely used food additive with controversial side effects. Though neonatal administration of MSG has been shown to affect fertility via arcuate nucleus ablation, the body of work involving the effects of adult MSG administration on male rat fertility has yet to be collectively assessed.

2015 Systematic Review in Medical School



From personal angst to research idea...





"Commensal Reservoir Hypothesis"

Commensal Neisseria species colonize the oropharynx

- Frequent antibiotic exposures
- Suboptimal antibiotic treatment/penetration

Neisseria species with reduced antimicrobial susceptibility

- Resistant *Neisseria* dominate microbiome
- Potential N. gonorrhoeae pharyngeal infection

Neisseria exchange genetic materials

Horizontal genetic transfer may include genes that confer antibiotic resistance

Antimicrobial resistant *N. Gonorrhoeae*

GloCal Partners



Jeffrey D Klausner, MD MPH

- Professor of Infectious Diseases and Public Health at USC
- Expert in applied epidemiology and the prevention and control of infectious diseases of public health importance like HIV, STDs, TB, COVID-19 and cryptococcal infections. Worked with CDC, WHO, AMFAR, SF DPH.



Giang Minh Le, MD PhD

- Chair of the Department of Global Health and Acting Head of the Office of Science and Technology at Hanoi Medical University in Vietnam
- Adjunct faculty in the Department of Sociomedical Sciences, Mailman School of Public Health of Columbia University



Folasade May, MD MPhil PhD

- Assistant Professor at the David Geffen School of Medicine and an Associate Director of the UCLA Kaiser Permanente Center for Health Equity
- Director of Quality Improvement in Gastroenterology and Director of the May Health Services Research Laboratory

GloCal Research Site







(Bathhouses, parks, massage

shops, LGBT community center)





Methods















Results: Neisseria were found in 100% of samples!

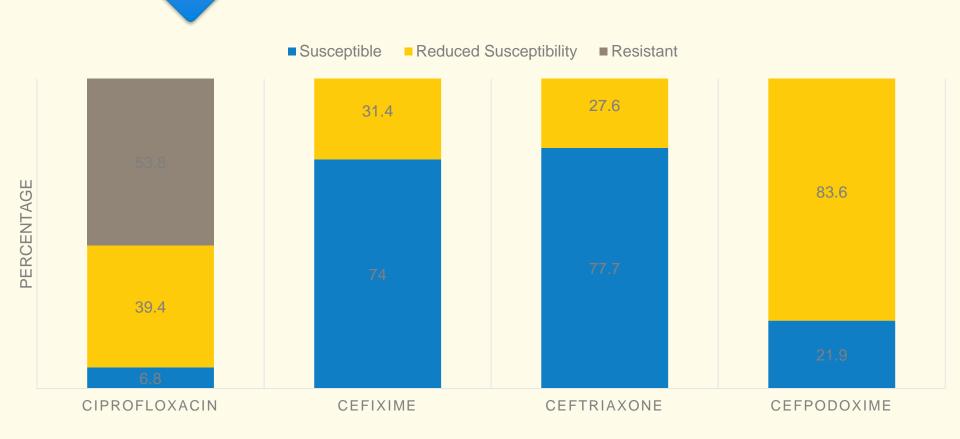
N = 265 (from 207 swabs)

Median 1 per participant (range 1-4)

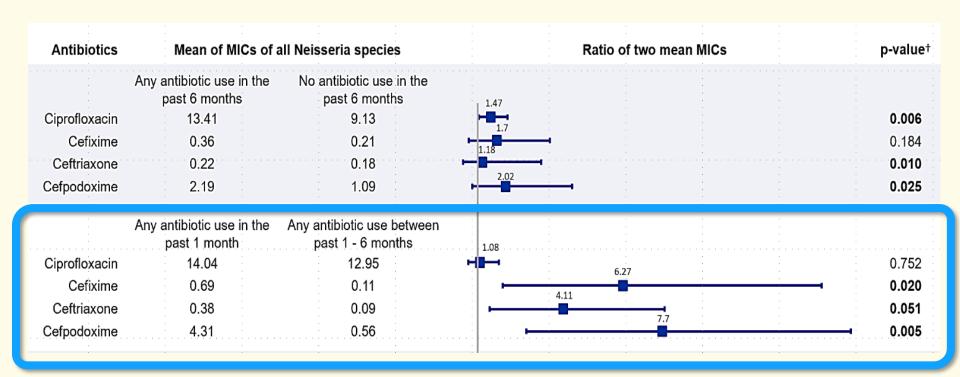
10 species overall

Species	N (%)
N. <u>cinerea</u>	7 (2.6)
N. flavescens	125 (47.2)
N. gonorrhoeae	9 (3.4)
N. lactamica	1 (0.4)
N. <u>macacae</u>	12 (4.5)
N. meningitidis	13 (4.9)
N. mucosa	7 (2.6)
N. <u>oralis</u>	4 (1.5)
N. perflava	30 (11.3)
N. <u>subflava</u>	57 (21.5)

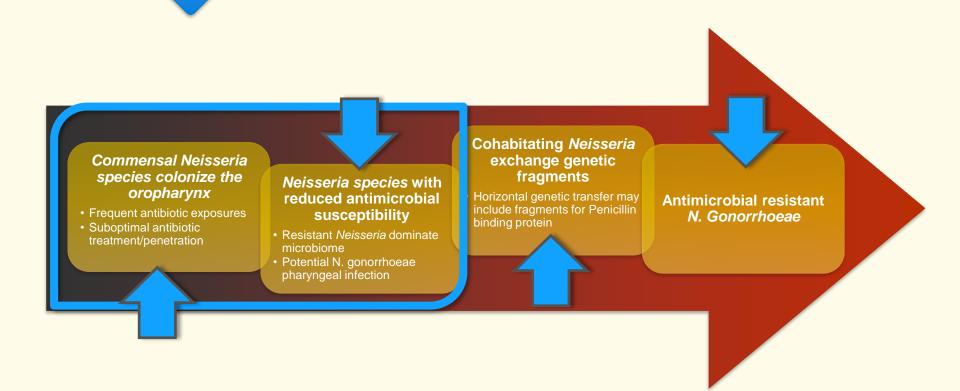
Results: Many Neisseria had "reduced susceptibility" to cephalosporins



Results: Recent antibiotics significantly associated with increased MIC



"Commensal Reservoir Hypothesis"



Post-Fellowship Achievements



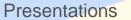




MORE Research

- REDCap
- STI / HIV related
- Adolescent / Young Adult
- Maternal-Fetal
- Data collection, entry, and analysis





- NIH/NIAID
- IDWeek
- Med School
- Research meetings
- Media





- Full article, brief reports, responses, reviews
- Invite for reviews







Professional Development

- Research Honors
- Residency research
- Infectious Disease Fellowship
- Mentoring students

Adverse Neonatal Outcomes Associated With Maternal Sexually Transmitted Infections From a Public Health Clinic Cohort in Southern Brazil

Huan Vinh Dong, 1.0 Mei Leng, 2 Regis Kreitchmann, 3.4 Jeffrey D. Klausner, 5 Karin Nielsen-Saines, and Nava Yeganeh

Department of Pediatrics, David Geffen School of Medicine at UCLA, Los Angeles, California, USA, ²Department of Medicine, Biostatistics at UCLA, Los Angeles, California, USA, ³Irmandade da Santa Casa de Misericordia de Porto Alegre, Porto Alegre, Brazil, *Federal University of Health Sciences, Porto Alegre, Brazil, *Division of Preventative Medicine, USC Keck School of Medicine, Los Angeles, California, USA and Division of Pediatric Infectious Diseases, David Geffen School of Medicine

Pregnant women at public medical centers in Porto Alegre, Brazil, were recruited for a study on screening and treatment of sexually transmitted infections (STIs). STIs were detected in 79 (23%) of 350 pregnant women and were found to be associated with infant low birth weight (adjusted odds ratio 5.8; 95% confidence interval 1.9-18).

Key words. adverse infant birth outcomes; congenital syphilis; low birth weight; pregnancy; sexually transmitted in-

Brief Lessons Learned













Create schedule with flexibility in mind.

Consider a "pilot" phase

Add in buffer weeks if possible (to catch up +/- optimize)

Speak/plan not only with professors and doctors.

Support staff will actually be "on the ground" with you throughout the year.

Inclusion + experiential advise

Stay organized to keep everyone on the same page

Documents that share with your "research team".

Regular updates / small emails can matter

Keep your eyes and ears open "in country" for additional ideas that may suppor your project or professional interests

Being "part of the community" may be very importantor long term

Start writing early, even if just outline / notes

Schedule to finish early if possible.

Plan to work on project after fellowship.

Connect and network with EVERYONE

May have visitors from CDC / NIH / PEPFAR / USAID, etc...

Follow up, attend other gatherings to meet others

"The practice of medicine is an art, not a trade; a calling, not a business; a calling in which your heart will be exercised equally with your head."

- Sir William Osler

Wellbeing Abroad

US military spouses' experiences transitioning abroad: A narrative analysis

Brenda Elliott PhD, RN, CNE

First published: 20 July 2020 | https://doi.org/10.1111/nuf.12487 | Citations: 1

I have never had to pick up and move clear across the country and [now] a different continent....my worry was that things would happen and I wouldn't be able to be there for them [family], as far as health issues, or roles... if my mom, or my brother...but I was very excited to see what was going to happen next.

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I think that being a minority in our situation here has really grown me in ways and opened my eyes to certain things in America. And so, when we go back, I feel like it's gonna be different for me, because I think this place [Italy] has such a way of changing you and growing you.





Wellbeing Abroad

Challenges

- 1. Adding stress to an already stressful situation
- Managing a new set of worries and fears surrounded by the unknown
- 3. Reestablishing an everyday life from chaos
- 4. Battling social, personal, and physical isolation
- 5. Reinventing myself to move beyond simply functioning to control
- 6. Pondering about life, returning and repatriation

Goals

- Strengthening resiliency
- Building cultural flexibility
- Maintaining health and wellbeing



Resiliency in Research Abroad

The girl took a shower at about twelve or one o'clock every night. And the showering room was just next to my bedroom. It somehow made strange noise every time she took a shower. That really annoyed me and caused increasing tension in my nerves. I tried to tell her but it seemed to be not easy to change as she said that she was used to taking a shower before going to bed. Everyday my nerves were very stressful, increasingly more sensitive to any sound around me. I tried to adjust myself, tried to use ear plug, to listen to music, and to do more exercise during the daytime, but they all seemed to be in vain. So after living there for six months, I left that house and moved to a new place although I could not get my deposit back because I did not live there for one year as initially agreed on with the landlord. (from interview)

I seemed to be rather seriously disturbed by other people's messages for requesting me to do something, for example, asking me to translate some abstract for them, to buy something for them when going back home, or even to buy milk for their babies, and so on. If I refused to help them, they would probably be angry with me. However, if I agreed to help them, that would make me feel very distracted and stressful. I was so overwhelmed by these things that I could not concentrate appropriately on my research. I felt greatly relieved after that and also learned how to deal with such a situation. (from interview)

Are there any other things worse than what happened during these days? People say things would get better if it cannot be worse. I do think something needs to be changed and hope it would get improved in the future. (from Hongxia's reflective journal)



Resiliency in Research Abroad

I felt very hard during the first few months when I came to UK. Homesickness, especially the strong longing for my son, coupled with the difficulties in studying, rendered me to thinking of giving up this study and returning home. I think I was lucky, as during this process, my husband gave me endless and unstinting support. I really couldn't thank him more. He took care of our son during the night, and went to work during the daytime, from the time when my son was ten months old. About one year after that, he told me that the first night when they slept after I was in UK, he couldn't help feeling very upset, as he thought that our son was so young that he couldn't live together with his mom. And my husband was also not sure whether he could take very good care of our baby, such a little baby, you know. But he didn't tell me this until after almost one year when we all seemed to be more used to this kind of life. He always tells me the good news, encourages me and tries every effort to make me feel relaxed. This is really a great support for me to continue my PhD. (from interview)

I had learned many times during the past few years how to swim but did not succeed. So swimming was a big challenge for me. But with my flatmate's encouragement, I could finally manage it. This was indeed cheerful and fulfilling for me, not just because I learned a new skill, but also enhanced my confidence of working on something I had thought impossible. Since then, I also had a regular exercise activity and sometimes went to swimming by myself. (from interview)



How is your research going?

Episode 1

Α	How is your research going?
В	Ummm: it'sokay hmmm slowly I use a mixed method research. Now I've just finished my quantitative data analysis, but haven't begun the qualitative part yet.
Α	(hm good! I am not alone on the slower side) Which year are you now in your Ph.D.?
В	I am approaching the end of my third year.
Α	You are doing fine. You know, most Ph.D. students need four years. (Oh, yeah! I'm in the beginning of my second year, and I've already completed the quantitative section of the mixed method analysis)

Episode 2

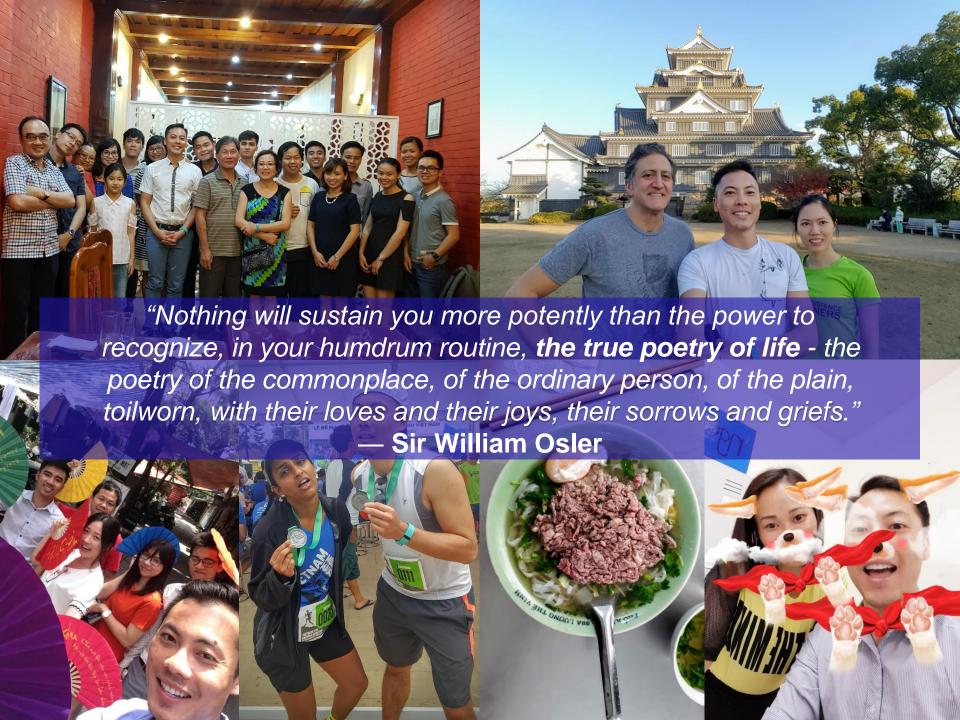
Α	How is your research going?
В	Well, it goes very well. I use a mixed method research. Now I've just finished my quantitative data analysis, and will begin to do the qualitative part.
Α	(Oh, no! I must be the slowest one. I'm so upset) Which year are you now in your Ph.D.?
В	I am in the beginning of my second year.
Α	You are going very fast. (Oh, No! I'm approaching the end of my third year of my Ph.D., but I'm still doing the quantitative section of the mixed method analysis)



Resiliency Abroad

- Relationships with [crucial] individuals
 - Peers friendships, activities
 - Mentors guidance, support
 - Home institution connectedness, feeling supported
- Family / Support
 - Can be the both the root of emotional distress as well as a profound protective/supportive factor against distress.
- Resilience building
 - Safe environment for dealing with stressors
 - Preparing for anticipated challenges
 - Working through and learning from unanticipated challenges





Thank you!



Questions and collaborations: HVDONG@mednet.ucla.edu