

B. Jessica Shaten, M.S.
(aka Yiscah Bracha)
CURRICULUM VITAE

Center for Urban Health at Hennepin County Medical Center
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Minneapolis, MN 55404

EDUCATION:

2008 (expected)	School of Public Health University of Minnesota Minneapolis, MN	Ph.D. Health Services Research and Policy
1988	School of Statistics University of Minnesota Minneapolis, MN	M.S. Statistics
1978	Macalester College St. Paul, MN	B.A. Mathematics; Psychology Phi Beta Kappa, Summa Cum Laude

PROFESSIONAL HISTORY:

2005 – Present	Research Director Center for Urban Health Hennepin County Medical Center Minneapolis, MN
1999 – 2004	Research Advisor to Physician Investigators Administrative Director – Minnesota Program in CAM Clinical Research Berman Center for Outcomes and Clinical Research Minneapolis Medical Research Foundation Minneapolis, MN
1990 – 1997	Research Fellow Coordinating Centers for Biometric Research Division of Biostatistics School of Public Health University of Minnesota Minneapolis, MN
1982 – 1992	Research and statistical consultant. Clients included: 1987-1989 3M Company Graduate Instructor in Statistics and Experimental Design 1987-1997 Minnegasco Statistical analyst evaluating home weatherization programs 1989-1992 Minnesota State University System Research analyst <ul style="list-style-type: none">• Supply and demand of public school teachers in Minnesota• Feasibility of converting from quarter to semester calendar• Need for new program in manufacturing engineering 1989 Department of Healthcare Administration University of Minnesota Research advisor to graduate students

1983-1991	Other clients: <ul style="list-style-type: none"> • Twin Cities Star Tribune • Performax Systems International • Hallowell Associates • Cold Climate Research Center, University of Minnesota • Public School Incentives • Underground Space Center, University of Minnesota
1981-1984	Private mathematics tutor
1978-1981	Volunteer mathematics and English teacher U.S. Peace Corps Alor Setar, Malaysia

COMMUNITY ACTIVITIES:

2002-present	Board member, Seward Redesign Community development corporation serving the Minneapolis Seward and Longfellow neighborhoods
2001-2002	Chair, Sustainable Resources Center Garden Advisory Group
1999-2000	Franklin Avenue Light Rail Transit Task Force Convened by Seward Redesign
1999-2000	Village-in-Phillips One Steering Committee
1996-1997	Task Force on Alternative and Complementary Medicine, Academic Health Center University of Minnesota
1986-2000	MayDay Parade, In the Heart of the Beast Puppet and Mask Theater
1988-1990	Editor, Merriam Park Post
1986-1987	Recycling Committee, Citizens League
1985-1986	Program Committee, Citizens League
1983-1985	Co-chair, Occupational Education Committee, Citizens League

PEER-REVIEWED PUBLICATIONS:

1. Satran D, Henry CR, Adkinson C, Nicholson CI, **Bracha Y**, Henry TD. Cardiovascular manifestations of moderate to severe carbon monoxide poisoning. *Journal of the American College of Cardiology*. May 3 2005;45(9):1513-1516.
2. Dixon BJ, **Bracha Y**, Loecke SW, Guerrero MA, Taylor RD, Asinger RW. Principal atrial fibrillation discharges by the new ACC/AHA/ESC classification. *Archives of Internal Medicine*. September 12 2005;165(16):1877-1881.
3. Davey Smith G, **Bracha Y**, Svendsen KH, et al. Incidence of type 2 diabetes in the randomized multiple risk factor intervention trial. *Annals of Internal Medicine*. 2005;142(5):313-322.

4. **Bracha Y**, Svendsen KH, Culliton P. Patient-visits to a hospital-based alternative medicine clinic. *EXPLORE: The Journal of Science and Healing*. 2005;1(1):13-20.
5. Evans RW, Shpilberg O, **Shaten BJ**, Ali S, Kamboh MI, Kuller LH. Prospective association of lipoprotein(a) concentrations and apo(a) size with coronary heart disease among men in the Multiple Risk Factor Intervention Trial. *Journal of Clinical Epidemiology*. 2001;54(1):51-57.
6. Evans RW, **Shaten BJ**, Hempel JD, Cutler JA, Kuller LH, Group MR. Homocyst(e)ine and risk of cardiovascular disease in the Multiple Risk Factor Intervention Trial. *Indian Heart Journal*. 2000;52(7 Suppl):Nov-Dec.
7. Murray RP, Rehm J, **Shaten J**, Connett JE. Does social integration confound the relation between alcohol consumption and mortality in the Multiple Risk Factor Intervention Trial (MRFIT)? *Journal of Studies on Alcohol*. 1999;60(6):740-745.
8. Evans RW, **Shaten BJ**, Day BW, Kuller LH. Prospective association between lipid soluble antioxidants and coronary heart disease in men. The Multiple Risk Factor Intervention Trial. *American Journal of Epidemiology*. 1998;147(2):180-186.
9. **Shaten BJ**, Kuller LH, Kjelsberg MO, et al. Lung cancer mortality after 16 years in MRFIT participants in intervention and usual-care groups. Multiple Risk Factor Intervention Trial. *Annals of Epidemiology*. 1997;7(2):125-136.
10. Evans RW, **Shaten BJ**, Hempel JD, Cutler JA, Kuller LH. Homocyst(e)ine and risk of cardiovascular disease in the Multiple Risk Factor Intervention Trial. *Arteriosclerosis, Thrombosis & Vascular Biology*. 1997;17(10):1947-1953.
11. Kuller LH, Tracy RP, **Shaten J**, Meilahn EN. Relation of C-reactive protein and coronary heart disease in the MRFIT nested case-control study. Multiple Risk Factor Intervention Trial. *American Journal of Epidemiology*. 1996;144(6):537-547.
12. Haffner SM, **Shaten J**, Stern MP, Smith GD, Kuller L. Low levels of sex hormone-binding globulin and testosterone predict the development of non-insulin-dependent diabetes mellitus in men. MRFIT Research Group. Multiple Risk Factor Intervention Trial. *American Journal of Epidemiology*. 1996;143(9):889-897.
13. Zimmet PZ, **Shaten BJ**, Kuller LH, Rowley MJ, Knowles WJ, Mackay IR. Antibodies to glutamic acid decarboxylase and diabetes mellitus in the Multiple Risk Factor Intervention Trial. *American Journal of Epidemiology*. 1994;140(8):683-690.
14. **Shaten BJ**, Smith GD, Kuller LH, Neaton JD. Risk factors for the development of type II diabetes among men enrolled in the usual care group of the Multiple Risk Factor Intervention Trial. *Diabetes Care*. 1993;16(10):1331-1339.
15. Blair SN, **Shaten J**, Brownell K, Collins G, Lissner L. Body weight change, all-cause mortality, and cause-specific mortality in the Multiple Risk Factor Intervention Trial.[see comment]. *Annals of Internal Medicine*. 1993;119(7 Pt 2):749-757.
16. Suh I, **Shaten BJ**, Cutler JA, Kuller LH. Alcohol use and mortality from coronary heart disease: the role of high-density lipoprotein cholesterol. The Multiple Risk Factor Intervention Trial Research Group.[see comment]. *Annals of Internal Medicine*. 1992;116(11):881-887.
17. **Shaten BJ**, Kuller LH, Neaton JD. Association between baseline risk factors, cigarette smoking, and CHD mortality after 10.5 years. MRFIT Research Group. *Preventive Medicine*. 1991;20(5):655-659.
18. Ockene JK, **Shaten BJ**. Cigarette smoking in the Multiple Risk Factor Intervention Trial (MRFIT). Introduction, overview, method, and conclusions. *Preventive Medicine*. 1991;20(5):552-563.
19. Ockene JK, Hymowitz N, Lagus J, **Shaten BJ**. Comparison of smoking behavior change for SI and UC study groups. MRFIT Research Group. *Preventive Medicine*. 1991;20(5):564-573.

OTHER PUBLICATIONS:

1. **Bracha, Y.** Disparities in Health Outcomes and Care: Groups Are Organizing to Eliminate the Problem. Minnesota Health Care News. 2006(December);4(12): 10-11, 34.
2. **Bracha Y.** The role of CAM research: Asking questions, getting real answers. Minnesota Physician. 2003(May):20-21.
3. **Bracha, Y.** The Cows Will Come and Eat Your Eggplants. Communities: A Journal of Cooperative Living. Summer 1999.
4. **Xonee, Jekke.** And the Tree of Life Rises! Communities: A Journal of Cooperative Living. Winter 1996-1997.
5. **Shaten BJ.** Semesters vs quarters: A choice of academic calendar. Minnesota State University System, 1991 (revised and updated 1992).
6. **Shaten BJ.** Teacher training in Minnesota State Universities: Enrollment trends and placement rates. Minnesota State University System, 1989.
7. **Shaten BJ,** Kolderie T. Contracting with teacher partnerships. Sequoia Institute, Sacramento CA. 1984.

PRESENTATIONS:

Yiscah Bracha and Dr. Kevin Larsen. "Methods for Querying Patients about Race and Ethnicity at a Public Hospital" at the Eleventh Annual Minnesota Health Services Conference in St. Paul on March 6, 2007.

FEDERAL GRANT SUPPORT:

1-R18-HP-10009-01 (Bronfort) 9/30/00-9/29/06 Health Resources and
Manipulation, Exercise, and Self-care for Low Back Pain Services Administration (HRSA)
The primary aim of this study is to examine the relative efficacy of three interventions in terms of patient-related outcomes in the short and long term for non-acute low back pain.
(Role: Analytic Director)

1-R18-HP-10013-01 (Bronfort) 9/30/00-9/29/06 Health Resources and
Manipulation, Exercise, and Self-care for Neck Pain Services Administration (HRSA)
The primary aim of this study is to examine the relative efficacy of three interventions in terms of patient-related outcomes in the short and long term for chronic neck pain.
(Role: Analytic Director)

1-R21-AT00892-01 (Culliton) 9/17/01-8/31/04 NCCAM-NIH
Eight-Year Data from an Integrated Health Care Setting
The primary aim of this study is to analyze eight-year data collected at an integrated site (where medical and alternative/complementary care are offered) to address questions relevant to establishing integrated healthcare delivery systems today. The secondary aim is to provide preliminary estimates and address feasibility concerns that will assist the design of future prospective studies to examine cost-avoidances that may be attributed to CAM therapies. (Role: Project Director)

1-K30-AT00068-01 (Grimm)

9/15/02-9/14/07

NCCAM-NIH

Training CAM Clinical Investigators

This grant provides resources to build the infrastructure for a training program, for pre-and post-doctoral fellows who will be trained to conduct and evaluate clinical research in complementary and alternative medicine (CAM). The fellows who undergo the training program are expected to meet the growing need for qualified investigators capable of evaluating the safety and effectiveness of CAM therapies. (Role: Administrative Director)

1-T32-AT00487-01 (Grimm)

7/1/01-6/30/06

NCCAM-NIH

Training a New Generation of CAM Clinical Investigators

This grant provides support to pre-and post-doctoral fellows (through stipend payments, funds for tuition, fees and health insurance, etc.) so they can be trained to conduct and evaluate clinical research in complementary and alternative medicine (CAM). The fellows who undergo the training program are expected to meet the growing need for qualified investigators capable of evaluating the safety and effectiveness of CAM therapies. (Role: Administrative Director).

99-03-07 (Bronfort)

1/1/00-12/31/02

Foundation for

Non-operative Treatments for Sciatica: A Pilot Study

Chiropractic Education and Research

The goal of this study is to provide important information regarding patient-oriented and physiologic outcome measures that can be implemented in future studies assessing non-operative treatments such as spinal manipulation. This pilot study will also determine the feasibility of recruitment for a full-scale clinical trial. (Role: Statistician).