Focused cadre of neurology specialists now caring for inpatients

Hospitalist Trend Goes Neuro

By Todd Neff

Neurologist Jennifer Simpson, MD, has arrived at a Parkinson disease patient’s bedside. An entourage of five — two pharmacists, a medical student, and two medical residents — fills the space on the Anschutz Inpatient Pavilion’s 12th floor.

Simpson asks the octogenarian her name, her age, what hospital she’s in. The answers come slowly, but they’re accurate. Then they get to talking, and the patient mentions the good work of one of Simpson’s colleagues.

The idea, championed by neurologist and stroke specialist William Jones, MD, was to have a cadre of neurologists that focuses exclusively on inpatient care. The physicians working these new “neurohospitalist” services — Jones, Simpson, and West — are familiar faces on the floors. They collaborate with UCH’s many internal medicine hospitalists. They are close at hand during stroke alerts. They provide consistent, deep and well-practiced case expertise that benefits patients as well as medical students, residents and fellows.

Many reasons. Jones says the hospital is riding what seems to be a national neurohospitalist wave. It just makes sense, he says, to create a service devoted to inpatient care.

“There have always been these competing demands [for neurologists] between [attending to] a busy outpatient practice and being able to be there to care for inpatients,” he says.

West, who completed his medical residency in neurology and his fellowship in neuroimmunology at the University of Colorado, is very familiar with the hospital’s inpatient corridors.

“Before, you’d have somebody who spends most of their time in an outpatient setting or a research lab, attending [to inpatients] two weeks a year on something well outside their spectrum,” he says.

By cutting the time lags that happen when residents must call attending physicians with questions, the neurohospitalist team can speed treatment and, ultimately, accelerate discharge.

Similarly, consistent access to faculty experts should improve the effectiveness of medical training, West says.

The needs of patients arriving at the hospital with strokes and other neurological problems are increasing, as well, Jones says.
These patients tend to be sicker and in need of more expert attention, and the required care has become more complex.

The emergence of the clot-busting tissue plasminogen activator, or tPA, for example, has saved the lives of stroke victims. But it has also added to a list of treatments to be mastered, and their benefits must be balanced against their risks.

The same goes for other neurological disorders, adds Simpson, who came to Colorado after wrapping up her stroke fellowship at Henry Ford Hospital in Detroit. Multiple sclerosis care, for example, increasingly involves new agents and more intensive immunosuppressants, she says.

Some things haven’t changed. One is the presence of Michael Faithe, PharmD, on morning neurology rounds. During rounds with Simpson, Mario Cerdan, a second-year resident in neurology, explains that Faithe knows the medications used in neurology as well as those used to treat the complicating diseases patients often have.

“He knows metabolism and can manipulate interactions, which is good when you have a complicated patient,” Cerdan says.

**Two months on, one off.** West and Simpson carve out time for academic research by trading rotations. Each spends two months covering either general neurology or stroke. A month of research time follows, and then two months on other services. West, who spent August doing research, is developing a web-based curriculum for residents and medical students focused on treating acute neurological problems.

The effort to launch the neurohospitalist service began a year ago, Jones says. Informal conversations led to a formal proposal to add a core team of physicians covering neurology to the larger hospitalist team led by Jeffrey Glasheen, MD. The positions were posted late last year, and the hospital landed Simpson and West in time to launch July 1.

“I’m not sure if we were lucky or if this is just such a growing field that there’s going to be a lot of people interested in it,” Jones says.