Strategically placed

During the week, David Stephens has one meeting after another. His schedule has multiplied since becoming the first vice president for research in the Woodruff Health Sciences Center (WHSC). But every Friday afternoon, he carves out a little piece of nirvana and ventures back to his laboratory. There, for several hours, he directs the infectious disease research that first sent his career on its trajectory.

Stephens’ new charge is to ramp up multidisciplinary and interdisciplinary research across WHSC and craft a strategic vision for research. And his laboratory, housed at the Atlanta VA Medical Center, is where he finds inspiration. His research focuses on defining the molecular basis for virulence of bacterial meningitis and ways to prevent this devastating infection, both in this country and globally. His research has been part of successful efforts to introduce and assess new vaccines to prevent meningitis.

When Stephens came to Emory in 1982, it was the potential for collaborative research, especially with the CDC, that attracted him. Ten years later, he was named director of the medical school’s division of infectious disease. (The program in infectious diseases at Emory now receives half of all infectious disease fellowship applications in the country.)

Since then, Stephens has added a host of credentials to his resume. A fellow of the Infectious Diseases Society of America, he has served on NIH, VA, CDC, and FDA review panels. He has chaired the FDA National Vaccine Advisory Committee and served as a liaison member of the Health and Human Services National Vaccine Advisory Committee and as a senior scientific consultant to the Meningitis and Special Pathogens branch at the CDC. Most recently, he was executive associate dean for research in the School of Medicine. These many years later, he sees potential for even more research across disciplines and between partners. “There was a real need for this position,” Stephens says. “This is the next step in our evolution as a research institution.”

In approaching this broad mandate, Stephens already has put together a research advisory council to help develop a strategic plan and to be a sounding board for ideas. Among its priorities, the council is looking at ways to increase pediatric research collaborations with Children’s Healthcare of Atlanta, and it is developing a better system for research metrics. “Success in research goes beyond dollars and rankings,” Stephens says.

In his first year in this role he expects to spend more and more time promoting research across WHSC and the university and “the translation of bench to bedside,” as he describes it. He hopes to develop further the relationships with the Georgia Research Alliance and the Georgia Cancer Coalition partnerships of Georgia research universities, industry, and state government that promote the state’s technology discovery by attracting eminent scholars to Georgia universities, creating centers of research excellence, and converting research into products, services, and jobs.

And Stephens is reaching out to more partners who will enhance the reach of research in the WHSC. He recently visited Vanderbilt University to gauge interest in collaborating on predictive health. Emory already has launched a Predictive Health Institute with Georgia Tech that promotes a model of health care focused on maintaining health rather than treating disease. The institute covers not only the traditional fields of medicine, public health, and nursing but also areas such as anthropology, ethics, human behavior, health policy, law, business, and religion.

With yet another set of partners, Stephens is building the infrastructure needed to support and enhance research. He is principal investigator on a Clinical and Translational Science Award of $31 million from NIH to Emory, Morehouse, and Georgia Tech.

Should any of the researchers working in other health sciences centers have a question, they’ll always know where to find their go-to man on a Friday afternoon. —Kay Torrance