

CDC's DES (Diethylstilbestrol) Update: A Collaboration Between the Federal Government and the Academic Centers of Excellence in Women's Health

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In 1999, the Centers for Disease Control and Prevention (CDC) began planning a congressionally mandated national program to update health care providers (HCPs) about health effects related to exposure to diethylstilbestrol (DES). DES was prescribed to pregnant women in the United States between 1938 and 1971 to prevent reproductive health problems; however, subsequent research confirmed increased risk of health effects to women who took the drug and to the female and male offspring of those pregnancies.

Formative research identified the following special challenges for a government-sponsored educational program: (1) HCPs trusted and preferred information from peers and professional organizations rather than from the government; (2) the most effective educational materials were those specifically created for their provider type (RN, MD, PA, NP, etc.); and (3) HCPs responded most favorably to familiar or routine educational formats such as grand rounds lecture series, conference programs, and educational journals rather than to stand-alone programs.

Attentive to these challenges, CDC developed grant proposals with six academic medical centers identified by the Department of Health and Human Services' Office of Women's Health as Centers of Excellence (CoE) in Women's Health: Drexel University College of Medicine, University of Wisconsin, Wake Forest University Baptist Medical Center, University of California Los Angeles Iris Cantor Women's Health Center, University of Illinois Chicago College of Medicine, and Indiana University School of Medicine. These institutions were contracted to deliver CDC's DES information by means of peers, to develop materials suitable for different types of HCPs, and to disseminate DES programs in existing CoE academic and clinical settings.

This collaboration resulted in identifying appropriate goal-linked learning objectives and educational materials suitable for varied healthcare professional audiences. Five types of materials were developed: curriculum-embedded case studies, multiple-unit learning modules, a DES Web site, review essays for provider journals, and PowerPoint grand rounds-style lectures with scripts.

DES educational materials were tested at the academic centers and reviewed by DES scientists and expert clinicians. Findings from the pretesting indicated that providers felt they learned something new from the CDC/CoE materials and that the information presented was credible and had implications for how they would treat and counsel patients. In general, providers wanted more specific treatment steps included in the materials. These results underscored the importance of tailoring materials for different types of HCPs. On the basis of findings from the pretesting, CoE authors and CDC subsequently modified the provider educational materials.

The CoEs were instrumental in implementing CDC's DES Update and in hosting exhibits, conference presentations, and posters at professional medical and nursing conferences. CoEs also delivered DES curriculum in existing courses and in CEU and CME forums.

Although the CDC-CoE collaborations had challenges (reaching consensus on learning objectives, coordinating the development of multiple versions of materials for five different types of providers, and coordinating outreach to HCPs with consumer outreach), the benefits of partnering with credible partners to effectively reach HCPs has contributed greatly to the success of CDC's DES Update.