

D2V Spotlight

Dr. Lucas Marzec, D2V Pilot Grant Awardee



D2V recently [announced](#) the funding of six new pilot grants for the 2017-18 fiscal year. [Dr. Lucas Marzec](#) is the principal investigator on one of these projects, "The Feasibility, Safety, and Value of a Virtual Cardiac Implantable Electronic Device Wound Check." The study will examine the potential viability of a virtual nurse wound check visit in contrast to an in-person visit for patients with cardiac implantable electronic devices, such as pacemakers or defibrillators.

We spoke to Dr. Marzec about the inspiration for his research and how he envisions D2V's role in the future of healthcare.

Why did you decide to pursue a career in medicine?

I chose a career in medicine because I wanted a career that would allow me to work with people in a way that positively changed their lives. As a cardiologist, I treat all forms of heart disease, which is the leading cause of death in the world. I also wanted a career that would be a constant challenge and would force me to continually learn. The pace of scientific and medical discovery necessitates healthcare providers to constantly question their current practice patterns and behaviors based on new knowledge.

When did you know that you wanted to focus on your particular area of research?

As I progressed through my internal medicine residency and cardiology fellowship, I became increasingly interested in how to improve the process of healthcare delivery. I was struck by the disconnect between the delivery of healthcare and improvements in patients health. As a result, I became interested in how we can better deliver care that is focused on improving patient health and/or quality of life.

Who inspires you – either professionally, personally, or both?

There are a number of people at the University of Colorado who inspire me. In particular, Larry Allen and Michael Ho inspire me with their continued dedication to mentoring and educating the next generation of researchers. I'm impressed with the amount of time and effort they devote to junior colleagues like myself despite their very successful individual careers.

What motivated you to propose this research project, and why did you choose to work on it with D2V?

Given the increasing attention to the value of health care, strategies to deliver high-value care are needed. The ubiquitous nature of digital technology provides opportunities to deliver high-value care in ways that do not require the patient to travel for a face-to-face encounter. However, the safety and effectiveness of this type of approach is unknown.

As a cardiac electrophysiologist, I take care of patients with cardiac implantable electronic devices like pacemakers or defibrillators. I see these patients come to clinics and hospitals frequently for a number of reasons, some of which are of questionable value. Eliminating these the non-essential visits can reduce time and financial burden on patients, and can reduce the time and resources spent by providers and health systems. A wound check visit following pacemaker or defibrillator surgery is a good model to study the safety and effectiveness of a virtual visit that makes use of digital technology. While convenience and cost savings are potential benefits of a virtual CIED wound check visit, it is important to establish that these virtual visits are feasible and safe, and to assess their value to patients, providers, and health systems.

D2V is a terrific partner for this type of work, as it is a multidisciplinary group of investigators uniquely focused on improving healthcare delivery to promote high-value, patient-centered care.

Anything else you'd like to add?

This is an exciting time for healthcare, as there is a tremendous amount of money and energy being devoted to understanding how to leverage digital technologies to improve healthcare delivery and patient outcomes. D2V is well-positioned to lead innovation in this area, as the organization is committed to the purposeful engagement of multiple stakeholder groups (including patients, providers, health systems, and payers) that will inform the translation of research into practice.