**Recipient of First UAMS Clinical Research Fellowship in Otolaryngology Gives Thumbs Up**

March 12, 2021 | Reed Gardner’s hands-on experiences during the first 10 months of his clinical research fellowship in the University of Arkansas for Medical Sciences (UAMS) Department of Otolaryngology-Head and Neck Surgery have not only solidified his career choice but also fueled his enthusiasm.

The 28-year-old Little Rock native said that after earning his medical degree in May 2020 at UAMS and then failing to match for a residency, he found himself in “every medical student’s worst nightmare.”

But the nightmare led to a dream opportunity after John Dornhoffer, M.D., chairman of the otolaryngology department in the College of Medicine, and Deanne King, M.D., director of clinical research, decided Gardner was a good candidate for a departmental research fellowship they had been talking about creating for a couple of years.

“I have a debt of gratitude to them,” Gardner said, referring to them and others who have provided him with much more than a way to bolster his curriculum vitae and learn how to submit articles for publication.

“I think that for any research fellow in the country, when they come in that’s what they’re going to be thinking about,” he said. But now that he’s nearing the end of his year-long fellowship, he has come to realize that there’s so much more to it.

“A lot of it has been mentoring students who want to pursue a career in ENT and helping residents, since they’re obviously very busy day to day taking care of patients. It’s really about doing anything I can to move projects along, whether that’s writing the initial protocols that have to go through the approval process, or asking for data from bioinformatics, or doing the actual submission to a journal or for a national meeting.”

Not that he has ignored bolstering his CV by publishing research articles.

“He has just done phenomenally,” King said. “He has published so much and been so productive. We’ve had a joke that we’re going to have to get two people to replace Reed.”

Nine months into his fellowship, the department logged 19 manuscripts submitted by Gardner, eight of which have been accepted for publication.

“He has also been really helpful mentoring medical students,” King said, noting that the department has 50 to 60 medical students who are interested in a career in the ENT field, a very competitive field in which a research portfolio provides an important edge.

Laboratory work is “just not my cup of tea,” Gardner said. Instead, he prefers clinical translational research, which seeks to translate basic science discoveries into new treatments or approaches to medical care that improve human health. The research involves analyzing outcomes, such as quality of life, readmissions or costs of care, among different populations to try to determine the factors that affect those outcomes.

“I came into medical school thinking I would do something surgical,” Gardner said. “Then somewhere around my second or third year, I decided to do ENT after a two-week elective with the department. It was the only rotation I’d been on where I was actually excited to go in.”

Now that he has a better understanding of what is involved, he said, “I think I want to do head and neck surgical oncology. After doing research this year, I’ve found that for me the subject matter for surgical oncology is more stimulating.”

So far during his fellowship, Gardner has looked at the effect of COPD on complication rates in head and neck surgical oncology patients, studied the efficacy of intra-tympanic steroid injections and examined the quality of life of head and neck oncology patients after they’ve had cancer resections.

Referring to the steroid injections through the eardrums to affect the nerves that sense sound, he said, “It’s not a home-run therapy, but it’s nice to be able to provide some relief. It’s a very tough disease process to treat.”

Helping people with issues such as sudden hearing loss, which can be treated with the steroid injections, is just one reason Gardner has decided to pursue a career in otolaryngology.

“You might not really think about how that would affect your life – until it does,” he said. “Then you think, wow, you can’t participate in conversations, you can’t appreciate music anymore. Your life becomes so insular.”

Gardner said the fellowship has reinforced his belief that the type of work performed in the ENT field is interesting and important.

“I think the field is unique,” he said, “in the sense that a lot of the diseases and many of the procedures or interventions you are performing involve organs that people would probably say define who they are as a person – like their voice and their ability to swallow and enjoy food. Most other specialties are interested in the visceral organs of your abdomen or your chest. It’s nice to see that you can focus not just on outcomes of mortality but also on quality of life.”

He spent a lot of time assisting Jumin Sunde**,** M.D**.**, an assistant professor in the department, on a project involving the quality of life of the patients who had resections.

“Most have really complex reconstructions that are called microvascular free-flaps, where you are literally taking a piece of tissue from the arm or leg and implanting it in the head or neck to fill the void from where you had to cut the tumor out,” Gardner said.

He called that project “one of the most important ones” that he has worked on during the fellowship.

“We won’t finish it this year,” he said. “I think it will probably take a few years to actually be finished, but laying the foundation is arguably the most important part of it.”

Gardner said the year-long fellowship has stressed to him the importance of being self-sufficient, adding that it “will show you who is self-motivated, because there’s not someone constantly looking over your shoulder, prodding you.”

“It also gives you an appreciation for the academic aspect of medicine,” he said. “It’s kind-of like a look behind the curtain. You get to see the interactions between residents and attendings, and the residents with each other. It’s a different kind of intermediary between a medical student and a resident.”

The experience has also reinforced what he already knew: that medicine is a team effort.

“Medicine is definitely a team sport, even when from the outside looking in, it doesn’t look that way,” he said.

Gardner hopes to stay at UAMS but won’t know until matches are announced later this month. He intends to be there to guide and acclimate whoever replaces him as the next fellow.

“This is really a well-rounded program,” he said. “The training is really good. The culture here is very collegial. When I was looking around, I didn’t see other programs with a similar culture. There’s an appropriate hierarchy, but it’s all very collegial.”

The department’s website describes the highlights and responsibilities of the fellowship program, and lists the qualifications. Applications are being accepted for the program. For more information and to apply, go to [medicine.uams.edu/otolaryngology/fellowship-training/clinical-research-fellowship/](https://medicine.uams.edu/otolaryngology/fellowship-training/clinical-research-fellowship/).