Stanford



Korina De Bruyne

Clinical Assistant Professor, Medicine - Primary Care and Population Health

Curriculum Vitae available Online

CLINICAL OFFICE (PRIMARY)

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Bio

BIO

I went to medical school knowing I wanted to pursue primary care and have been doing so for 28 years. Being a doctor is so much more than prescribing medicine, it is getting to really know you, taking time to listen and understand your life situation, your aspirations and even fears. There are many determinants of someone's health: your past experiences, your current circumstance, and your goals for the future all need to be taken into account. I consider it a privilege to know my patients over many years and to be able to help you achieve fulfillment in life despite ailments, acute or chronic.

If you would like to know my past, present, and future goals, I'll tell you briefly that I was born and raised in Belgium, came to the US at age 19 to study at UCLA and UCSF Medicine, and met an earthquake researcher who has been my husband for 33 years. We have two children, both in college. I love to travel, hike, garden, take photographs but above all, spend time with my family. I hope to keep practicing medicine for many more years and thus continue to meet people from all around the country and world who teach me so many valuable life lessons. I feel fortunate to be part of the Stanford community.

CLINICAL FOCUS

- Internal Medicine

ACADEMIC APPOINTMENTS

- Clinical Assistant Professor, Medicine - Primary Care and Population Health

ADMINISTRATIVE APPOINTMENTS

- Clinical Lead, Santa Clara County Opioid Overdose Prevention Project, (2015- present)
- Leading member Opioid Safety Task Force, STANFORD SCHOOL OF MEDICINE, (2018- present)
- Director Tully Primary Care clinic, Santa Clara County Health and Hospital System, (2012-2014)
- Director Tully clinic express Care Clinic, Santa Clara County Health and Hospital System, (2011-2014)

HONORS AND AWARDS

- Award for Advocacy and Community involvement, Society Of General Internal Medicine, California and Hawaii region (4/2019)
- Leadership Award, Santa Clara County Behavioral Health Departement (10/2019)
- Teacher of the year, Santa Clara Valley Health and Hospital System Residency Program (1994)

BOARDS, ADVISORY COMMITTEES, PROFESSIONAL ORGANIZATIONS

- Fellow, American College of Physicians (2019 - present)

PROFESSIONAL EDUCATION

- Board Certification: Lifestyle Medicine, American Board of Lifestyle Medicine
- Medical Education: University of California at San Francisco School of Medicine (1991) CA
- Chief Residency, Santa Clara Valley Medical Center (1995)
- Residency: Santa Clara Valley Medical center (1995)
- Board Certification: Internal Medicine, American Board of Internal Medicine (1994)

COMMUNITY AND INTERNATIONAL WORK

- Regional Opioid Safety Coalition for Santa Clara County

Research & Scholarship

CURRENT RESEARCH AND SCHOLARLY INTERESTS

The EMPOWER study- a patient centered opioid tapering study for patient with chronic pain on long-term opioid therapy. Funding: PCORI PI: Dr Beth Darnall

Studies suggest that long-term opioid use for chronic pain does not help reduce pain or help patients live fuller lives. Opioid medications have major health risks, even when taken exactly as prescribed, including worsening pain. There are no studies that tell prescribers how to best address their patients' concerns and engage them in opioid reduction, and how to best help them achieve meaningful and successful outcomes that last long-term. Our patients told us that for opioid reduction to be successful, the benefit of lower dosage needs to be well understood by them. Further, the patients want to work with their doctors to create together such opioid reduction treatment plan. Based on such input, we developed a patient-centered study that encourages patient interest and willingness to actively and collaboratively reduce opioids use and test 2 well established behavioral intervention pain treatment.

Study aims: We will test which of the two types of pain management classes described below is best for reducing pain and pain interference, increasing function, and reducing opioids within the context of active, collaborative, patient-centered opioid reduction that addresses their main concerns.

Study description: We will study the effectiveness of two types of active behavioral pain management treatment classes in patients prescribed long-term opioids from primary care and pain clinics in 4 states in the Western U.S. Patients who wish to reduce opioids will collaborate with their doctor to co-create a tailored plan to reduce their opioids. Recognizing that some patients are not ready to reduce opioids, we will also enroll patients who decided not to increase their opioid dose during the one-year study period (opioid dose containment group). All study patients will be assigned to either 8-week group Cognitive Behavioral Therapy for chronic pain, 6-week peer-led Chronic Pain Self-Management Program, or no behavioral treatment. Our two active behavioral treatment groups are evidence-based and widely available. We will determine which behavioral treatment works best and for whom for pain control, functioning and opioid reduction at 12 months within the context of collaborative opioid reduction. We will determine whether the behavioral treatments help improve readiness to reduce opioids for those who elected to hold their opioid dose constant. Our primary outcomes were informed by our patient stakeholders and include pain intensity, opioid use, pain interference, role function, anxiety, depression, pain catastrophizing, sleep, fatigue, and medication side effects. Patients with any type of chronic pain may enroll except for such patients with active addiction, behavioral

or safety concerns. Our project focuses on community outpatient settings where most U.S. patients receive prescribed opioids. Our project is designed such that the results can be broadly applied to anywhere in the US.

CLINICAL TRIALS

- Cognitive Behavioral Therapy and Chronic Pain Self-Management Within the Context of Opioid Reduction: The EMPOWER Study, Recruiting

PROJECTS

- A Patient Education Video on Opioid Tapering - Stanford University- Department of Medicine

Publications

PUBLICATIONS

- **Patient-Centered Prescription Opioid Tapering Methods : A Randomized Clinical Trial.** *Annals of internal medicine*
  Darnall, B. D., Perez, L., Kao, M. C., Lorig, K., Mardian, A. S., Flood, P., Pun, T., Hanson, E. R., Brose, W., Chen, C. A., Cheung, M., Colloca, L., De Bruyne, et al
  2026

- **Brain Glitch.** *JAMA neurology*
  De Bruyne, K.
  2025

- **Engagement in Prescription Opioid Tapering Research: the EMPOWER Study and a Coproduction Model of Success.** *Journal of general internal medicine*
  Mardian, A., Perez, L., Pun, T., Cheung, M., Porter, J., De Bruyne, K., Kao, M., Flood, P., Moore, N., Colloca, L., Cramer, E., Ashton-James, C. E., Lorig, et al
  2021

- **A Brief Screening Tool for Opioid Use Disorder: EMPOWER Study Expert Consensus Protocol.** *Frontiers in medicine*
  You, D. S., Mardian, A. S., Darnall, B. D., Chen, C. A., De Bruyne, K., Flood, P. D., Kao, M., Karnik, A. D., McNeely, J., Porter, J. G., Schwartz, R. P., Stieg, R. L., Mackey, et al
  2021; 8: 591201

- **Comparative Effectiveness of Cognitive Behavioral Therapy for Chronic Pain and Chronic Pain Self-Management within the Context of Voluntary Patient-Centered Prescription Opioid Tapering: The EMPOWER Study Protocol.** *Pain medicine (Malden, Mass.)*
  Darnall, B. D., Mackey, S. C., Lorig, K. n., Kao, M. C., Mardian, A. n., Stieg, R. n., Porter, J. n., DeBruyne, K. n., Murphy, J. n., Perez, L. n., Okvat, H. n., Tian, L. n., Flood, et al
  2019

- **Massive leptomeningeal amyloidosis associated with a Val30Met transthyretin gene** *NEUROLOGY*
  Herrick, M. K., DEBRUYNE, K., Horoupian, D. S., Skare, J., Vanefsky, M. A., Ong, T.
  1996; 47 (4): 988-992

- **PULMONARY TUBERCULOSIS, AMENORRHEA, AND A PELVIC MASS** *WESTERN JOURNAL OF MEDICINE*
  Wehner, J. H., DEBRUYNE, K., Kagawa, F. T., Campagna, A. C., Jensen, W. A., Kirsch, C. M., ENG, R. S.
  1994; 161 (5): 515-518

- **ANGIOTENSIN II-INDUCED RHYTHMIC JAW MOVEMENTS IN THE KETAMINE-ANESTHETIZED GUINEA-PIG** *BRAIN RESEARCH*
  Gerstner, G. E., Goldberg, L. J., DEBRUYNE, K.
  1989; 478 (2): 233-240

PRESENTATIONS

- Treatment of Chronic Pain for the Primary Care Provider - Stanford University- Department of Medicine, UHA, Dominican Hospital in Santa Cruz, CA (6/2020)
- Safe prescribing of Opioids: What does it mean and how do we get there? - Society of general Internal Medicine regional meeting (1/19/2019)
- The conundrum of opioids in the treatment of chronic pain - Regional Hospital (5/2018)
- Safe Prescribing of Opioids for chronic non-cancer pain - Good Samaritan Hospital, Regional Hospital (9/2017)

- A Collaborative, Serial Forum on Practice Improvement in Primary Care Clinics to Support Implementation of a Comprehensive Opioid Program - Santa Clara County Health and Hospital Systems (4/2017 - 6/2017)
- Community Naloxone Distribution Strategies - California Health Care Foundation Annual Opioid Coalition Convening (9/2016)
- Strategies for dissemination of opioid prescribing guidelines to the community - California Health Care Foundation webinar series for statewide coalitions (11/2016)
- Changing the way we manage pain - California Health Care Foundation website for statewide coalitions (9/2016)
- Medication Assisted Treatment of Opioid Use Disorder - Stanford Division of Primary Care (November 2014)