

SAINT JOHN'S

THE MAGAZINE OF SAINT JOHN'S HEALTH CENTER FOUNDATION

Spring 2019

When Cancer Can't Hide

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JOHN WAYNE CANCER INSTITUTE

SAINT JOHN'S HEALTH CENTER FOUNDATION

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Please give now at SaintJohnsFoundation.org or call 310-829-8424, Monday through Friday, 8 a.m. to 5 p.m.



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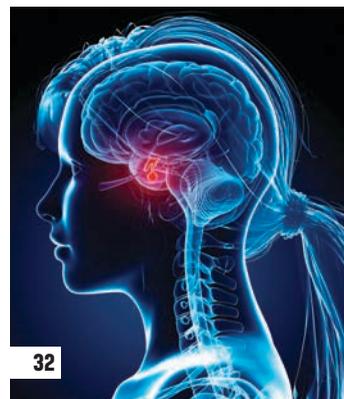
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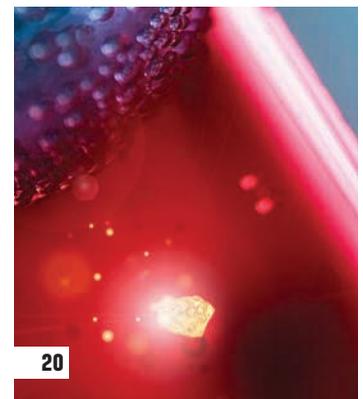
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» One aspect of Providence Saint John's Health Center of which I'm very proud is the way we seamlessly evolve while remaining true to our traditional values. We carry forward a remarkable legacy of care and compassion for all while continuously striving to make the latest medical knowledge and technology part of every patient encounter.

As you read the redesigned edition of the foundation's magazine, *Saint John's*, take note of how much is new ... and yet familiar. Janie Grumley, MD, is our new director of the Margie Petersen Breast Center. She brings to the task not only tremendous qualifications but also a dedication to making available the latest diagnostic and treatment techniques for breast cancer. As you read the interview with Dr. Grumley, you will also see her strong commitment to *our values*—caring deeply about how her patients feel and how she can help them deal with the mental as well as physical aspects of breast cancer. She very much embodies the spirit of Saint John's.

You will also read about the new cardiac surgery relationship between Saint John's and USC, including the addition of Raymond Lee, MD, who will be based at Saint John's and hold a faculty appointment at USC. Cardiac surgery is a rapidly evolving area of medicine. Procedures being done today were only concepts just a few years ago. The new relationship means that there will now be seamless collaboration and exchange of knowledge between our excellent thoracic and cardiovascular surgery department and the team of specialists and academic researchers at USC. This new partnership also reflects our commitment to keeping Saint John's at the forefront of patient care, a tradition for which we are the careful stewards.

We also constantly seek new ways to better serve the health care needs of our local communities. The Community Impact Fund that is administered by the foundation is another extraordinary example of serving the health care needs of those around us in non-traditional ways. By supporting local nonprofits addressing the pressing issue of homelessness, we're tackling a health care issue where it starts and having a direct impact on population health.

A commitment to our values with an eye on the future. It's a Saint John's tradition.



A handwritten signature in black ink, appearing to read 'M Loh'.

MARCEL LOH

Chief Executive

Providence Saint John's Health Center
John Wayne Cancer Institute



Robert O. Klein

ROBERT O. KLEIN
 President and CEO
 Saint John's Health Center Foundation

Mary E. Flaherty

MARY FLAHERTY
 Chair
 Saint John's Health Center Foundation Board of Trustees

» Welcome to the “new” magazine for Saint John's Health Center Foundation, *Saint John's*. As you read through the following pages, we will be sharing with you a more comprehensive view of your health center, one that combines Providence Saint John's Health Center, John Wayne Cancer Institute and Pacific Neuroscience Institute, while keeping you up to date on our philanthropic efforts.

Providence Saint John's Health Center and its affiliates are deeply dedicated to advancing health care through research and clinical care. These enterprises create a unified team effort for which collaboration is essential, unique and of enormous benefit to our patients. Research brings about advances in clinical care; clinical care provides essential information that inspires and informs research efforts. This translates into exceptional, compassionate care that you, your family and friends, and our community deserve.

Philanthropy has made a crucial difference in making Saint John's a top-ranked health center year after year by providing state-of-the-art equipment, support for clinical trials and research, recruitment of world-class medical professionals and new facilities. We are fortunate to have such a caring and grateful community. As you read this issue, you will encounter inspirational stories about your health center, the people who provide the care you deserve and the patients whose lives have been made better—if not saved—because of these collaborative efforts.

These collaborations aren't confined to our campus. The recurring feature about our Community Impact Fund grants will provide you some insight on how the foundation is supporting local nonprofit organizations that are addressing a broad range of needs that impact population health. You'll see that the close and positive relationship between the community and Saint John's benefits everyone.

We couldn't be more excited about our “new” publication that will provide comprehensive coverage of the ever-evolving advances within our campus and the ways in which philanthropy helps make those advances possible.

Welcoming Eight New Foundation Trustees

The Saint John's Health Center Foundation is proud to announce the addition of eight new trustees. The trustees help strengthen the health center through their business acumen, compassion and generosity. We are deeply grateful to them for their service to Saint John's and everyone who walks through the doors of our hospital, institutes and clinics.



JEFFREY ASSAF

Jeffrey "Jeff" Assaf is the chief investment officer and investment committee chairman of ICG Advisors, located in West Los Angeles. The firm oversees the investment activities of high net-worth families and institutions throughout the United States. Prior to founding ICG in 2009, Assaf was a senior managing director of Bear Stearns and head of its investment consulting group. He is a graduate of the University of California, Irvine, (BA, psychology) and the University of Southern California (MBA, emphasis in finance). Assaf and his wife, Cecelia, have two daughters, both born at Saint John's. Assaf serves on several nonprofit boards including the Cancer Support Community Los Angeles and Shatterproof, the largest national charity addressing the opioid crisis.



JONATHAN L. CONGDON

Jon Congdon is the co-founder and president of Beachbody, LLC, which develops at-home fitness programs and nutrition products. Founded in 1998, Beachbody owns the Beachbody On Demand fitness streaming service, the Beachbody Live Fitness Certification business, the Team Beachbody Coach Network, Shakeology, Beachbody Performance and other nutrition lines and popular fitness brands. Beachbody has more than 35 million customers in countries all over the world. Congdon was a finalist for Ernst & Young's "Entrepreneur of the Year" award in 2005. He is a founding member of the Careyes Foundation to further the interests of youth and local communities in the Costa Alegre region of Jalisco, Mexico. Congdon and his wife, Becca, have one daughter.



KATHY DANHAKL

Kathy Danhaki has been involved in supporting educational programs nationally as well as medical research in the field of autoimmune diseases through The Danhaki Foundation. She received a business degree in 1980 from Cal State East Bay and a master's degree in education from Pepperdine University in 2005. Danhaki worked for Price Waterhouse and Coopers & Lybrand for five years. She has been married for 35 years to John Danhaki, managing partner at Leonard Green and Partners. The couple have three children and two grandchildren. Danhaki's interests are traveling, reading and education. She sponsored the Lifelong Learning outreach lecture series in conjunction with Pepperdine University for several years.



MILES FISHER

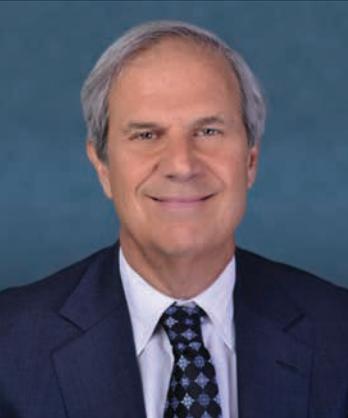
Miles Fisher is the founder and president of Bixby Roasting Co., which he founded in 2016. The company roasts and ships specialty coffee to households and businesses across the country. Fisher received his college degree from Harvard University and then worked as an actor on TV shows and feature films. He serves on the boards of several nonprofit organizations. An avid traveler and golfer, Fisher is a Young Leader at the Milkin Institute and is a director of the Los Angeles Fire Department Foundation. He and wife, Lucy, have one daughter.



MARK HOLSCHER

Mark Holscher is a nationally

recognized trial attorney and partner in the Kirkland & Ellis firm in Los Angeles and San Francisco offices, serving in the Commercial Litigation Practice Group. In the last five years, Holscher has obtained plaintiffs verdicts and settlements of more than \$1.1 billion. He received a bachelor's degree from the University of California, Berkeley, followed by a law degree from the UC Berkeley School of Law. A former assistant United States Attorney, Holscher is a fellow in the American College of Trial Lawyers and the International Academy of Trial Lawyers. Since 2008 he has been selected every year as one of the Top 100 Lawyers in California by the *Daily Journal* and has been recognized in *The Legal 500 U.S.*



LEE S. NEIBART

Lee S. Neibart is the chief executive officer of HBS Global Properties, which owns 83 flagship properties in the United States and Germany valued at approximately \$4.5 billion. In addition to pursuing attractive credit tenant,

net-leased and multi-tenant retail buildings in the United States and Europe, HBS Global Properties has a mandate to explore similar international opportunities. Neibart is also the chairman and senior partner of Trinity Investments. He has held leadership positions at top real estate investment companies including Apollo Real Estate Advisors, NRDC Equity Partners and Robert Martin Company. He received a bachelor's degree from the University of Wisconsin and an MBA from New York University.



DANIEL S. SAMPSON

Daniel S. Sampson is a personal injury attorney at Randolph & Sampson Associations. He specializes in plaintiff's personal injury litigation, business litigation and aviation accidents. Sampson earned an undergraduate degree at Loyola Marymount University and a law degree from Southwestern Law School. He is a member of many professional organizations, including the Association of Business Trial Lawyers

and the Lawyer-Pilots Bar Association. He provides pro bono work to Christian Legal Aid of Los Angeles. Sampson is married to Alexis Amonic Sampson.



EDWARD WHITE

Edward "Ed" White founded Edward White & Co., LLP, certified public accountants, in 1976, representing high net-worth individuals and governmental entities. He holds an MBA from the University of Southern California and has been accepted as an expert by the Superior Court and by the United States Federal Court. He was a professor of taxation at California State University, Northridge, and lectured at USC. White has served on the board of directors of the UCLA Comprehensive Cancer Center, the board of visitors of the Graziadio School of Business at Pepperdine and other nonprofit organizations. White's wife, Mary, is the director of the Angels of the ER program at Providence Saint John's Health Center. The couple has three children and two grandchildren.

» **GET WELL, STAY WELL**

Saint John's Physician Partners, a network of health professionals affiliated with Providence Saint John's Health Center, has expanded to include almost 200 primary care and specialty care physicians, nurse practitioners and physician assistants. The network, which serves the Westside Los Angeles communities, includes 10 medical groups that cover many types of medical needs including primary care, pediatrics, geriatrics, orthopedics, neurosciences and more. Recently the network launched a service to allow primary care and obstetrics patients to schedule their appointments online.

Advantages of using a Saint John's primary care doctor:

- ✓ Many convenient locations
- ✓ Easy referral to specialty care within the network
- ✓ Shared electronic health record system
- ✓ Schedule appointments online
- ✓ Extended hours, urgent care

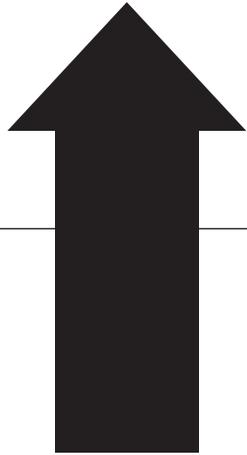
» **SAINT JOHN'S PHYSICIAN PARTNERS**

- Center for Hip and Knee Replacement
- Digestive Health Associates (formerly Southern California Medical Gastroenterology Group)
- Medical Doctors of Saint John's
- Pacific Heart Institute
- Pacific Neuroscience Institute
- Providence Specialty Medical Group (includes individual specialists and other groups)
- Santa Monica Family Physicians
- Santa Monica Women's Health
- Westside Internal Medicine



Santa Monica Family Physicians has opened a new location in the three-story building at 901 Wilshire that is home to 15 physicians. The office also offers urgent care and extended hours until 8:30 p.m. weekdays and from 10 a.m. to 2:30 p.m. on weekends.





12 MINUTES

»» TOPS IN STROKE CARE

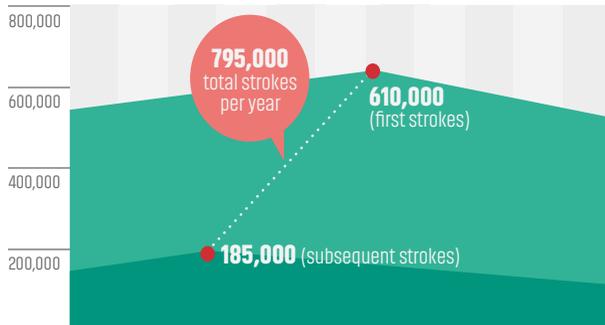
Providence Saint John's Health Center has received widespread recognition for outstanding stroke care services including:

- First center in Southern California to be named a Thrombectomy Capable Certified facility
- Get With The Guidelines® – Stroke Gold Plus Quality Achievement Award and Target: Stroke Elite Plus Honor Roll from the American Heart Association in recognition of its success in implementing high standards of stroke patient care meeting national, evidence-based recommendations
- Named an Emergency Medical Services-designated comprehensive stroke center, which reflects the highest standards of care

»» Strokes per year in U.S.:

795,000 (610,000 are first strokes; 185,000 are second or subsequent strokes)

Source: Centers for Disease Control and Prevention



»» THIS DOESN'T TASTE LIKE HOSPITAL FOOD

Defying the belief that hospital food can't be delicious, Providence Saint John's Health Center dietitians recently revamped the hospital and cafeteria menu to please every palate. The new menu is the first overhaul in 15 years. Patients receive a menu with choices, says Kari Ikemoto Exter, RD, clinical nutrition manager. "Our staff goes to each room with a tablet and takes an order. People like the changes. They like the different options. Food has the power to heal."



THE SAINT JOHN'S RECORD FOR TIME ELAPSED FROM A PATIENT ENTERING THE ER TO THE ADMINISTRATION OF THE CLOT-DISSOLVING MEDICATION TISSUE PLASMINOGEN ACTIVATOR, WHICH CAN PREVENT LONG-TERM BRAIN DAMAGE.





MARCH 1
Chautauqua Weekend

*Rosewood
Miramar
Beach,
Montecito*

MAY 4
**JWCI Auxiliary
La Odisea**

Beverly Hills Hotel



MAY 8
**Associates for
Breast and Prostate
Cancer Studies
(ABCs) Mother's Day
Luncheon**

*Four Seasons
Los Angeles*



MAY 8
**Irene Dunne Guild
General Meeting and
Think Pink Event**

Upper Bel Air Bay Club

**A Homecoming for
Dr. Richard
Essner**



Surgical oncologist Richard Essner, MD, has joined the John Wayne Cancer Institute as professor of surgery, director of surgical oncology and co-director of the melanoma and cutaneous oncology research program. Dr. Essner is no stranger to JWCI. He was a surgical oncology fellow at the Institute from 1992 to 1994 and served as an assistant director of surgical oncology from 1994 to 2007.

During his first stint at the JWCI, Dr. Essner says he was deeply influenced by Donald L. Morton, MD, the renowned melanoma researcher and co-founder of the JWCI.

“The John Wayne Cancer Institute for many years led the world in innovation in cancer care with development of the sentinel lymph node biopsy technology and the creation of vaccines and immunotherapy as primary treatments of cancer,” he says. “For me, working in the melanoma field, it’s an honor to follow after Dr. Morton, who was my friend and mentor; not only for his skill as a cancer researcher but also as a surgeon and educator of the oncology fellows. The work he did laid the groundwork for the latest successes in oncology.”

Dr. Essner’s practice is focused on complex surgical oncology with a primary interest in caring for patients with melanoma and other types of skin cancers as well as head and neck diseases. His research focuses on improving the quality of melanoma surgery to produce better outcomes and cosmetic results. His research also includes developing methods to reduce the incidence of cancer using surgery with immunotherapy or targeted therapy, allowing these other approaches to help when surgery alone is not enough. Treatment of cancer is rapidly changing throughout the world, but unfortunately not all patients are cured.

“My goal at the John Wayne Cancer Institute is to continue the excellence in cancer research, surgical oncology training and patient care and education,” he says. “We have a superb team of oncologists, surgeons and researchers who will ignite the next successes in oncology in the coming years.”

For more information on these and other upcoming events, please contact Tess Csiszar at 310-829-8168 or Theresa.Csiszar@stjohns.org

Many patients don't use all of their prescribed pain medication

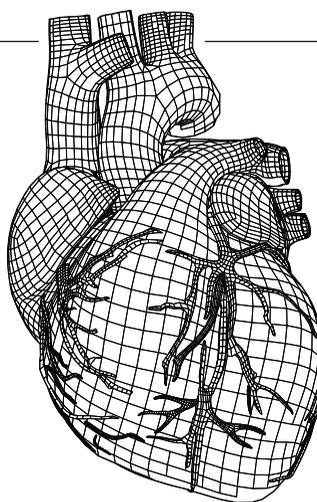
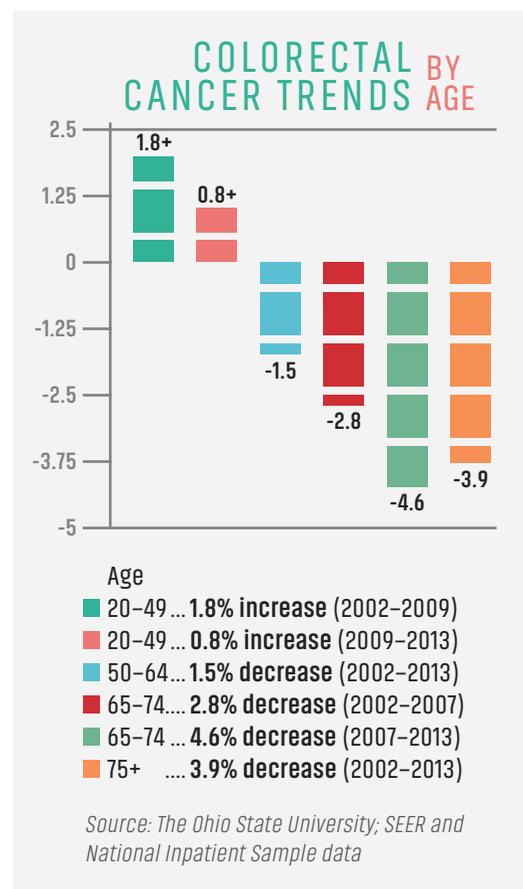
The nationwide opioid addiction epidemic has Americans thinking hard about the value of taking opioids for pain relief and properly disposing of any unused pills. A new study suggests that many patients don't really need all of the pain pills their doctors prescribe.

The study, published recently in the journal *JAMA Surgery*, showed patients used only about one-fourth of the opioids prescribed to them after a common operation. Researchers looked at pain pill usage in 2,392 patients who had one of 12 common operations, such as a hernia repair or appendectomy.

The study is important because patients often have expectations for how much pain medicine they will need depending on what doctors tell them about pain and how many pills are prescribed. In the study, the number of pills a patient received was the strongest predictor of how many they actually used. Other studies show the more opioid medication a patient is prescribed, the higher the risk of developing an addiction or overdosing.

Worrisome rise in colorectal cancer in people under 50

While colorectal cancer rates decline in older adults, the incidence of the disease in people younger than age 50 continues to rise, according to new research. The trend mirrors a rise in obesity. In 2016 roughly 40 percent of U.S. adults under age 50 were obese. The study also showed increases in gastric cancer in people under age 40. Gastric cancer is also linked to obesity.



Assessing Heart Health

Nearly half of U.S. adults have some form of heart disease, according to new research. The study is a good reminder to be aware of your heart health. The heart and vascular specialists at Providence Saint John's Health Center provide a full range of cardiovascular services as well as preventive cardiology assessment and advice. **For more information or to schedule an appointment with our expert heart care team, call 888-HEALING (432-5464).**

ABOUT
35%

OF THE U.S. POPULATION HAS SOME FORM OF HEART DISEASE.

1 IN 3

AMERICANS WILL DIE FROM HEART DISEASE OR STROKE.

ABOUT
2,200
DEATHS

EACH DAY IN THE U.S. ARE ATTRIBUTABLE TO HEART DISEASE.

Q & A

The Best in Breast Care

Dr. Janie Grumley becomes the new director of the Margie Petersen Breast Center.

BY SHARI ROAN

PHOTOGRAPHED BY KRISTIN ANDERSON

In September Providence Saint John's Health Center welcomed a new director of the Comprehensive Breast Program at the Margie Petersen Breast Center. Janie Grumley, MD, was born in Taiwan and grew up in Edmonton, Canada, where she pursued a passion for figure skating. She studied sports medicine at Pepperdine University and obtained her medical degree from Keck School of Medicine of USC, becoming a surgical breast oncologist. Prior to assuming her position at Saint John's, Dr. Grumley practiced at Virginia Mason Medical Center in Seattle. We asked Dr. Grumley about her plans for the Breast Center.

What drew you to Saint John's?

"All the people at Saint John's have been wonderful. Their enthusiasm for the breast program and desire to build on the amazing history of breast care drew me to this program. I love the excitement about change and desire to be on the forefront. Saint John's Health Center is the perfect combination of patient-centered care and innovation, which are critical in cancer care. The partnership between physicians, staff, leadership and the Saint John's Health Center Foundation creates a unique environment for exceptional care. The close collaboration between physicians and the foundation really impressed me. With such support from donors, it is no wonder the physicians at Saint John's are able to reach new heights in patient care."

You are known as an advocate of oncoplastic surgery. What is that?

"Oncoplastic surgery is a novel approach to breast-conserving surgery. Oncoplastic surgery combines breast cancer removal with plastic surgery breast shaping techniques to improve patient outcomes. Breast conserving surgery has been performed for many years and has been shown to be an effective way to treat breast cancer. Unfortunately, traditional techniques have often been limited to small cancers due to the cosmetic deformity that can result. Oncoplastic surgery strategically removes areas of cancer using breast lift techniques to minimize cosmetic deformity. This approach allows for removal of larger amounts of tissue, decreasing the need for multiple operations, which makes it a better cancer operation while preserving the appearance of the breast."

You also offer an innovative treatment called intraoperative radiation therapy (IORT). What advantages does it offer?

"Breast conserving treatment combines a partial mastectomy or lumpectomy with radiation therapy. Most women who want a partial mastectomy will require three to six weeks of radiation therapy as part of their treatment. This one-size-fits-all approach can sometimes over-treat some women with low-risk, early-stage breast cancer. IORT delivers a single dose of radiation at the time of surgery, treating a small area around the tumor bed. This option has been shown to be just as effective as whole breast radiation for women who have low-risk cancers. Being able to effectively treat the site of the cancer while sparing other healthy areas like the rest of the breast, ribs, lungs and heart may have significant long-term benefits. Some women can essentially be done with surgery and radiation therapy in one day, eliminating

the need for prolonged treatments."

You started a multidisciplinary clinic. What is that?

"At the Margie Petersen Breast Center, we provide twice-weekly multidisciplinary breast cancer clinics where patients can come and see a surgeon, medical oncologist, radiation oncologist and, if applicable, geneticist all in one day. This gives the patients a good overview of what treatment will be like and how decisions need to be made. For most patients there is a sense of relief once they have had the opportunity to hear from all the different physicians and get an overview of what their treatment plan will be moving forward."

Is the kind of center you're building unique?

"In the last 10 years I have worked in academic, community and hybrid breast programs and have also had the opportunity to visit many breast centers across the country as a breast program reviewer for the Society of Surgical Oncology Training Committee. There are so many programs out there with unique strengths. Some are great at clinical breast cancer care but lack innovative research, while some are great at research but lack compassionate, coordinated patient care. Very few programs have been able to provide a comprehensive program that combines knowledgeable benign breast care, coordinated cancer care and innovative research. We are building a program that provides excellence in all areas of breast care. We will be a program women will trust with their breast concerns—benign or malignant. We will provide the compassionate, patient-centered care Saint John's Health Center is known for while leading the charge in innovation and breast cancer research, together with the JWCI."



JOHN WAYNE
CANCER INSTITUTE
Providence Saint John's Health Center

Janie Grumley, MD, FACS
Director, Margie Petersen Breast Center

A PLACE FOR WOMEN

**THE REIMAGINED BREAST
CENTER PERSONALIZES
CARE FOR EVERY PATIENT.**

BY SHARI ROAN / PHOTOGRAPHED BY KAREN HALBERT





After receiving a diagnosis of breast cancer, Ingrid Nuber was told by surgeons in her hometown of Nashville, Tennessee, that she would need a mastectomy. Nuber, 44, a cyber security manager, called her sister in Los Angeles to relay the disheartening news.

Nuber's sister, who had received care previously at Providence Saint John's Health Center, convinced Nuber to travel to Los Angeles to get second opinions from other breast surgeons. Two surgeons agreed with the Nashville surgeon that a mastectomy was necessary. But then Nuber walked into the office of Janie Grumley, MD, the new director of the Margie Petersen Breast Center at Providence Saint John's Health Center.

"The other surgeons said I wasn't a candidate for a lumpectomy because it would leave me disfigured," Nuber says. "But Dr. Grumley brought an option to the table that I didn't know about." The option was oncoplastic surgery (oncoplasty), a relatively new type of breast cancer surgery that combines plastic surgery techniques with breast cancer surgery. With oncoplasty, the tumor is removed and the rest of the breast and nipple are spared."

Nuber was stunned at the facts Dr. Grumley presented: The chances of breast cancer survival with oncoplasty would be the same as with mastectomy, the complications with oncoplasty would be less than with mastectomy, and oncoplasty would not be disfiguring. Nuber's oncoplastic surgery on October 8, 2018, was enormously successful.

"I have the chills speaking about it," Nuber says. "I'm literally perfect and cancer-free. That is how life-altering my experience was in meeting Dr. Grumley. She is such an unbelievable doctor."

Oncoplastic surgery for breast cancer is just one of the advanced skills Dr. Grumley brings to Saint John's, after assuming leadership of the program in September 2018.

Dr. Grumley is not only updating the Margie Peterson Breast Center to usher in the latest approaches in breast health, she is also setting the tone that patients like Nuber find extremely comforting, says Donald Larsen, MD, chief medical officer at Providence Saint John's Health Center.

"She was trained by the best," Dr. Larsen says of Dr. Grumley's education at the University of Southern California Keck School of Medicine. "But she also demonstrates compassion for her patients and dedication to the field. She ranks high on the likability scale. She's very approachable."

The breast health clinic

Reimagining the program to include care for all kinds of breast health—not just cancer care—is part of Dr. Grumley's commitment to creating a comprehensive center. At the Breast Health Clinic, Dr. Grumley and her colleagues see women with any type of breast issue, such as breast tenderness, nipple discharge and other conditions.

Dr. Grumley and her team use a personalized approach, which tailors to the individual characteristics of each patient. Women can discuss a schedule for breast cancer screening, what type of screening to have and the conditions that impact screening, such as family history, risk factors and breast density.

"Our jobs as specialists are to know the latest and greatest and to help our patients sift through the noise," Dr. Grumley says. "We want to answer the questions women have about breast health and take better care of the whole person, not just when they have cancer."

Both the Breast Health Clinic and the breast cancer program are staffed with professionals, including a nurse navigator who can respond quickly to patients' needs. "One frustration I hear from cancer patients elsewhere is not being able to reach a person to get an answer when they call in," Dr. Grumley says. "When you have breast cancer, there is nothing worse than getting no answer or getting automation. We are building a warm environment in which patients feel someone is taking good care of them and they have someone to talk to."

Wellness and quality of life are also central to the breast center. Breast cancer patients and survivors require a range of services that go beyond acute medical care.

"There is a rich history of wellness programs for our patients here including yoga, nutrition and meditation," Dr. Gumley says.

Multidisciplinary, one-stop visit

Breast cancer patients will find a multidisciplinary, coordinated team of professionals to care for them throughout treatment. A multidisciplinary clinic has been established in which patients see several specialists in one visit: surgeon, medical oncologist, radiologist, nurse navigator.

"There has to be a lot of collaboration and teamwork," Dr. Grumley says. "As a strong team, we're going to take excellent care of patients."

Women today are benefiting from a surge of advances in screening, diagnosis and treatments that are increasing survival rates and improving patients' quality of life. For example, Saint John's provides women with the latest options for breast cancer screening, says Dr. Larsen.

"Breast imaging is critically important," he says. "We have the most advanced equipment available for breast cancer screening with digital breast tomosynthesis (3-D mammography), breast MRI and ultrasound."

The program physicians are also dedicated to staying "on top of our game" when it comes to surgical skills and treatment options, Dr. Larsen adds. Dr. Grumley is an expert in the use of intraoperative radiation therapy (IORT), which involves delivering targeted radiation at the time of surgery in cases where patients have smaller, less aggressive cancers. Patients who receive IORT may not need traditional radiation therapy that usually includes daily treatments for four to six weeks.

But they also care about their appearance. In Nuber's case, Dr. Grumley had to surgically remove her native nipple areolar complex since the cancer abutted the nipple. Instead of leaving Nuber without a nipple, which is cosmetically deforming, Dr. Grumley relied on oncoplastic techniques and used Nuber's own skin to reconstruct the nipple areolar complex at the time of the partial mastectomy. Other surgeons Nuber consulted with told her she would need to have multiple operations to have breast reconstruction followed by nipple reconstruction or a tattoo to create a nipple.

"I was done with everything in one day," Nuber says of her

BY THE NUMBERS

Benign breast disease affects about
1 MILLION
women annually in the U.S.

ABOUT
11%
of women experience severe cyclic breast pain.



Ingrid and her miniature schnauzer, Dietz.

surgery. “Dr. Grumley introduced me to Dr. Lisa Chaiken to discuss the radiation treatments I would need back in Nashville. I love how they take care of the patient at Saint John’s. It’s not just Dr. Grumley doing the surgery and then wiping her hands of the case and leaving me to figure out the next steps. They were thorough and explained everything to me.”

Improving breast cancer treatment

Dr. Grumley is also on the staff of the John Wayne Cancer Institute. The JWCI is an important part of elevating breast health care at Saint John’s, says Steven J. O’Day, MD, executive director of the JWCI and Cancer Clinic at Saint John’s and regional director of clinical research. “The breast cancer program at Saint John’s encompasses excellence in clinical care as well as clinical and translational research at the JWCI. Breast cancer patients have access to cutting-edge advances in oncology,” he says. “Dr. Grumley’s background in clinical excellence as well as clinical research makes her a

great new partner with the research team at the JWCI.”

Emerging research has the potential to quickly improve treatment, Dr. Grumley says. Funding from the Saint John’s Health Center Foundation is paramount to pursuing research and providing the breast center with the technology and tools to remain at the forefront of care.

“If you don’t have people with the financial resources to support programs and research, it really doesn’t go anywhere,” Dr. Grumley states. “We have strong community support for this program. People have taken an interest in it, and they are passionate about it.”

That passion extends to patients like Nuber, who recently finished radiation treatments and will soon move to Los Angeles, a city she has grown to love. “I will continue to see Dr. Grumley,” she says, “and I plan on using Saint John’s for all of my health care.” 



To support the Margie Peterson Breast Health Center, please contact Pam Solomon at 310-829-8644 or Pamela.Solomon@stjohns.org

Nipple discharge accounts for **6.8%** of referrals to doctors for breast concerns.

ABOUT **7%** of women develop a breast cyst at some point during their lifetime.

The Robotic Super Center

A \$1 million gift
by renowned
philanthropists Eli and
Edye Broad elevates
orthopedic care

When describing the impact that philanthropists Eli and Edye Broad have had on science, education and the arts, words like “significant” and “enormous” are understatements. Their contributions to Los Angeles culture alone are extraordinary and include co-founding The Broad museum, the Museum of Contemporary Art and the Broad Stage, securing funding to build Walt Disney Concert Hall and funding the LA Opera’s landmark production of the *Ring Cycle*.

Last year Edye feared she would have to give up attending her beloved symphonies and operas at the same venues she and Eli so generously supported. The reason: osteoarthritis. “Climbing up and down stairs was very difficult,” she says. “I couldn’t walk very far without pain in my knees.”

Edye had tried minimally invasive procedures in the past, and she felt the time had come for knee replacement surgery. Without hesitation she contacted Andrew Yun, MD, a leading national expert in orthopedic surgery and director of The Center for Knee and Hip Replacement at Providence Saint John’s Health Center.

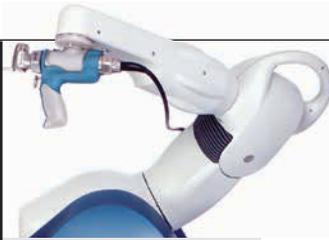
“He has a great reputation,” she says. “My friends who had their joints replaced by him were very happy.”

Dr. Yun performed a partial replacement on both of Edye’s knees, four months apart, using Mako robotic-arm assisted technology, which combines computer-assisted surgery with robotic technology. Edye’s surgery was so successful that she and Eli decided to make a major contribution to Saint John’s, establishing The Broad Center for Robotic Joint Replacement.

“The entire experience was very positive,” says Edye. “Our foundation supports medical and scientific research, and we wanted to do something meaningful for Saint John’s.”

The Broads were interested in making sure as many patients as possible have the opportunity to receive the most advanced orthopedic care.

“We were thrilled with the success of the replacement,” Eli



To support The Broad Center for Robotic Joint Replacement, please contact Jeanne Goldsmith at 310-582-7344 or Jeanne.goldsmith@stjohns.org

BY LAUREL DIGANGI / PHOTOGRAPHED BY RYAN MILLER



says. “When we heard that there was a need for an additional robotic arm, we wanted to ensure that Dr. Yun would be able to continue this important work and decided to make a contribution.”

The Mako robotic arm-assisted technology helps surgeons personalize surgery based on a specific patient’s diagnosis and anatomy. The technology uses a patient’s CT scan to create a 3-D model of the damaged knee joint. Dr. Yun uses this model to pre-plan the surgery. Once in the operating room, he guides the robotic arm within the pre-defined area, and the Mako system helps him stay within these boundaries. The system ensures a more accurate placement of the implants and better soft tissue protection to the ligaments

around the knee, resulting in shorter recovery times and better patient outcomes.

Dr. Yun will use the third robotic arm to train other surgeons.

“Thanks to my long-time colleague, Dr. Kevin Ehrhart, for seeing the promise and for soliciting the support of the foundation, we were early adopters of this new technology because we felt a responsibility to leverage any tool to give our patients better outcomes,” he says. “Now with three Mako robots, we’re not only the busiest and fastest-growing robotic orthopedics program in the country, but more importantly, we’re also recognized as the top-performing center in the country. The Broads’ level of support has allowed us to transition

into a robotic super-center. We are deeply grateful to them for their support of our program.”

The Broads’ support recognizes the high quality of care patients receive from Dr. Yun and his colleagues, says Bob Klein, president and CEO of the Saint John’s Health Center Foundation.

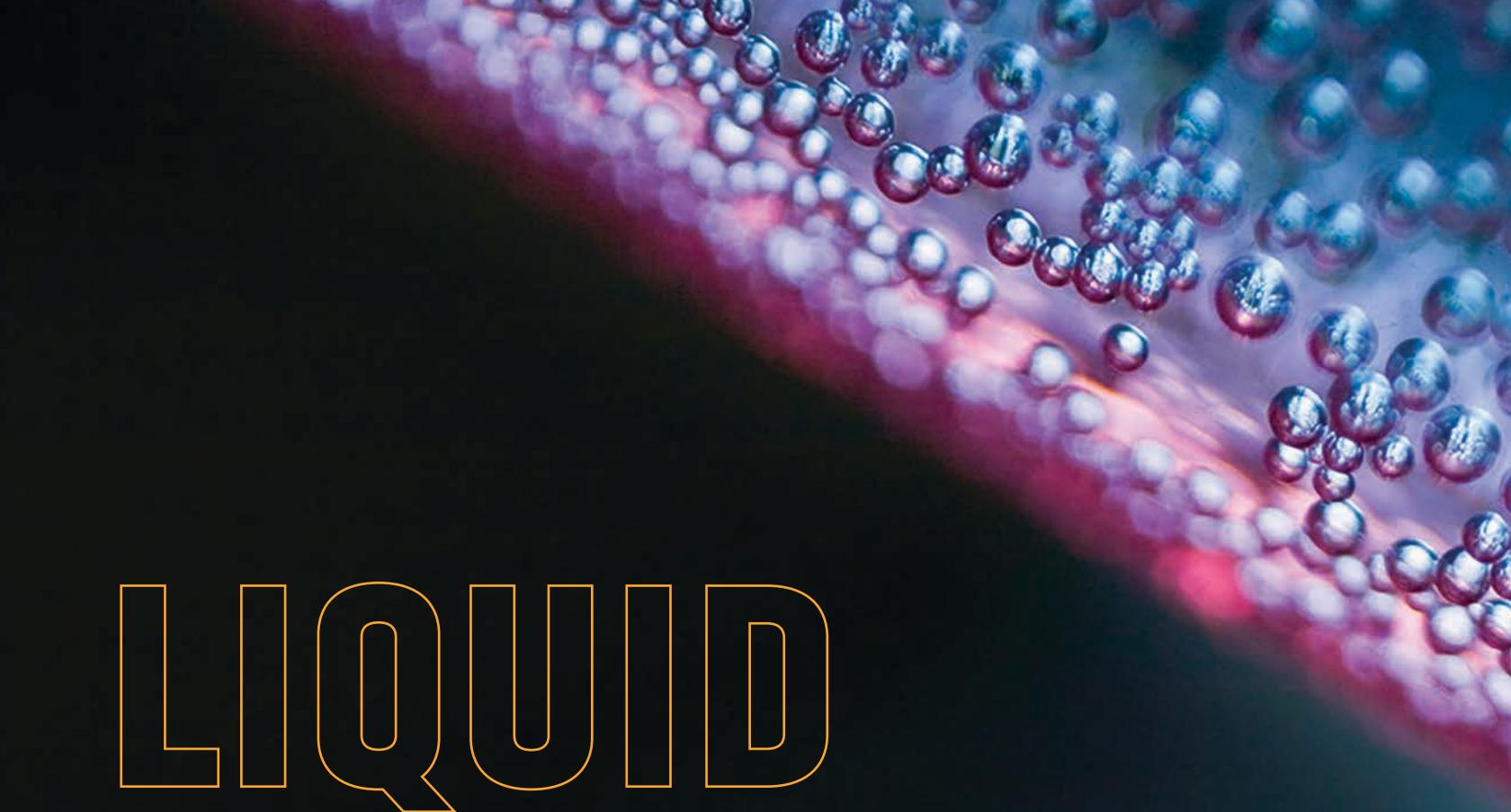
“We’re so thankful to Mr. and Mrs. Broad for their gift to expand the orthopedic robotics program,” Klein says. “This gift not only helps us expand services, it signals to the larger community that this program is worthy of major support. This type of philanthropy is absolutely critical to bringing state-of-the-art medical care to more people.”

Edye was impressed with the professionalism, efficiency and thoroughness of Dr. Yun and his staff, from pre-op education to post-op recovery. “They gave me a book that explained everything, and they have a two-hour class where they answer every conceivable question,” she says.

Her surgery went smoothly, as did her recovery. “I woke up and felt no pain—I was still waiting for them to do the surgery,” says Edye. Recovery was also brisk. The fourth night after her second knee replacement surgery, she felt well enough to have dinner with Eli and their friends. “I brought ice packs with me, and we sat in a booth so I could put my leg up,” she says.

Today Edye is pain-free and enjoying the active life she had pre-surgery. “I’m walking without pain now,” she says. “Best of all I can enjoy the opera and symphony season, walking up and down the steps like everyone else.”

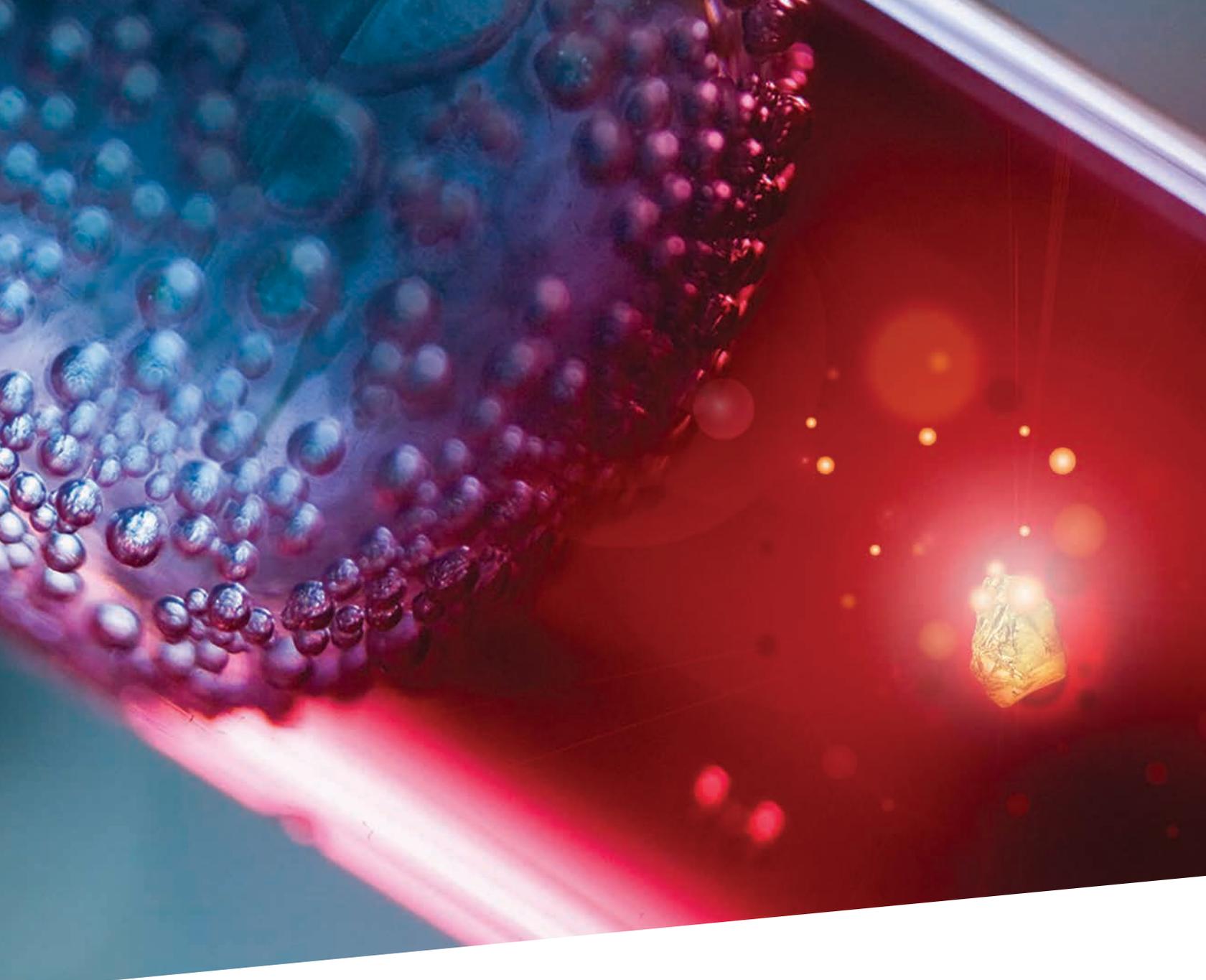




LIQUID GOLD

**RESEARCH PIONEERED AT
THE JOHN WAYNE CANCER
INSTITUTE IS CHANGING
HOW CANCER IS MANAGED.**

WRITTEN BY TRAVIS MARSHALL



Anyone who has ever had a breast lump, a suspicious-looking mole or a mysterious spot found on a chest X-ray knows the anxiety of a possible cancer diagnosis. Typically, those symptoms might lead to a biopsy or some other invasive test to make the determination.

But in the near future, doctors may have tools to make cancer diagnostics faster, easier and more effective for diagnosing the disease at its earliest stages—a key factor in successful treatment. That tool is known as liquid biopsy, and researchers at the John Wayne Cancer Institute were among the first to see its promise more than 25 years ago.

At the John Wayne Cancer Institute, Dave S.B. Hoon, PhD, director of the Translational Molecular Medicine Department, has been at the forefront of liquid biopsy

for nearly three decades. The technology is based on the knowledge that tumors shed tiny bits of material containing DNA and other molecules into the bloodstream and into urine. Over the past decade, sophisticated technologies have been developed to catch and identify these tiny molecular wanderers and analyze them to see if they represent cancer cells and what their DNA can tell doctors about the type of cancer, such as the unique genetic markers (mutations) that characterize the tumor.

A leading expert in the genomic profiling of tumors, Dr. Hoon helped pioneer new molecular approaches for gathering this data in less invasive ways using processes called molecular blood biopsy and molecular urine biopsy—which are commonly referred to collectively in jargon terms as “liquid biopsy.”

“Dave Hoon’s main focus has been on the genomic

revolution of cancer and liquid assessment of tumors,” says Steven J. O’Day, MD, executive director of the John Wayne Cancer Institute and Cancer Clinic at Providence Saint John’s Health Center and regional director of clinical research.

In the age of precision cancer medicine, molecular blood and urine biopsies have the potential to fundamentally change how doctors diagnose, evaluate and monitor a patient’s cancer by providing more precise and highly personalized medicine information.

The many uses of liquid biopsy

Collecting and testing these tumor DNA biomarkers in blood and urine can reveal important information about the genetic profile of the tumor, the growth characteristics of the cancer and even show whether the cancer is responding to treatment in real time.

“One of the biggest advantages is that these tests are non-invasive, so you can do them repetitively—you can do them every week or every month,” Dr. Hoon explains. “For a lot of cancers, like lung, pancreas or liver, there are major risk factors with surgical biopsy, including morbidity and tumor cell shedding. And some tumors can’t be biopsied at all. This allows us to go around that.”

Liquid biopsies have potential applications at all stages of cancer. For screening and diagnosis, testing for the presence of circulating DNA may allow for the early detection of many diseases including cancer. “Eventually we may be able to simply run a panel of markers to check for different cancers,” Dr. Hoon says. “It’ll be like going to the doctor for a prostate specific antigen (PSA) test to screen for prostate cancer.”

Molecular blood and urine biopsies also allow for the collection of circulating tumor DNA, which can be used to genetically profile a patient’s tumor. By identifying specific mutations, like the EGFR gene mutations in lung cancer or BRAF gene mutation in melanoma, doctors can quickly move patients into the best treatment plans using the latest targeted therapies for these mutations.

**"EVENTUALLY
WE MAY BE ABLE
TO SIMPLY RUN
A PANEL OF
MARKERS TO CHECK
FOR DIFFERENT
CANCERS."**



To support translational medicine at the John Wayne Cancer Institute, please contact Saint John’s Health Center Foundation at 310-829-8424.

Liquid biopsy may also be useful when a patient is going through treatment because it can help doctors see in real time how the patient’s cancer responds. Traditional surgical biopsies only show snapshots of a cancer before and after a course of treatment, while liquid biopsies can be done throughout the treatment process—allowing doctors to make dosage adjustments or stop ineffective treatments entirely and shift the patient to a new and perhaps more effective course of treatment.

After a patient has completed treatment, blood and urine tests can be an important tool in monitoring patients for cancer recurrence.

“For early-stage cancer patients, once a tumor has been removed we can use blood and urine biopsies to identify tumor recurrence—potentially even before the disease is clinically visible by traditional imaging approaches,” Dr. Hoon says.

An idea ahead of its time

Dr. Hoon’s research into molecular blood biopsies was ahead of its time. He recognized the potential of circulating biomarkers as sources of information about a patient’s cancer well before genomic profiling of patients and their tumors arrived on the scene. Also, over the years, laboratory tests have been developed in Dr. Hoon’s department to look at different forms of biomarkers that can inform the different aspects of the tumor well beyond gene mutations.

“We started looking at circulating DNA in 1997 because we wanted better ways to monitor our melanoma and breast cancer patients,” Dr. Hoon says. “One of our biggest challenges back then was that we didn’t have all these molecular tools currently available now, so we had to do everything ourselves. The second was convincing the wider medical community that this would be important, because there were no treatments based on molecular information at the time.”

As the understanding of cancer genomics grew more sophisticated, experts realized they could personalize treatment based on an individual patient’s unique genomics. Over the past decade, scores of modern targeted treatments and immunotherapies have been developed based on genomic and molecular markers. Cancer immunotherapies in particular have revolutionized the treatment of some types of cancer. (The JWCI significantly contributed to the development of the new immunotherapies, including studies by Dr. O’Day on a class of immunotherapy called checkpoint inhibitors, and targeted therapies based on specific mutations, like the BRAF mutation in melanoma.)

It also became clear that liquid biopsy could be a vital tool. Today liquid biopsy research is an important and fast-growing focus area for cancer researchers around the world and has moved into the clinical laboratory setting.

“Dave Hoon has always been an out-of-the box thinker,”

says Dr. O'Day. "Just like JWCI co-founder Dr. Donald L. Morton was a pioneer in surgical oncology and vaccines, Dave has truly been a worldwide pioneer in liquid tumors and finding tumors in body tissues that will allow us to diagnose cancer earlier and monitor tumors better."

Moving Toward the Mainstream

Today's current applications for liquid biopsy are still largely investigational, with many questions left to answer. There's also a lot of work to do on the genetic profiling side before these tests can become a proven part of cancer care.

"There are some questions about whether circulating tumor DNA will always match the tumor, and some people aren't convinced that the absence of circulating tumor DNA means there's no tumor," Dr. Hoon explains. "This is also evolving alongside the search for new targetable mutations. It's the mutations and targeted drugs that really move things forward."

The last few years have seen important progress in liquid biopsy knowledge and techniques. In 2016 the first blood-based genetic test for a cancer was approved by the Food and Drug Administration. The test was approved specifically to evaluate

IN SEARCH OF


**CIRCULATING
TUMOR CELLS**


**CIRCULATING
TUMOR DNA**



**"ONE OF THE BIGGEST
ADVANTAGES IS THAT
THESE TESTS ARE
NON-INVASIVE, SO
YOU CAN DO THEM
REPETITIVELY."**

patients with non-small cell lung cancer for EGFR gene mutations that respond to targeted therapy.

And, last year, one large study found that liquid biopsy—either used on its own or with surgical biopsy—helped enable the detection of more genetic mutations for which there are actionable treatments available and that positively affected patient's treatments and outcomes.

"Things have moved forward fastest for lung cancer because there are targeted drugs for this specific EGFR mutations," Dr. Hoon says. "Doctors are using this test quite frequently in patients with EGFR lung mutations because it allows them to get patients with mutations into the gene-targeted therapies right away."

JWCI liquid biopsy research continues to explore new avenues. Dr. Hoon is, for example, working with Timothy G. Wilson, MD, professor and chair of urology and urologic oncology at the JWCI, to develop liquid biopsy technology for prostate cancer by identifying DNA biomarkers in urine.

"We are studying how we might use that as a screening test for cancer—whether as a diagnostic test to know who has cancer or in following patients with cancer," Dr. Wilson says. "We're also working on a device that is simply a wire with antibodies on it that sits in the bloodstream—which Dr. Hoon has designed—that gathers circulating tumor cells in blood to identify tumor spreading. This is a revolutionary device that I think will change the way we diagnose cancer and how we follow patients after treatment to see if the cancer has returned or is spreading to other organs."

As a longtime leader in this field, the JWCI continues to work on the cutting edge of precision cancer medicine. Because work like Dr. Hoon's is only partially funded by grants, private donations are a vital and necessary resource that allows the JWCI to continue making these breakthroughs.

"We're a small cancer institute that's bringing together both academic excellence and community practice, and we collaborate both internally and externally," Dr. O'Day says. "I think that's what makes us unique and gives us the potential to be a part of things much bigger than ourselves." 

A Win-Win for Everyone

Saint John's partners with USC for cardiac surgery services.

Cardiac surgery at Providence Saint John's Health Center has been transformed by a new partnership with experts at Keck Medicine of USC. The partnership, launched in late 2018, will permit an expansion of cardiac surgery capabilities, both in terms of the number of surgeries performed and the types of surgeries offered.

Spearheading the partnership is Raymond Lee, MD, who has joined the USC faculty but will be operating at Saint John's. Dr. Lee will also be joined by other USC cardiac surgeons, as necessary, as well as John M. Robertson, MD, director of thoracic and cardiovascular surgery at Saint John's.

"We're excited about this partnership," says Marcel Loh, chief executive officer of Providence Saint John's Health Center. "Dr. Lee is the perfect fit for us, given where we are in the development of our program. He's bringing in additional skills that will enhance what we do here, such as minimally invasive cardiac surgery."

Prior to his appointment at Saint John's, Dr. Lee was an in-demand, board-certified thoracic and cardiac surgeon in Winston-Salem, North Carolina. He's no stranger to Southern California, however. He grew up in Valencia and attended the University of Southern California for residency and completed his cardiothoracic surgery and advanced heart transplant and mechanical support training at Columbia University/New York Presbyterian Hospital.

"There are so many things that are beneficial about this," says Dr. Lee, who began working at Saint John's in September. "Saint John's has a great opportunity to grow in multiple ways and branch out to other types of heart surgery. The Saint John's administration supports the growth of the program."

Dr. Lee and other USC cardiac surgeons

are delivering "academic-level" care to Westside residents who don't have to leave the comfort and familiarity of Saint John's Health Center, says Craig J. Baker, MD, chief of the division of cardiac surgery at the Keck School of Medicine. Dr. Baker also serves as vice chair of surgical education and directs the cardiothoracic surgery training program.

"We can expand the scope of procedures previously performed at Saint John's—offer new and emerging technologies," Dr. Baker says. For example, he says, there is increasing demand for complex aortic valve surgeries that can now be provided at Saint John's.

"We think an academic partnership is a win-win-win," he says. "It's a win for the patients because they are getting outstanding care in their local community. It's a win for Saint John's because they are delivering state-of-the-art care. And it's a win for us because we think we have an exceptional product at USC, but we know patients appreciate short commutes."

Occasionally patients will be transferred to USC for highly complicated care, such as when there is a

need for mechanical support devices or heart transplantation. "In the past we have sometimes needed to transfer patients to other hospitals for a higher level of care, but those centers couldn't take them. USC will take our patients immediately," Loh says. "There will be no delays in transition."

Services will also expand at Saint John's. The program recently started an ECMO (extracorporeal membrane oxygenation) program, which supports patients with respiratory or cardiac failure with artificial portable heart and lung machines. With the help of Peter Pelikan, MD, medical director of the cardiac catheterization laboratory at Saint John's, and through a donation, the first ECMO pump at Saint John's was purchased.



For more information on how you can support cardiac surgery services at Providence Saint John's Health Center, please contact Irene Bristol at 310-829-8348 or irene.bristol@stjohns.org.



(From left) Dr. John M. Robertson, Marcel Loh, Dr. Raymond Lee and Dr. Craig J. Baker

“We’ve always had a great program, but it’s now better due to 21st-century technologies,” says Dr. Robertson, who joined Saint John’s in 1987. “Even the most extreme forms of cardiovascular disease can be treated here. Dr. Lee has experience in minimally invasive cardiac surgery, and now we offer that service as well.”

Dr. Lee and Dr. Robertson recently performed the first minimally invasive mitral valve surgery at Saint John’s. “Dr. Lee is a very talented surgeon,” Dr. Robertson says. “After his training, he went to a community hospital in North Carolina—a hospital similar to ours—and developed a program that is exactly

what we want him to create here.”

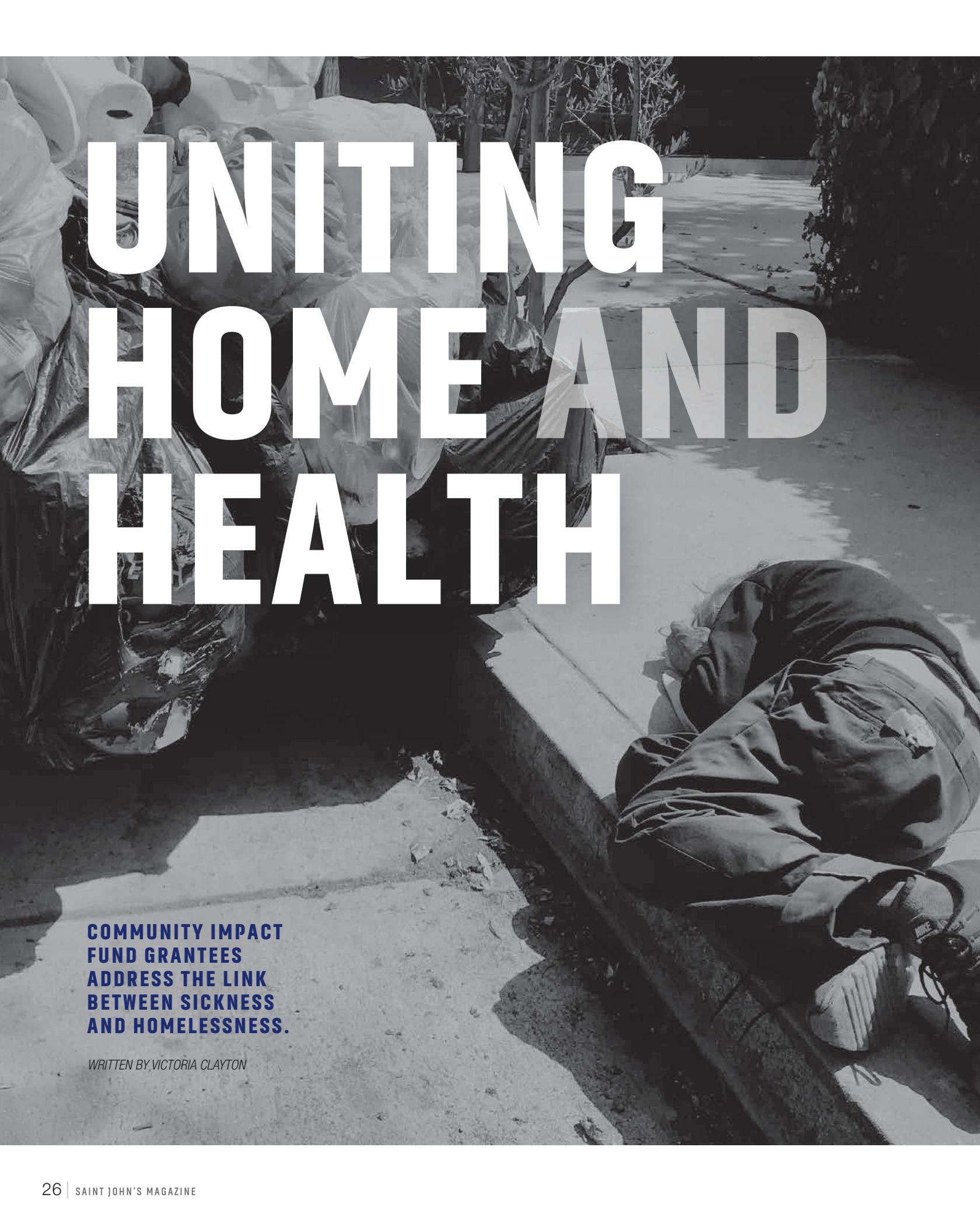
Dr. Lee will have a beloved role model in Dr. Robertson, who has served as president of the medical staff and chairman of the surgery department. He currently serves as a member of the Saint John’s Health Center Board of Trustees.

“Dr. Robertson has led the program for many years and has done a phenomenal job,” Dr. Lee says. “We now want to grow the program to fit demands of the future. My goal is not to stick a round peg in a square hole. The most important thing is to build trust, see what the needs of the hospital are and grow the team. I’m very much a family man. Building a family at Saint

John’s is important to me.”

Supporters of Saint John’s have been generous in building the cardiology and cardiac surgery programs, and that support will be required in the future, says Bob Klein, president and chief executive of the Saint John’s Health Center Foundation.

“Our cardiac surgery program has long been one of the highlights of our hospital,” Klein says. “With Dr. Lee on board, we are dedicated to offering a wide range of services and the latest surgical innovations. That commitment requires the philanthropic support of the community, who will so greatly benefit from this top-flight program.”

A black and white photograph showing a person sleeping on a concrete ledge. To the left, there is a large, messy pile of trash, including plastic bags and other debris. The person is wearing a jacket and sneakers. The background shows a paved area and some trees.

UNITING HOME AND HEALTH

**COMMUNITY IMPACT
FUND GRANTEES
ADDRESS THE LINK
BETWEEN SICKNESS
AND HOMELESSNESS.**

WRITTEN BY VICTORIA CLAYTON

THE GIFT OF HEALTH

The Community Impact Fund (CIF) was established by the Saint John's Health Center Foundation to support our local health care partners in improving the health of our community. Each year the CIF committee makes grants to entities striving to improve the health of local residents. The model is a unique approach to health care philanthropy, says Jeff Schaffer, vice president of client services for JMC Philanthropic Advisors, an organization that advises the foundation on philanthropic goals.

"Part of what Saint John's has done is to take a broad view of what community health means," Schaffer says. "What they're funding is getting at root causes of health issues in the community and trying to address them."

This issue of *Saint John's* magazine contains the first in a series of stories on organizations that have received CIF grants. The first feature in the series explores CIF funding for programs addressing homelessness.

On a Saturday afternoon late last fall, paramedics transported a 21-year-old woman from Venice Beach to Providence Saint John's Health Center. The woman, seven months pregnant, reported trouble breathing. And she had another issue—she'd been living on the streets for several months.

Within a couple of hours, emergency doctors addressed the mother's and child's immediate medical concerns. The medical assessment showed both were stable. Yet health care providers have become acutely aware that without reliable shelter, a person's health status isn't truly stable.

Any health condition—asthma, diabetes, addiction, heart disease, mental health issues or even a minor cut or injury—can easily become a health crisis if you don't have a place to live, says Ron Sorensen, former director of community health partnerships at Providence Health & Services. That's why Saint John's Health Center Foundation has awarded several of its Community Impact Fund grants to local organizations that serve

people without a home.

The need is tremendous. Each night in Santa Monica alone there are more than 950 people who don't have a home. In Greater Los Angeles, that number is close to 55,000.

"The problem is real, and it's significant. Clearly this is why it's not unusual for our emergency department to see up to 150 patients each month who are homeless," says Sorensen.

Some of the patients truly have emergency-level issues, but many could have avoided the ER if they had housing and access to basic health services, food or a bed, he says. "We even see some people who really only need a prescription refilled or something as simple as that."

Saint John's believes it's unconscionable to address any immediate medical situation without taking a crack at the bigger issue. Mallnese Tarpley, community care coordinator for the homeless care navigation program, is part of the Saint John's team working on addressing homelessness

and its related challenges. Her position is a linchpin of sorts. Stationed in the emergency department, she's the one called on to address a patient's housing and social service issues after discharge. Plans are underway to hire a second coordinator position to work the night shift at Saint John's using a CIF grant.

"I make that direct connection with them. I'm the one to say, 'Can you please allow me to help you?' by providing resources and referrals related to an individual experiencing homelessness," says Tarpley. Not a quick or easy job. Patients often have complex problems and at least half won't accept help. For her, success hinges on attentive listening.

FIVE METRO AREAS WITH THE HIGHEST NUMBERS OF HOMELESS PEOPLE:

NEW YORK CITY 76,501

LA COUNTY 55,188

SEATTLE/KING COUNTY 11,643

SAN DIEGO COUNTY 9,160

DISTRICT OF COLUMBIA 7,473

"When they see that I'm really listening to their story, listening to their concerns and struggles, that's when their hearts begin to speak," she says. "It might take hours, but that's when they become open to getting help."

And that's also when the heavy lifting begins. Tarpley, who has an extensive background in community services for Angelenos who are homeless, is extremely familiar with the Los Angeles County Homeless Coordinated Entry System—the first step for a homeless person to be screened for resources. She makes sure that a patient is referred to be screened and entered into the CES system or re-entered if they've fallen out.

She then figures out an appropriate next step based on the patient's needs. Sometimes that means she can obtain an emergency housing voucher, shelter placement referral or a spot in an appropriate drug or alcohol treatment program, along with a connection to

an agency that will coordinate care and other long-term housing solutions.

Or, as was the case with the pregnant young woman, sometimes that means connecting the patient with family members able to assist. "The young lady had some mental health issues along with her health problem, yet her family was out there actively looking for her," Tarpley says. "Ultimately she told me, 'I just want to go home.' She was able to provide me with names and phone numbers of relatives so I could make that connection for her." Tarpley was even able to offer the woman free transportation to return back home, thanks to CIF grant money.

Of course, it's only the luckiest patients who have their challenges met by a phone call and a ride. That's why Tarpley works in tandem with community agencies such as The People Concern, another CIF grant recipient, that provides everything from short-term respite beds to permanent supportive housing and more.

"The People Concern's longstanding relationship with Saint John's is nothing short of a blessed collaboration," says John Maceri, chief executive officer of the agency. The agency was responsible for helping Saint John's develop the community care navigator program at the hospital.

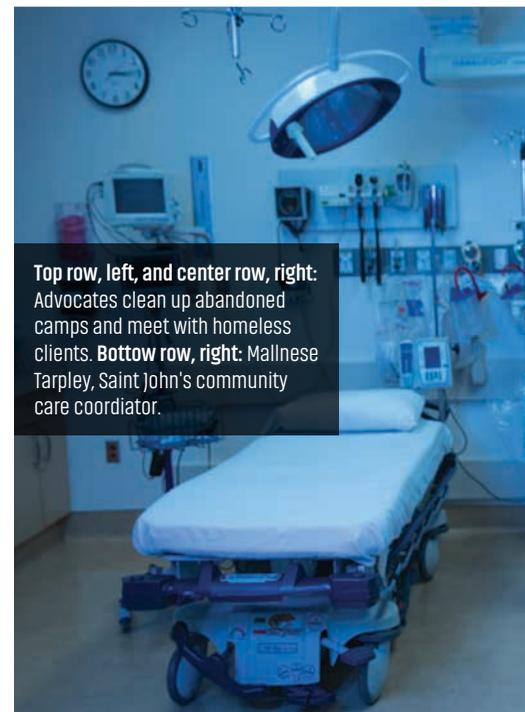
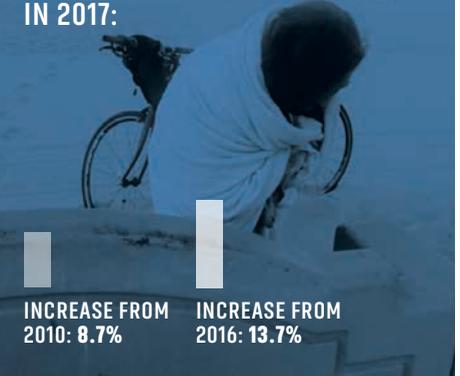
"Together we've figured out how to deliver a better quality of care and quality of life for the patients who get discharged from the emergency department," he says. In fact, the program developed between Saint John's emergency department and The People Concern has become the prototype of compassionate care and treatment of people who are homeless for all the hospitals on the Westside.

The Community Impact Fund hasn't stopped with merely supporting emergency department personnel and agencies that take care of discharged patients. The point is to shrink the homeless crisis and the myriad health threats associated with it. To this end, in 2016 CIF was one of the first significant donors to The Pacific Palisades Task Force on Homelessness, a grassroots organization dedicated to solving the homeless crisis in their community.

Charles Smith, a CIF trustee, was one of the earliest champions of the once-



OF THE 134,000 TOTAL HOMELESS IN CALIFORNIA IN 2017:



Top row, left, and center row, right: Advocates clean up abandoned camps and meet with homeless clients. **Bottom row, right:** Mallnese Tarpley, Saint John's community care coordinator.



ON ANY GIVEN NIGHT IN CALIFORNIA (2017):

134,000 PEOPLE WITHOUT A HOME

LA COUNTY: 55,188

(74.7% UNSHELTERED)



fledgling organization. “What I saw was a small group of very professional and determined folks who weren’t just looking for easy answers,” Smith says. “They didn’t just want to call the police on people who were homeless in their neighborhoods. They wanted to figure out how to help and how to house these people.”

Securing the initial grant money from CIF allowed the Pacific Palisades Task Force to implement an effective three-pronged approach, explains Sharon Browning, vice president of the task force. “Our project model is that we raise funds to pay for a full-time professional outreach team from The People Concern.”

The second prong of the program includes a rotating group of volunteers that goes out daily, diligently looking for people who could benefit from professional outreach.

The third prong involves a lot of community education. “Education is definitely something we’re really proud of,” says Barbara Overland, co-chair of fundraising for the task force. “Through a series of discussions and events, we’ve created more understanding and compassion for the problem in our community.”

The nascent task force’s results aren’t too shabby either. Their organization has grown considerably, and they’ve obtained health care and immediate housing for the vast majority of the people with whom they’ve engaged, directly securing permanent homes for many of them.

“We constantly hear from our community that the improvement is tremendous,” says Doug McCormick, president of the task force. “What was a very frightening situation to some people just a few years ago isn’t any longer. Our community now takes great pride that we engage people who are homeless, as opposed to turning our back on them or being angry.”

Furthermore, the Pacific Palisades Task Force has created a program model worth replicating. Malibu has already started a program using the task force’s blueprint. Task force members have also been asked to help Brentwood adopt such a program, while Hollywood, Studio City and Manhattan Beach have also expressed interest.

“The ripple effect is astounding. It’s humbling to think how many people might actually get helped with what was started by a tiny group of dedicated people. But it all hinged on that initial CIF grant,” says McCormick. “When others saw that Saint John’s believed in us, it was a game changer.”

Tarpley is currently training a community care coordinator from Cedars-Sinai Medical Center.

The community care coordinator program at Saint John’s “would not be possible were it not for the funds received from the foundation,” Tarpley says. “Many lives have been positively impacted because of the generosity and compassion of those who give and the support of the foundation. This also includes Saint John’s caregivers who work effortlessly around the hospital to assist and help our patients who are experiencing homelessness.”

OF THE 134,000 HOMELESS IN CALIFORNIA:

Individuals

112,756

People in families with children

21,522

Unaccompanied homeless youth

15,458

Veterans

11,472

Chronically homeless individuals

35,798

Will homelessness—and the accompanying health issues—ever be a problem solved? The People Concern’s Maceri says he’s optimistic homelessness will at least be considerably decreased in the next few years. “The good news is that these are problems that respond well to smart, strategic investment and collaboration. I’m heartened that so many good people are coming together and figuring this out.”

MEET THE COHENS

Overnight Angels

Safe Parking LA changes lives—including those of co-founders Pat and Ira Cohen.

BY MELANIE ANDERSON / PHOTOGRAPHED BY MONICA OROZCO





Three or four evenings a week, Pat and Ira Cohen, a retired couple living in Westwood, can be found in a parking lot at the Veterans Affairs West Los Angeles campus, visiting with approximately 15 veterans and their families. The Cohens are hands-on co-founders with Scott Sale, MD, of Safe Parking LA, a nonprofit dedicated to providing people who live in their vehicles with a secure place to park overnight—and a link to crucial social services.

“What we’ve created is not a be-all and end-all,” says Ira, a former senior vice president of Trader Joe’s and veteran who served in Germany during the Korean War. “Our intent is to find clients housing as rapidly as possible by connecting them with social workers.”

The couple have also been very generous to Providence Saint John’s Health Center by supporting the community care coordinator who connects homeless individuals coming through the emergency department with social services. “The community care coordinator program spoke to us,” says Pat. “The fact that Saint John’s emergency room personnel refer these individuals to social workers really caught my eye. It’s wonderful that they take that step.”

The couple’s commitment to assisting the homeless started about 10 years ago after a cousin called Pat to tell her about Santa Barbara’s New Beginnings Safe Parking Program and urged the Cohens to bring it to Los Angeles via their temple, Leo Baeck. After seeing the Santa Barbara program, they were moved to do something to help.

“It’s a challenge for those individuals who are forced from a home to live on the sidewalk or live in your car—if you’re fortunate enough to have a car,” Ira says. “These people are survivors, and I just revere their tenacity.”

For Pat, the project fit with her belief in public service. “My family was always active in giving back, doing charity work and volunteer work and being on boards. It was influencing on my life,” she says.

But there was a hitch to launching the local Safe Parking program: It was illegal to reside in a vehicle in Los Angeles. “They changed the law in 2014, so we regrouped and started again,” says Pat, who worked in politics before becoming a real estate agent and business owner. “We met with city council members to educate them, get



For more information on supporting the community care coordinator program at Saint John’s, please contact the Saint John’s Health Center Foundation at 310-829-8424.

their approval and figure out how we were going to raise the money. It took us four years to open our first lot.”

That lot opened last March at St. Mary’s Episcopal Church in Koreatown, where Reverend Anna Olson and her

congregants have embraced their overnight guests. “The parishioners are really supportive,” says Ira. “If someone can’t get the car out in the morning, they’ll contact one of the congregants who will call AAA to help move it.”

Including the VA facility, Safe Parking LA manages five lots around Los Angeles—providing each one with a security guard and sanitary facilities—and aims to open at least one in each of the 15 council districts by the end of 2019.

“We are really connected to this project and the homeless,” says Ira. The ability to make an immediate difference in the lives of people who are homeless is also what drew the couple into a partnership with Saint John’s. When Pat and Ira toured Saint John’s, they were struck by the health center’s commitment to helping vulnerable people.

“It’s very admirable that Saint John’s would help not just people who pay for services inside the building but also look out for people who live on the streets and cannot afford medical care,” Ira says. “Saint John’s has broadened its scope by assisting these individuals.”

Pat and Ira, who use Saint John’s for their own health care, were long-time patients of internist Graham Waring, MD, who passed away last May. “Dr. Waring was so exceptional; I was with him for 33 years,” says Pat, who has lived on the Westside since attending University High. “All of our doctors are at Saint John’s, and we really love the place.”

At the VA the Cohens have bonded with the veterans, who refer to them as angels. “It’s a gift to be with these people; they’re so appreciative,” says Pat. “It rejuvenates our lives.”

The greatest gift is seeing their friends transition into permanent housing, like Carla and Lawrence McCue did last summer. “It’s incredible,” says Pat. “We were with them every step of the way. And when they moved in, they had us over for dinner the next week.”

THE TUMOR THAT CHANGED A LIFE

A FORMER PATIENT JOINS
FORCES WITH THE PACIFIC
PITUITARY TUMOR CENTER.

BY NANCY BRANDS WARD / PHOTOGRAPHED BY KRISTIN ANDERSON

More than 25 years ago, Sharmyn McGraw began having problems with her pituitary gland, though she didn't know it—and remarkably—neither did her doctors. Throughout her 20s, McGraw was trim, fit and muscular; she wore a size 2. But then she turned 31 and began gaining weight.

When she put on 15 pounds in three weeks, she went to a doctor who told her it was normal for people to gain weight as they aged. Although she trained with a personal fitness trainer and worked out five days a week, the doctors simply recommended diet and exercise.

McGraw hit the treadmill, pounded the pavement and dieted. However, the weight continued to pile on. At one point she ate only chicken and broccoli for breakfast and dinner and an undressed salad for lunch.

She continued to gain: 85 pounds in six months—as much as 11 pounds in four days—until finally by the end of a year she'd gained more than 100 pounds. Her long, blond hair began falling out in clumps. She had a moon face covered with a red rash and a buffalo hump lodged at the back of her neck.

McGraw sank into despair as doctor after doctor failed to diagnose the problem. She was ashamed about having to wear maternity clothes. She felt angry and frustrated by the doctors, especially by the one

who told her, "I bet if we locked you in a closet with nothing but water, you'd lose weight."

She burst into tears in the supermarket after seeing the shock of how she looked register on the face of a friend she hadn't seen for a while.

Ultimately McGraw diagnosed herself and eventually she was steered to endocrinologists who confirmed the diagnosis of an ACTH-secreting pituitary adenoma (a benign tumor), which causes excessive production of the adrenal hormone cortisol and resulted in Cushing's





disease and all her related symptoms.

Finally, on the recommendation of a former client, she was referred to neurosurgeon Daniel F. Kelly, MD, who is founder and director of Pacific Neuroscience Institute (PNI), the Brain Tumor Center and the Pituitary Disorders Center at Providence Saint John's Health Center. In April 2000, he removed the tiny, difficult tumor through McGraw's nostrils, using an endonasal

“SHARMYN HAS BEEN SO INSTRUMENTAL TO SO MANY PATIENTS AROUND THE GLOBE OVER THE LAST 19 YEARS SINCE SHE STARTED OUR PITUITARY SUPPORT GROUP.”

surgical approach, and helped McGraw regain her health and quality of life.

More common than most people think

Pituitary tumors (also known as adenomas) are the third most-common brain tumor. About 10,000 are diagnosed each year in the United States, according to the American Cancer Society. Very few are cancers although a significant minority behave aggressively and invade the surrounding skull base area below the brain, making a cure a challenge.

The pituitary gland function is a mystery to most people, Dr. Kelly says, explaining that as the “master gland” it’s responsible for coordinating all the body’s hormonal functions. Situated in a critical spot at the base of the brain, the pea-sized gland is close to the optic nerves and tucked between the paired carotid arteries.

Symptoms of pituitary tumors can include the release of too many or too few hormones, nausea, weakness, sexual dysfunction and unexplained weight gain or loss. While those are a few common symptoms, the pituitary gland, which is less than 1 centimeter in size, is complex. Many small tumors require hormonal testing to confirm the diagnosis. However, many larger pituitary tumors are diagnosed because of worsening headaches or vision loss as the tumor expands and compresses the surrounding structures of the skull base and encroaches on the optic nerves.

“It’s very common for someone with Cushing’s disease to go undiagnosed or perhaps never diagnosed for many years because no one thinks to measure their cortisol and ACTH production,” Dr. Kelly says. “Sharmyn’s case was unfortunately quite typical of someone who, in retrospect, had all the signs and symptoms of Cushing’s disease for years—going from skinny to quite heavy from excess cortisol and ACTH in her body. Fortunately, we were able to find her pituitary tumor and remove it completely.”

The great majority of symptomatic pituitary adenomas require surgical removal. The goal of surgery is always safe removal with preservation of the normal pituitary gland. At PNI, based on years of published data, neurosurgeons are able to preserve or restore gland function in approximately 95 percent of cases. Nearly all surgeries are done

Sharmyn McGraw facilitates a pituitary disorders support group.



To support the Pacific Pituitary Tumor Center, please contact Cookie Galanti at 310-829-8423 or cookie.galanti@stjohns.org

with a highly experienced neurosurgical and ENT team working together with a high-definition endoscope through both nasal passages, micro-instruments, surgical navigation (which is like GPS for the brain) and Doppler ultrasound to precisely locate the carotid arteries. In McGraw’s case, almost 20 years ago, Dr. Kelly was able to remove the tumor through the nose using an older microscopic approach without navigation or the Doppler, which make the surgery today even more accurate and safe.

Dr. Kelly describes these technologies as “game changers over the last 15 to 20 years in pituitary and skull base surgery.” Some tumors may also require medication or radiation.

Leading expertise under one roof

The benefit of the Pituitary Disorders Center is that it offers one-stop shopping with world-renowned endocrinologists, ENT surgeons, neurosurgeons, neuro-ophthalmologists and other specialists under one roof. The center provides comprehensive care to patients with all types of pituitary disorders using a multidisciplinary approach that tailors a treatment plan to each individual’s specific needs.

“We’re considered one of the leading centers in the world for managing pituitary disorders,” says Dr. Kelly, who himself has operated on more than 2,000 pituitary tumors in his 25 years of practice. “We

are always striving to advance expertise in this area through

research, fellowship training, as well as hands-on courses and symposia in endoscopic and keyhole surgical techniques.”

Just this year, Dr. Kelly and his colleagues published a landmark study on their experience with more than 500 patients in the *Journal of Neurosurgery* on repair of cerebrospinal fluid leaks, which are one of the most common post-operative complications of this type of surgery.

The center is also home to the longest-running support group in the country for people with pituitary tumors. McGraw started the support group under the direction of Dr. Kelly in 2001—a year after her surgery.

Cushing’s was life-changing

Adding 100 pounds to her small frame in a culture that prizes thinness gave McGraw a chance to think about what life is really about. That led her to turn one of the most devastating experiences of her life into a blessing. Out of her illness, she developed a passion to educate and help people in the same situation, with Dr. Kelly as a teammate.

“I was mistreated in an environment that was supposed to help me. Many

medical professionals, as well as the public, lack education about the subject,” McGraw explains. “I had to use my platform to change how people are being diagnosed and treated.”

Today the 56-year-old salesperson from Newport Beach continues to lead the PNI Pituitary Support Group and serves as a patient advocate worldwide for those affected by a pituitary disorder. People from as far as Australia and India tune into the live-streamed support group and mini-seminar sessions that are held several times a year.

“Sharmyn has been so instrumental to so many patients around the globe over the last 19 years since she started our pituitary support group,” Dr. Kelly says. “Her infectious enthusiasm, sunny outlook and focus on education and empowerment is always uplifting and helpful to patients, many of whom are really struggling with their pituitary and hormonal health issues.

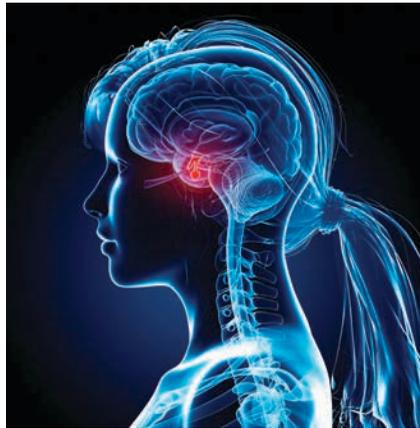
“Her broader efforts nationally and internationally, through her website, social media and emails, have also been tremendously beneficial for pituitary patients around the globe, helping them get the information they need and finding the right specialists. She is indeed a force of nature, and we are so thankful for what she has done and continues to do.”

Facing Cushing’s disease has also helped McGraw make another transition by encouraging her to become a spokesperson for the disorder. Growing up dyslexic and humiliated by her lack of spelling and grammar skills, she once “wouldn’t even write a Post-it note.” Now she’s a published author. Her writing career began when *Women’s Day* published her story and continues through a wide range of other publications and television appearances. She’s also working on a mystery book series, which she hopes to dedicate to pituitary disorders.

“Cushing’s disease has turned out to be a blessing—the doctors and the patients are the best part

of my life,” she says. “I wouldn’t change it because of all the wonderful things that have come out of it for myself and for so many patients.”

As to the team at PNI, McGraw says, “There’s no one better. These doctors care about their patients. That’s what is important and why I love working with my friends at PNI. That’s why I wish every patient could see doctors like the team here. They set the bar really high.” 🤝



THE PACIFIC PITUITARY DISORDERS CENTER

About 10,000 Americans each year are diagnosed with pituitary tumors. The physicians at the Pacific Pituitary Disorders Center are among the most experienced in the world at endonasal endoscopic surgery for pituitary tumors. In addition, the team has advanced the care of patients with pituitary disorders with major publications, courses and symposiums. The center treats:

- Pituitary adenoma
- Craniopharyngioma
- Rathke’s cleft cyst
- Other related tumors and cysts, such as chordomas and meningiomas
- Pituitary failure
- Pituitary inflammation
- Cerebrospinal fluid leak

FIND SUPPORT

Taking care of the whole patient and family members is what we do best. Here are several support groups offered throughout Providence Saint John’s Health Center and its affiliates:

PITUITARY DISORDERS PATIENT SUPPORT GROUP

This free support group provides education, support and empowerment for those dealing with challenges of pituitary tumors.

For more information on the meeting dates and times call Sharmyn McGraw at 888-410-3334 or email pituitarybuddy@hotmail.com.

STROKE PATIENT SUPPORT GROUP

Stroke survivors and their family members discuss recovery, coping skills and resources. The group is facilitated by a stroke survivor and includes guest speakers.

For more information call Renee Ovando, stroke program manager, at 310-582-7383 or email Renee.Ovando@providence.org.

PARKINSON’S DISEASE PATIENT SUPPORT GROUP

Life in Motion is a Parkinson’s disease support group for patients and their loved ones and provides clinical updates regarding the condition.

For more information call Giselle Tamula at 310-582-7433 or email giselle.tamula@providence.org.

CANCER PATIENT & CAREGIVER SUPPORT GROUP

This group is for patients, caregivers and family members of those impacted by cancer and is not exclusive to those receiving care at Saint John’s Health Center.

For more Information call Cherie Nassi, LMFT, at 310-314-2555 ext. 2602 or email cnassi@cancersupportla.org.

ALZHEIMER’S AND RELATED DEMENTIA CAREGIVER SUPPORT GROUP

This group is aimed at caregivers of people with Alzheimer’s and other dementias to share support, ideas and to pose questions.

For more information, contact the Pacific Brain Health Center at 310-582-7641.

A Gift That Lives On

Legacy gifts support causes dear to donors' hearts.

WRITTEN BY NANCY STEINER

We all want to make a difference and have our lives make a lasting impact. One way to do that is through legacy gifts—meaningful contributions made during life or upon death as part of one's financial or estate planning. Legacy giving allows donors to support initiatives or institutions they value, bestowing enduring benefit well beyond the scope of their own lives.

Supporting Providence Saint John's Health Center in this manner can save lives. It allows the health center to continue making dramatic research discoveries and providing compassionate, first-rate medical care to patients in Los Angeles, patients who travel from around the world seeking treatment at Saint John's and patients worldwide who benefit from our research and discoveries. Gifts to Saint John's support the cutting-edge programs, highly trained personnel, advanced technology and capital improvements that keep the institution at the forefront of medical care.

These three friends of Saint John's share why they chose to support Saint John's through legacy gifts.



AN EXPRESSION OF GRATITUDE

Roger Wacker credits the health center with saving the life of his wife, Angelle Grace. Burning with fever and rushed to Saint John's emergency room she was diagnosed with an E. coli infection by pulmonologist Gilbert Kuhn, Jr., MD, and treated over a two-week period by Stanton Axline, MD, a specialist in infectious disease.

Impressed and grateful for the caliber

of care Angelle Grace received, the couple first chose to invest their time, energy, and knowledge at Saint John's. Roger, a managing director of a large financial services company, joined the Saint John's Health Center Foundation's board of trustees. He has since served on the board's finance and executive committees, the cardiovascular committee and the John Wayne Cancer Institute board. In January he was

appointed as a health center board member. Angelle Grace, a senior vice president of NAI Capital and former owner of Paramount Leisure Industries, has been active at the hospital by being involved in the Chautauqua Weekend, Caritas Gala and the Irene Dunne Guild.

"We love the Sisters—especially Sister Maureen Craig, SCL, and Sister Therese Zimmerman, SCL—and would love to see more Sisters in the hospital," Wacker says.

The couple made a generous gift to the cardiovascular program to pay for technology to support cardiac surgery. "We don't have heart problems, but we got to know the cardiovascular team under Dr. John Robertson and Dr. Peter Pelikan and are extremely impressed by their work," Wacker says.

Similarly, the couple has high regard for cancer research and the work at the John Wayne Cancer Institute. "We think the world of Dr. Steven O'Day and Dr. Lawrence Piro and pray for their continued wisdom and a cure for cancer."

The Wackers designated the cardiovascular program and cancer institute as beneficiaries of their life insurance policy. "It helps from a tax standpoint, but that's not why we give. Saint John's is in our hearts," says Wacker. "We want to be a good example to others on the importance of giving and thank God daily that we are able to do this."

ADMIRING A DOCTOR AND HIS CAUSE



Carol Cox chose to direct a legacy gift to support Saint John's family medicine physician, David Cutler, MD, in his work to provide medical care to impoverished patients in Haiti. "He's a fine humanitarian and someone I've always admired," she says of Dr. Cutler, who first traveled to Haiti following the

devastating 2010 earthquake. Each year Dr. Cutler and other physicians travel at their own expense to a clinic in the town of Petit Goave to provide free treatment and train local health care providers.

"These are the most impoverished people. Some can't even afford bus fare," Cox says.

Cox even nominated Dr. Cutler for *CNN Heroes*, a television show that honors individuals who make extraordinary contributions to humanitarian aid and make a difference in their communities. Cox, 84, retired from a career as a paralegal. In her 70s she tutored sociology students at Santa Monica College. She chose to make her gift through an annuity. She designated a fund, supervised by Saint John's and earmarked for Dr. Cutler's work in Haiti, as the beneficiary following her death.

This assures that she will have sufficient funds for her living expenses while still supporting a cause she values. "This will be a big part of my legacy," she says.

AN INSIDER'S APPRECIATION



Glenn Gorlitsky, MD, is an internal medicine physician who has practiced in the community and been affiliated with Saint John's for more than 40 years. In addition to referring his patients to Saint John's, his own children and grandchildren were born here, and he once received care at the hospital, too.

"Sometimes doctors don't like to go to their affiliated hospitals because of privacy,

but I felt secure knowing I'd receive excellent care," he said. "It was a very good experience."

Dr. Gorlitsky has raised funds for the Saint John's Health Center Foundation and given substantial funds of his own. In addition, he and his wife, Kendra Gorlitsky, MD, named Saint John's as one of their trust's beneficiaries.

They chose to give to Saint John's for two reasons. "I practice in this community, and I want my patients to have the best care. Nonprofit hospitals need additional funds to give the caliber of care they want to give," he says. "Also, I'm a client. I may need the hospital in the future, and I want the best hospital we can possibly create."

Dr. Gorlitsky has encouraged friends and associates to give to the health center. When patients ask him how they can thank him, he suggests a donation to Saint John's.

"Where you choose to give is your legacy," he says. "When you think about including your church or university or favorite charity, think about including your hospital, which needs funds to function at the highest level." 

ANYONE CAN LEAVE A LEGACY

There are many ways to make a charitable impact that may also be beneficial to your heirs.

- **Gifts from a Will or Trust**

Designating the foundation as a beneficiary in your will or trust is a simple and powerful way to leave a legacy, either with a percentage or fixed amount.

- **Beneficiary Designations**

Naming the foundation as the beneficiary

of a retirement plan, financial account or annuity is another easy way to make an impact.

- **Life Insurance**

If you have a life insurance policy, you can donate it to the foundation and take an immediate tax deduction. You can also name us as a beneficiary of your policy.

- **Appreciated Securities, Real Property**

If you own securities or real estate that you no longer need or wish to sell, a gift of these assets is another way that you can benefit us, and you may also benefit from capital gains tax avoidance.

- **Life Estate and Receive Income for Life**

If you own your home and wish to remain living there, you can transfer your home to us while retaining the right to use the home during your lifetime, and receive income and tax benefits.

- **Business Interests, Closely Held Stock and Partnerships**

There are ways to make

gifts from your business or to avoid capital gains tax when you are ready to transfer or sell your business.

For more information, please contact Andy Trilling, VP Principal and Planned Gifts, at 310-449-5246 or andy.trilling@stjohns.org.

SAINT JOHN'S HEALTH CENTER ANNUAL GALA

The Saint John's Health Center Foundation and Irene Dunne Guild presented the 2018 Saint John's Health Center Annual Gala Celebration on October 20 in the International Ballroom of the iconic Beverly Hilton Hotel. This annual fundraising event was a celebration of the power of partnership that fuels the campus of Saint John's to provide innovative and compassionate health care to our community and beyond. More than \$900,000 was raised. Net proceeds from the gala benefit vital programs, services and the greatest needs within our distinguished areas of excellence at Saint John's including breast health, cancer, cardiac care, maternal and child health, men's health, neuroscience and brain health, nursing, orthopedics, thoracic and urology.

Thank you to these trustees for serving as dinner chairs: Kathy Danhaki and John Danhaki, Lynda Oschin and Jerry Epstein, Mary Flaherty and Jay Flaherty, Stella Hall and Jim Fordyce, Martha and David Ho family, Beth Lowe and Bob Lowe, Teresita Notkin and Shelby Notkin, Dominic Ornato, Donna Schweers and Tom Geiser.

The evening showcased the personal stories of Pacific Neuroscience Institute co-founder, Chester Griffiths, MD; Providence Saint John's Health Center cardiac nurse, Nikki Luederitz, RN; and John Wayne Cancer Institute director of translational molecular medicine, Dave Hoon, PhD. David Foster and Ray Parker Jr. capped off the evening with outstanding entertainment.



(From left) Dr. Chester Griffiths, Dr. Daniel F. Kelly, Erik G. Wexler, Marcel Loh, Dr. Howard K. Krauss



Jerry Epstein and Lynda Oschin



David Foster



Mary Flaherty



Ray Parker Jr.



Donna Tuttle



Edward White, Mary White, Alan Weston, Stephanie Weston



Kate Prudente and Dr. Ernie Prudente



Dr. Howard Krauss and Dr. Chester Griffiths



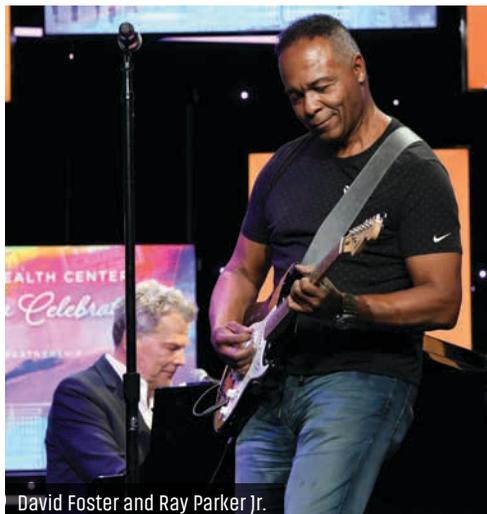
Dr. John M. Robertson and Nicole Luederitz, RN



Kathy Yawitz, Cheryl Robertson Thode, Christina Arechaederra, Maria Arechaederra, Jane Loh



Dr. Dave Hoon



David Foster and Ray Parker Jr.



Kathy Danhaki and John Danhaki

JOHN WAYNE CANCER INSTITUTE AUXILIARY BENEFACTORS HOLIDAY DINNER

The John Wayne Cancer Institute Auxiliary hosted its annual holiday dinner December 9 at the Montage in Beverly Hills. Financial support from the evening assisted in the purchase of the Illumina Next Seq 550 Gene Sequencer, which will provide JWCI scientists with the ability to identify new genes responsible for diseases, study new treatments and propel the John Wayne Cancer Institute to the level of top sequencing centers around the world.



Suzanne Davidow
and Robert Davidow



Patrick Wayne



Daniel Feldman, Diane Feldman,
Ilene Eisenberg, Jack Esensten



Alex Fragen, Carole
Schwartz, Michael Wayne



Diane Feldman and
Shirley Lipstone

MORE THAN 50 YEARS OF SMILES— NATIVE SONS OF THE GOLDEN WEST

It was more than 50 years ago that Leslie Holve, MD, Elise Hahn, PhD, Ben Edwards, MD, and Stan Burnett, MD, created the first Multidisciplinary Coordinated Longitudinal Cleft Palate Center in Southern California at Saint John's Hospital and Health Center in Santa Monica. The Native Sons of the Golden West has allowed Saint John's to give smiles to thousands of children. A celebration of 50 years of giving by the organization was held October 7 with a Mass, luncheon and tribute. Guests were serenaded by the talented mariachi singer Mariana Escobedo, who showed off her beautiful voice thanks to the palate repair she received as a baby at The Cleft Palate Center at Saint John's. Native Sons of the Golden West has donated more than \$2 million, and its support has changed the lives of many children. Saint John's also held the 50th Cleft Palate and Craniofacial Anomalies Symposium in November. These programs have educated medical professionals and the community across the region on how effective it is to collaborate on cleft care with an interdisciplinary team. The program included workshops focusing on treatment techniques for speech pathologists and orthodontic specialists as well as a family-to-family interactive session.



Dr. A. Etoile Davie and
Mariana Escobedo



Robert O. Klein, Marcel
Loh, Steve Faessel



(First row, from left) Sister Maureen Craig, SCL; Dr. Danelle Fisher (Second row, from left) Dr. Reza Jarrahy, Carey D. Pearce, Marcel Loh, Robert (Bob) Santos, Steve Faessel, Robert O. Klein

ABC'S TALK OF THE TOWN

The Associates for Breast and Prostate Cancer Studies (ABCs) hosted its annual, star-studded, black-tie gala November 17 at the Beverly Hilton Hotel in Beverly Hills. The gala benefits breast and prostate cancer research at the John Wayne Cancer Research Institute and Providence Saint John's Health Center. Actor Kelsey Grammer received the Spirit of Entertainment Award, and Major (retired) Scotty Smiley was honored with the Spirit of Hope Award.



JB Smoove



Gloria Gebbia



Patrick Wayne and Kelsey Grammer



Robert O. Klein,
Major (retired)
Scott Smiley,
Tiffany Smiley



John Gebbia, Gloria
Gebbia, Major (Retired)
Scotty Smiley, Tiffany
Smiley, Kelsey Grammer

JOHN WAYNE CANCER INSTITUTE AUXILIARY MEMBERSHIP LUNCHEON

The John Wayne Cancer Institute Auxiliary hosted its annual Membership Luncheon & Boutique on October 17. The auxiliary honored actor Jane Seymour with the Public Service Award and surprised the auxiliary's past president, Anita Swift, with the Angel Award. Proceeds from the event fund research, equipment and fellowships at the JWCI. Event co-chairs were Katie Lewis and Marisol Zarco.



Patrick Wayne and Cyndi Hunt



Dr. Sherry Ross and Jane Seymour



Sister Maureen Craig, SCL, Anita Swift, Dr. Anton Bilchik, Ruth Weil



(First row) Melissa Oman and Sonya Rosenfeld (Second row) Katie Lewis and Marisol Zarco



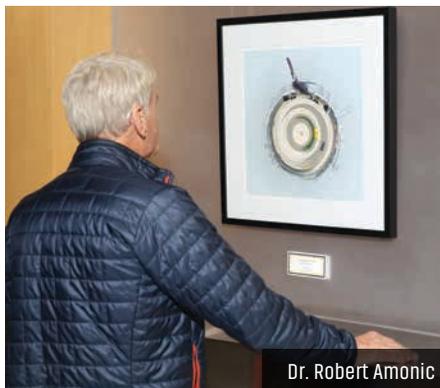
Martha Harper

KATHERINE KECK PHOTO EXHIBIT

Photographer Katherine Keck showcased her collection of works, *"I See the World"*, November 29 in the dining court of Providence Saint John's Health Center. The exhibition features photos Keck snapped on her iPhone and then morphed into striking, painting-like images through apps. *"I See the World"* will continue to be on display through April. To see more of Katherine's photography, visit her website at katherinekeck.com.



Katherine Keck



Dr. Robert Amonic



Marcel Loh, Katherine Keck, Robert O. Klein

TRUSTEE ANNUAL DINNER

Saint John's Health Center Foundation held its annual gathering of trustees and administrative leadership December 5 at the Riviera Country Club to celebrate the holiday season and conduct business. Along with general foundation, health center, JWCI and PNI highlights of 2018, the business of the evening included a festive dinner and the 2019 election of foundation trustees and officers. New trustees include Waldo Burnside (trustee emeritus), Jeffrey Assaf, Jonathan Congdon, Kathy Danhaki, Miles Fisher, Mark Holscher, Lee Neibart and Daniel Sampson.



(First row) Lee Ault, Donna Tuttle, Gretchen Willison, Mary Flaherty, Shelby Notkin, Michael Wise
(Second row) Robert O. Klein, Dr. John M. Robertson, Dr. Daniel F. Kelly, Marcel Loh, Bill Apfelbaum, Dr. Robert Amonic, Donna Schweers, Roger Wacker, Bob Lowe, Dr. Ernie Prudente



Amy Buenabenta and Jules Buenabenta



Marcel Loh, Dr. Russ Kino, Mary Flaherty, James Fordyce, Roger Wacker



Mark Armbruster and Margot Armbruster



Mary Flaherty



Gretchen Willison and Mary Flaherty



Marcel Loh

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Research Program

We have a new look!



This issue of *Saint John's*, the magazine of Saint John's Health Center Foundation, features a new design and a new mission. We've combined *Saint John's*, *Innovations* and *Brain Matters* into one magazine, providing readers with one publication dedicated to highlighting the impact of philanthropy on our campus entities:

- * Providence Saint John's Health Center
- * John Wayne Cancer Institute
- * Pacific Neuroscience Institute

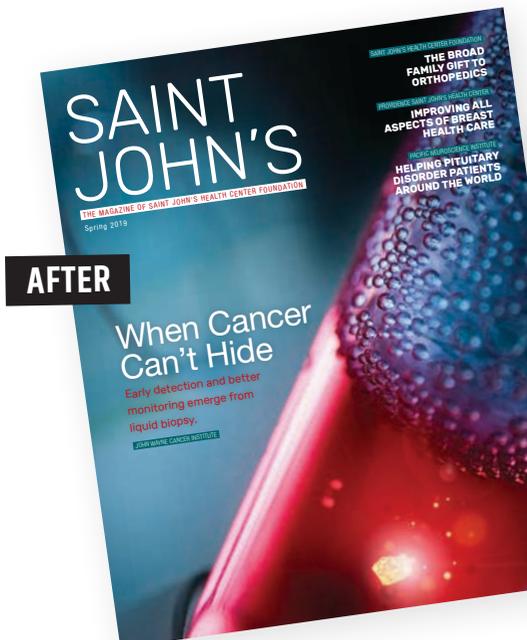
In each issue, we will bring you the latest news and compelling stories from each entity, highlighting the innovative work, nurturing care and dynamic people that distinguish Saint John's. By showcasing stories about our caregivers, patients and plans for the future, we invite our community to support our Mission of providing exceptional health care and research.



BEFORE

Inside the re-designed pages of *Saint John's*, we hope you will discover information and resources to improve the health and well-being of you and your family. In each issue you will find:

- * Features on our leading-edge medical and research programs
- * Profiles on the professionals and patients who inspire us
- * Updates on important local and national health trends
- * Information on philanthropy and how to support Providence Saint John's Health Center, John Wayne Cancer Institute and Pacific Neuroscience Institute.



AFTER

Many patients don't use all of their prescribed pain medication

The nationwide opioid addiction epidemic has American doctors looking back about the value of federal agencies for pain relief and patient's...
Worrisome rise in colorectal cancer in people under 50

While colorectal cancer rates decline in older adults, the incidence of the disease in people younger than age 50...
CELESTIAL CANCER TRENDS BY AGE

Age Group	Colorectal Cancer Incidence
18-29	1.0
30-39	1.5
40-49	2.0
50-59	3.0
60-69	4.0
70-79	5.0
80-89	6.0
90+	7.0

GET WELL, STAY WELL

Saint John's Physician Partners is a group of health professionals affiliated with Providence Saint John's Health Center...
TOPS IN STROKE CARE

Providence Saint John's Health Center has received national recognition for outstanding stroke care services including...
12 MINUTES

THE SAINT JOHN'S RECEIVED FOR TIME CLASSIFIED FROM A POINT-BY-POINT REVIEW OF THE CLINICAL MEDICATION TISSUE...
SAINT JOHN'S PHYSICIAN PARTNERS

- Catholic Health Association
- American Heart Association
- American Cancer Society
- American Diabetes Association
- American Lung Association
- American Medical Association
- American Stroke Association
- American Society of Clinical Oncology
- American Society of Hematology
- American Society of Nephrology
- American Society of Pathology
- American Society of Radiology
- American Society of Transplantation
- American Society of Travel Medicine
- American Society of Vascular Medicine
- American Society of Women's Health
- American Society of Geriatric Medicine
- American Society of Hematology
- American Society of Nephrology
- American Society of Pathology
- American Society of Radiology
- American Society of Transplantation
- American Society of Travel Medicine
- American Society of Vascular Medicine
- American Society of Women's Health
- American Society of Geriatric Medicine

We invite your comments and feedback on our new look! Please contact Melissa Thrasher at 310-829-8674 or melissa.thrasher@stjohns.org

#SaintJohnsCares

How has Saint John's cared for you? We want to know!

Are you a grateful patient, family member, volunteer or loyal supporter?

Sharing your experience of how Saint John's cared for you can inspire others who may be facing similar challenges—and most importantly, provide hope.



“For 38 years my wife, Jean, and I observed and received the expert care of many of the doctors at Providence Saint John's Health Center. The confidence you have in your doctors is a most important factor as you deal with the physical complications that arise as you grow older. That confidence was always present with us in every doctor we met at Saint John's. With that in mind, we would like to make a contribution in honor of all the doctors of Saint John's.”

—WALDO BURNSIDE,
GRATEFUL PATIENT, DONOR
AND TRUSTEE EMERITUS



Please consider sharing your experience on social media with #SaintJohnsCares

#SaintJohnsCares

Use the hashtag and share your story of compassionate care at Providence Saint John's Health Center and its affiliates, the John Wayne Cancer Institute and the Pacific Neuroscience Institute.

Showing your support through your social networks can be a powerful tool in spreading the word about our mission to provide Providence Saint John's Health Center, the John Wayne Cancer Institute and

the Pacific Neuroscience Institute with the financial support they need to translate research discoveries into personalized patient care with the ultimate goal of changing and saving lives.

Use **#SaintJohnsCares** when sharing your story of compassionate care. Or, to make a gift in support of our mission, please use the envelope enclosed or visit **saintjohnsfoundation.org**.

Saint John's

Health Center Foundation

2121 Santa Monica Boulevard
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310-829-8424

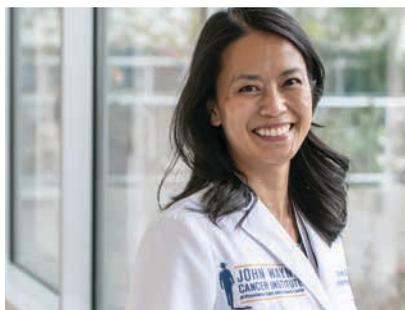
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The Best in Breast Care | Dr. Janie Grumley directs the Comprehensive Breast Program at Saint John's.



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Overnight Angels | A Los Angeles couple helps people find a safe place to sleep.

“When others saw that Saint John's believed in us, it was a game changer.”

—DOUG MCCORMICK,
The Pacific Palisades Task
Force on Homelessness

The Community Impact Fund at Saint John's has fueled new efforts to help people who are homeless.

UNITING HOME
AND HEALTH

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