

SAINT JOHN'S

THE MAGAZINE OF SAINT JOHN'S HEALTH CENTER FOUNDATION

Spring 2021

SAINT JOHN'S HEALTH CENTER FOUNDATION

**THE COMMUNITY IMPACT
FUND DELIVERS ON ITS
PROMISE TO ASSIST OUR
NEIGHBORS IN NEED**

PROVIDENCE SAINT JOHN'S HEALTH CENTER

**THE EXPANDING ROLE
OF THE HOSPITALIST**

PACIFIC NEUROSCIENCE INSTITUTE

**A FAMILY MAKES
A DONATION
TO SUPPORT
ALZHEIMER'S
RESEARCH**



Medicine Turns to Nature

Saint John's researchers explore
compounds in mushrooms for
a range of healing therapies.

SAINT JOHN'S CANCER INSTITUTE & PACIFIC NEUROSCIENCE INSTITUTE



THANK YOU
BARBARA AND JOHN
MCLOUGHLIN
for your generous support of the Power of Partnership campaign.

Support like the transformative gift from Barbara and John McLoughlin drive advancements in technology, research and patient care. When you give a gift to Saint John's Health Center Foundation, you can help fund the kind of innovative health care that results in cures and improves quality of life. Your gift will make a lasting change, helping others for generations to come.



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



CONTENTS

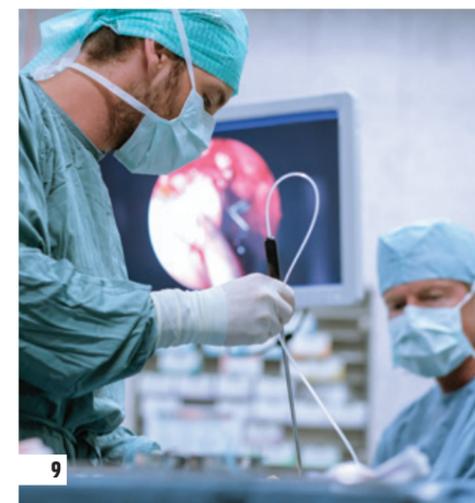
SPRING 2021

- 4. Letter from the Chief Executive
- 5. Welcome from the Foundation
- 6. Health for a Better World
- 12. The Role of a Hospitalist
- 14. Power of Partnership Campaign Update

FEATURES

- 16. **The Healing Properties of Fungi**
Several research programs at Saint John's are centered on compounds found in certain types of mushrooms.
- 22. **Paying it Forward**
While facing their own health issues, the McLoughlin family chose to fund research to help others.
- 26. **Celebrating the Community Impact Fund**
The CIF has helped Westside organizations for five years, just as it was intended.
- 32. **Supporting Cancer Patients in Every Way**
Jean Gilbert assisted cancer patients in life, and now her work continues with a legacy gift.
- 36. **Lights, Camera, Action in the NICU**
A filmmaker records his premature son's early days of life.
- 40. **Planned Giving**
Dr. Byron Vreeland's estate gift will strengthen the Saint John's emergency department.

On the Cover: Compounds in mushrooms may have the power to heal.



EDITORIAL STAFF

President and CEO, Saint John's Health Center Foundation
Robert O. Klein
Chief Executive, Providence Saint John's Health Center
Michael Ricks
Director, Marketing and Communications,
Saint John's Health Center Foundation
Melissa Thrasher

If you have a change of address or no longer wish to receive SJHC Foundation communications, please let us know by calling 310-829-8424, faxing 310-315-6127, emailing foundation.optout@stjohns.org or writing to Director, Data Management, Saint John's Health Center Foundation, 2121 Santa Monica Blvd., Santa Monica, CA 90404.

MOON TIDE VP, Branded Media: Emily S. Baker
Creative Director: Ajay Peckham
Editor: Shari Roan
Copy Editor: Laura Watts

Contributors: Melanie Anderson, Victoria Clayton, Laurel DiGangi, Robin Heffler, Nancy Steiner, Nancy Brands Ward

Photographers: Kristin Anderson, Phillip Graybill, Lauren Pressey, Matthew Smith
Managing Partners: Charles C. Koones, Todd Klawin

» Spring is in the air, and this year it's accompanied by a most welcome breeze of positive change. As vaccinations become widely available and normal activities begin to resume, we have so much to be grateful for and so much more to look forward to, as you'll read about in this issue of *Saint John's*.

At Saint John's, we open a new chapter at the cancer institute, renaming it the Saint John's Cancer Institute, and the surgical fellowship program, the Donald L. Morton, MD, Complex General Surgical Oncology Fellowship. With the licensing of the name and likeness of John Wayne having expired at the end of 2020, we chose to use this as an opportunity to make way for the future while also honoring the legacy of a man whose brilliant work in cancer research changed the way cancer is detected and treated worldwide with the sentinel node biopsy technique.

Dr. Morton's brilliance continues today right here on our campus. From our groundbreaking research into treatments for COVID-19 to the pioneering research using compounds extracted from mushrooms to treat cancer and behavior modification, we're continuously pushing the envelope of what is possible when it comes to treating and curing patients of life-threatening and debilitating disease.

With the addition of our new chief medical officer, Dr. Mina Kang, our mission to provide compassionate care will continue to deepen. As a hospitalist, Dr. Kang's experience at the patient's bedside will translate to superior patient comfort and efficiency. She offers valuable insight into her new role and the role of a hospitalist in the Q&A section.

Lastly, we share a touching story of our compassionate and leading-edge care in action. Baby Gabriel was born in our NICU five years ago, and thanks to our technology and amazing nursing staff, he's a thriving boy with a very bright future ahead. His story is a reminder for all of us that there is great power in hope and perseverance, especially in the face of significant challenges and change.



Michael Ricks

MICHAEL RICKS
Chief Executive
Providence Saint John's Health Center
Saint John's Cancer Institute



Robert O. Klein

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

Mary Flaherty

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

» The last year brought upon us all so many challenges and heartbreak with COVID-19 that we may feel the weight of that for some time to come. However, we believe that history will view this time as *transformative*. While transformation can be painful in many respects, it can also usher in positive change and, if we choose, a greater sense of community. We have certainly experienced a greater and deeper sense of community at Saint John's because of you.

The values rooted in Saint John's by the Sisters of Charity to dig in and lift up our neighbors—known and unknown—through difficult times is exemplified in our Community Impact Fund. Designed to give back to our community partners, the fund continues to help solve some of our most pressing health-related social issues such as homelessness, health education and family services. Its impact reverberates throughout the Westside and beyond.

In this issue of *Saint John's*, you'll read about a generous gift made in the name of a former cancer patient to the cancer supportive services program that will have great impact on the lives of many people suffering from the physical and financial strains of this deadly disease. Transforming the lives of patients for the better is the goal of philanthropy, and sometimes this is achieved through direct patient support such as this. In other instances, it's achieved through the support of the doctors and nurses who provide compassionate and lifesaving care.

One such story is that of the McLoughlins. Longtime patients of Saint John's from the birth of their family members to serious illness later in life, they chose to honor their doctors by supporting leading-edge research in the neurosciences and urologic cancers. The care they received transformed their lives, gave them hope and now they're giving back.

These generous gifts are just two examples of the impact you, our community, have made at Saint John's through the Power of Partnership campaign, which continues to exceed our goal of \$200 million! Giving changes lives. It saves lives. And this campaign, with your support, is proof of that. We thank you for your enduring generosity and hope you will find the impact you've made on the following pages as inspiring as we do.

The COVID-19 pandemic has entered its second year, but health professionals now have vaccines, treatments, robust research and sound advice about overall health care to lead us out of this turbulent time.



TREATMENT

Several treatments are now available to minimize the risk of serious illness and death from COVID-19, including these that are among active clinical trials at Saint John's:

- Monoclonal antibodies to the SARS-CoV-2 spike protein
- Biospecimen research and data collection, including genetic sequencing of the virus
- Stem cell research to help repair lung damage caused by COVID-19

The following COVID-19 clinical trials were completed at Saint John's testing the efficacy of these five pharmaceuticals:

- Sarilumab
- Remdesivir
- Remdesivir plus tocilizumab
- Convalescent plasma
- Novartis IL1b - IL18



VACCINATION

All three approved vaccines are highly effective at preventing hospitalization and death from COVID-19, according to the Centers for Disease Control and Prevention. Any efficacy rate above 50% is considered effective. The three vaccines were tested differently, and it's difficult to compare effectiveness.

Approved Vaccine Update, as of March 31, 2021

NAME	DOSAGE	AGE	EFFICACY
Moderna	2, 28 days apart	18 and older	94.5%
Pfizer-BioNTech	2, about 21 days	16 and older	95%
Johnson & Johnson	1	18 and older	72%

20 vaccines are in Phase III clinical trials
 Source: Infectious Diseases Society of America

PERSONAL HEALTH

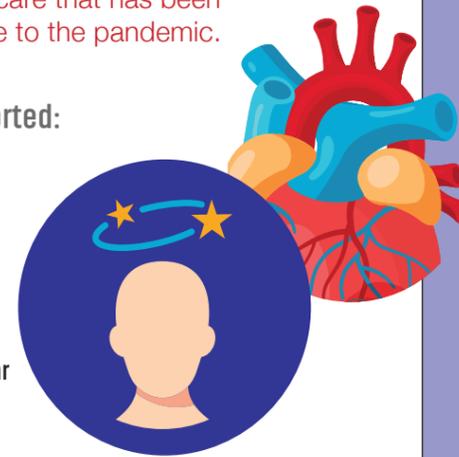
Health officials urge Americans to seek regular health care that has been postponed due to the pandemic.

Hospitals reported:

23% decline in ER visits for heart attacks last year

20% decline in ER visits for stroke symptoms last year

Source: CDC



An estimated **10,000 additional deaths** from breast and colorectal cancer will occur over the next decade in the U.S. due to delays in diagnosis and treatment.

Sources: Journal of the American Medical Association; National Cancer Institute

Many preventive health care services are **free**. Are you due for these services?

- Blood pressure, diabetes, cholesterol tests
- Cancer screenings
- Counseling to help with smoking cessation, weight loss, substance misuse or mental health needs
- Well-baby and well-child care
- Routine vaccinations
- Reproductive health care and family planning

Source: U.S. Department of Health and Human Services

By the Numbers

41% OF AMERICANS HAVE DELAYED OR AVOIDED HEALTH CARE

12% AVOIDED URGENT OR EMERGENCY CARE

32% AVOIDED ROUTINE CARE
 Source: Centers for Disease Control and Prevention

Delays in cancer-related screenings and treatments in the U.S. over the past year are especially worrisome.

Decline in:

DIAGNOSES OF SIX COMMON CANCERS:

46%

BREAST CANCER DIAGNOSES:

52%

BREAST CANCER SCREENINGS:

89%

COLORECTAL CANCER SCREENING:

85%



SAINT JOHN'S PHYSICIANS ASSUME NEW LEADERSHIP ROLES

Dr. Santosh Kesari Assumes New Leadership Role

Santosh Kesari, MD, PhD, has been named regional medical director of Providence Southern California's Research Clinical Institute. In his new role, Dr. Kesari will provide oversight and lead strategic planning for the institute. He will be responsible for the implementation of a physician alignment and growth strategy across Southern California for research services, including medical foundations, medical groups, independent physician associations and independent practices. He also will be responsible for expanding access to clinical trials across the region. Dr. Kesari is currently chair and professor, department of translational neurosciences, Saint John's Cancer Institute. He is also director of neuro-oncology at Pacific Neuroscience Institute.

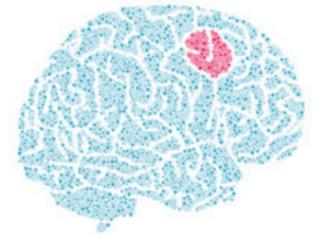


Dr. Howard R. Krauss Named to Medical Board Post

Howard R. Krauss, MD, was elected vice president of the Medical Board of California, in an official state announcement released November 13, 2020.

Dr. Krauss, a surgical neuro-ophthalmologist and one of the founders of Pacific Neuroscience Institute, was appointed to the Medical Board of California for an eight-year term in 2013 by Governor Jerry Brown Jr.

Dr. Krauss has provided ophthalmological care to patients in West L.A. since 1984. He is a founding member of the North American Skull Base Society. Dr. Krauss earned his medical degree from New York Medical College. He also has a master's degree in aeronautics and astronautics from MIT and an undergraduate degree in electrical engineering from The Cooper Union.



Advancing Minimally Invasive Neurosurgery

Surgeons at Pacific Neuroscience Institute continue to lead their colleagues worldwide in advancing minimally invasive surgical techniques to remove brain tumors. In a recent study published in the journal *Operative Neurosurgery*, PNI surgeons report on a series of patients whose brain tumors were removed via an incision in the eyebrow—a technique known as supraorbital eyebrow craniotomy.

The study, which featured 129 operations on 117 patients with various types of brain tumors, found the minimally invasive technique allowed for visualization and removal of tumor tissue that would otherwise have gone undetected in half of the cases in which it was used (38 out of 76 cases). The study also showed near or total tumor removal in 81.5% of the first-time patients and a rate of 72% in patients who had undergone prior surgery. The rate of postsurgical complications was low. The study was led by Daniel F. Kelly, MD, PNI cofounder and director of the Pacific Brain Tumor and Pituitary Disorders Centers at Saint John's.

PNI surgeons have a long track record in performing and enhancing minimally invasive approaches to make them safer and more effective. Minimally invasive surgery typically decreases brain exposure and reduces scalp and muscle manipulation. However, at many institutions, brain tumor patients undergo craniotomy to remove tumors—a major invasive surgery involving a large incision to open the skull. This paper is another example of the innovative care provided for patients with brain, pituitary and skull base tumors at PNI.

A New Name—the Same Top-Rated Service

With the licensing of the name and likeness of John Wayne on the Institute recently expired, the John Wayne Cancer Institute will now be known as the Saint John's Cancer Institute. The institute remains at its current location and remains dedicated to state-of-the-art cancer treatment and research. As international leaders in cancer care, the Saint John's Cancer Institute attracts patients from all over the country and around the world. Our services are organized around centers of excellence in nine areas, including translational research.

We are also proud to announce the renaming of the surgical fellowship program as the Donald

L. Morton, MD, Complex General Surgical Oncology Fellowship. This prestigious surgical oncology fellowship program was founded by the late Donald L. Morton, MD, who also cofounded the John Wayne Cancer Institute, and remains one of the largest in the country.

Prior to his passing in January 2014, Dr. Morton had a storied career with more than 1,000 publications. He received competitive research funding from the National Cancer Institute for nearly four decades. His most notable accomplishment was devising the sentinel node biopsy technique.

"The Saint John's Cancer Institute's mission is fulfilled through innovative clinical and

laboratory research such as Dr. Morton's, and the education of the next generation of surgical oncologists and scientists," says Michael Ricks, chief executive of Providence Saint John's Health Center and Saint John's Cancer Institute. "As part of our strategic growth initiatives, the leadership at Providence Saint John's has plans to make significant investments to further develop the Institute, recruiting researchers and physicians and expanding and deepening the focus on our main pillars of cancer research, immunotherapy, genomics and precision medicine.

We will continue to rely on our generous community to help us fulfill this vision."

The institute recently welcomed the Class of 2022 oncology fellows, including:

WADE CHRISTOPHER, MD, SURGICAL ONCOLOGY FELLOW

JENNIFER KELLER, MD, SURGICAL ONCOLOGY FELLOW

REBECCA MARCUS, MD, SURGICAL ONCOLOGY FELLOW

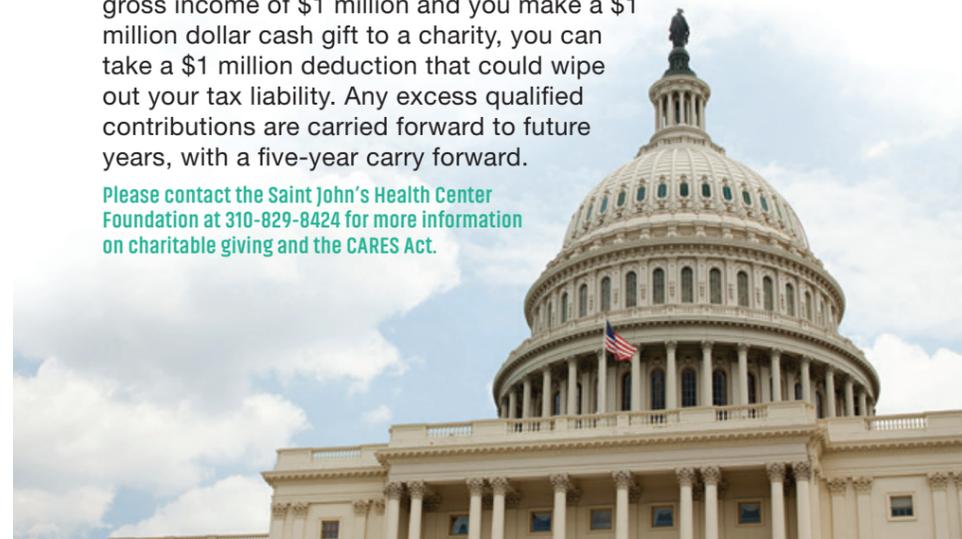
SEAN NASSOYI, DO, SURGICAL ONCOLOGY FELLOW

CARES Act Extended

The changes to charitable deduction rules in the Coronavirus Aid, Relief and Economic Security (CARES) Act have been extended to 2021, which will help millions of people in this critical time. Perhaps even you. The changes provide incentives if you're considering supporting our efforts to care for those who have contracted COVID-19.

For those who do itemize deductions, taxpayers may deduct qualified donations of cash up to 100% of their Adjusted Gross Income (AGI). This year, for example, if you have an adjusted gross income of \$1 million and you make a \$1 million dollar cash gift to a charity, you can take a \$1 million deduction that could wipe out your tax liability. Any excess qualified contributions are carried forward to future years, with a five-year carry forward.

Please contact the Saint John's Health Center Foundation at 310-829-8424 for more information on charitable giving and the CARES Act.



Welcome to the New Trustees

Saint John's Health Center Foundation is guided by a talented board of trustees who give generously of themselves to ensure the Westside community has access to top-flight health care and resources to improve well-being and quality of life. We honor their talent and thank them for their hard work. Please join us in welcoming five new trustees.



ALEX M. CHAVES

Alex M. Chaves is chief executive officer of PCAM (Parking Company of America Management) and partner of Upward Housing, LLC (UH). UH applies its private capital and its expertise in real estate development toward the expansion of much needed supportive housing for transitional and recuperative care housing projects in Southern California. Chaves' expertise in developing parking, fleet and transportation service companies is the strength he possesses to lead the PCAM group of entities today. Under his leadership as chief executive officer, PCAM has embarked on an aggressive and profitable program of developing new parking locations nationwide, securing transportation accounts, and acquiring established parking service and vehicle maintenance companies. Chaves is a graduate of Loyola-Marymount University of Los Angeles with a bachelor's degree in business administration. He is an active member of the Loyola Marymount University Board of Trustees and LMU Latino Alumni Association, where he serves as president. He received LMU's Distinguished Alumni Award and, in 2012, he was selected as one of 58 distinguished LMU alumni who have excelled in their fields. He is also a member of the United Way Los Angeles Board of Trustees. Chaves and his wife Nora have four children and reside in Manhattan Beach.



ANGELA COURTIN

Angela Courtin is vice president of brand marketing at YouTube, overseeing various areas of the business including the Culture & Trends, YouTube Originals, Media, Social, Experiences, Creative Studio and Sports verticals. Prior to YouTube, Courtin was executive vice president and chief marketing officer for Fox Broadcasting Company. She also served as chief marketing officer of Relativity Media, where she was responsible for all film, television and sports marketing initiatives as well as all branding and advertising campaigns across the company. She served as president of Dentsu Aegis Network U.S., where she worked across the global agency's 23 stateside businesses. Previous roles include co-head of integrated marketing at MTV; senior vice president of marketing, entertainment and content for MySpace; and associate producer on the hit HBO series "Big Love." Courtin was named one of *Advertising Age's* "Women to Watch" in 2013 and one of the "30 Most Powerful Women in Advertising" by *The Business Insider* in 2012. She was also featured in the OUT 100, *Out* magazine's annual list of the year's most influential LGBT people. In 2019, Courtin was a recipient of the Women In Cable Telecommunications LEA Award, which celebrates leadership, excellence and advocacy.



RICHARD R. CROWELL

Richard Crowell is the founder and managing partner of Vance Street Capital, a middle-market private equity firm investing in aerospace, medical device and precision industrial companies. Prior to Vance, he cofounded Aurora Capital Group and served as president of the firm for 15 years. He began his career at EF Hutton in 1980 and also worked as a managing partner at Acadia Partners and a managing director at Drexel Burnham Lambert. He serves on the board of visitors for the UCLA Anderson School of Management, the board of RBC Bearings Inc. and the board of Quinn Group. He earned a master's of business administration degree from UCLA's Anderson School and a bachelor of arts degree from the University of California, Santa Cruz. Crowell and his wife, Alison, divide their time between Los Angeles and Healdsburg, California. Together they founded Red Car Wine Company in 2000 and over the past 20 years have developed a fully integrated winery and farming business with a network of vineyards in Fort Ross-Seaview, Occidental, Freestone and Sebastopol on the Sonoma Coast.



ROBERT LEVITT

Robert (Bob) Levitt was born in Dayton, Ohio, and graduated with a bachelor of arts degree from Brown University. In 1992, Bob married Alicia Brandt, and they subsequently moved to Pacific Palisades, where they raised four great kids: Brandt Wrightsman, Halle, Oliver and Carly. Levitt retired in January 2008 after a 26-year career in investment banking. He started with The First Boston Corporation in 1982 and left Credit Suisse First Boston (CSFB) in October 2000. At CSFB, Levitt was a managing director, head of the Western Region Investment Banking (LA and San Francisco) and a member of the investment banking management committee. In October 2000, he joined Lehman Brothers, where he ran the firm's Western Region Investment Banking and Global Business Services practices. Today, he serves on the boards of two investments. For 10 years, Levitt was board chair of Village School and served on the board for 11 years. In addition, he was a past president of HPPOC (a neighborhood homeowners association) and led the fundraising for Palisades Park "Field of Dreams," which raised more than \$1 million to revitalize the park's fields.



CARY SINGLETON

Cary Singleton attended USC and built multiple careers in designing and building homes, marketing, manufacturing and business leadership. She was previously active on boards of local and state organizations in Arizona, Oregon and California relating to housing such as Habitat for Humanity and National Homebuilders Association, mentoring such as Big Brothers/Big Sisters, Tucson Children's Museum, Paxis/Peacebuilders Violence Prevention, various arts organizations, Rotary, Tucson Children's Museum, Gamma Phi Beta House Corporation Board (USC) and Women In Film. Singleton grew up in an entrepreneurial family, and her family background and love of entrepreneurship combined with concern for solving community needs and promoting mentorship inspired her and her husband, Will, to form the Singleton Foundation for Financial Literacy & Entrepreneurship to use entertainment to provide free programs and tools to create financial competence and to promote entrepreneurship. The Singletons reside in Brentwood with homes in Lake Tahoe, New Mexico and Newport Beach. They enjoy an active lifestyle of golf, boating and spending time in the great outdoors.

Q & A Always On Call

Hospitalists play a key role in high-quality hospital care.

BY ROBIN HEFFLER

PHOTOGRAPHED BY PHILLIP GRAYBILL

Thirty years ago, a medical specialty focused on the treatment of hospitalized patients began to emerge. UC San Francisco's Robert Wachter, MD, coined the term "hospitalist" to describe this specialty, which is now practiced in hospitals nationwide—often by physicians trained in internal medicine and who have served in hospital medicine fellowships. We talked to Mina R. Kang, MD, chief medical officer at Providence Saint John's Health Center and medical director of the hospitalist program, about the role that hospitalists play in patient care. Dr. Kang leads a team of 14 physicians and a nurse practitioner—triple the number of hospitalists in the program three years ago. Certified as both an internist and a pediatrician, Dr. Kang has been on the medical staff since 2011 and has led the program since 2017.

What are hospitalists and why are they needed?

Many people, even physicians, mistakenly believe hospitalists are just physicians who practice mainly in the hospital. But it's not just a matter of where you see patients but how you concentrate your time and expertise. Hospitalists are coordinating inpatient care during a time when medicine is getting more complex. Patients in the hospital are sicker and are being discharged sooner. Traditionally,

primary care doctors have seen patients in both the office and the hospital, but with their busy schedules it's harder for them to do that now. Therefore, they increasingly reach out to hospitalists.

Why are hospitalists important for patient care and safety?

Hospitalists are trained to make sure patients are safely cared for in the complex hospital environment. As we only focus on hospital medicine, we become experts in getting everything done for our patients quickly and efficiently. For example, when we have patients with hip fractures, we know that getting them to the operating room as soon as possible will get them the best results. We also know which surgeons are available to do this surgery promptly. Because we are at the hospital 24/7, we are available to respond to any issues that come up with our patients. We are also uniquely qualified to lead important hospital quality and patient safety initiatives.

What do you think are the biggest misconceptions about hospitalists?

Many patients have very close, long-standing relationships with their primary care doctors and may feel upset that their primary care doctor is not taking care of them while they are hospitalized. I always like to reassure patients that our hospitalists practice in close partnership with primary care doctors. At minimum, we communicate with primary care physicians at the time of patient admission, when anything major happens during the hospitalization, and at the time of discharge to make sure they are on the same

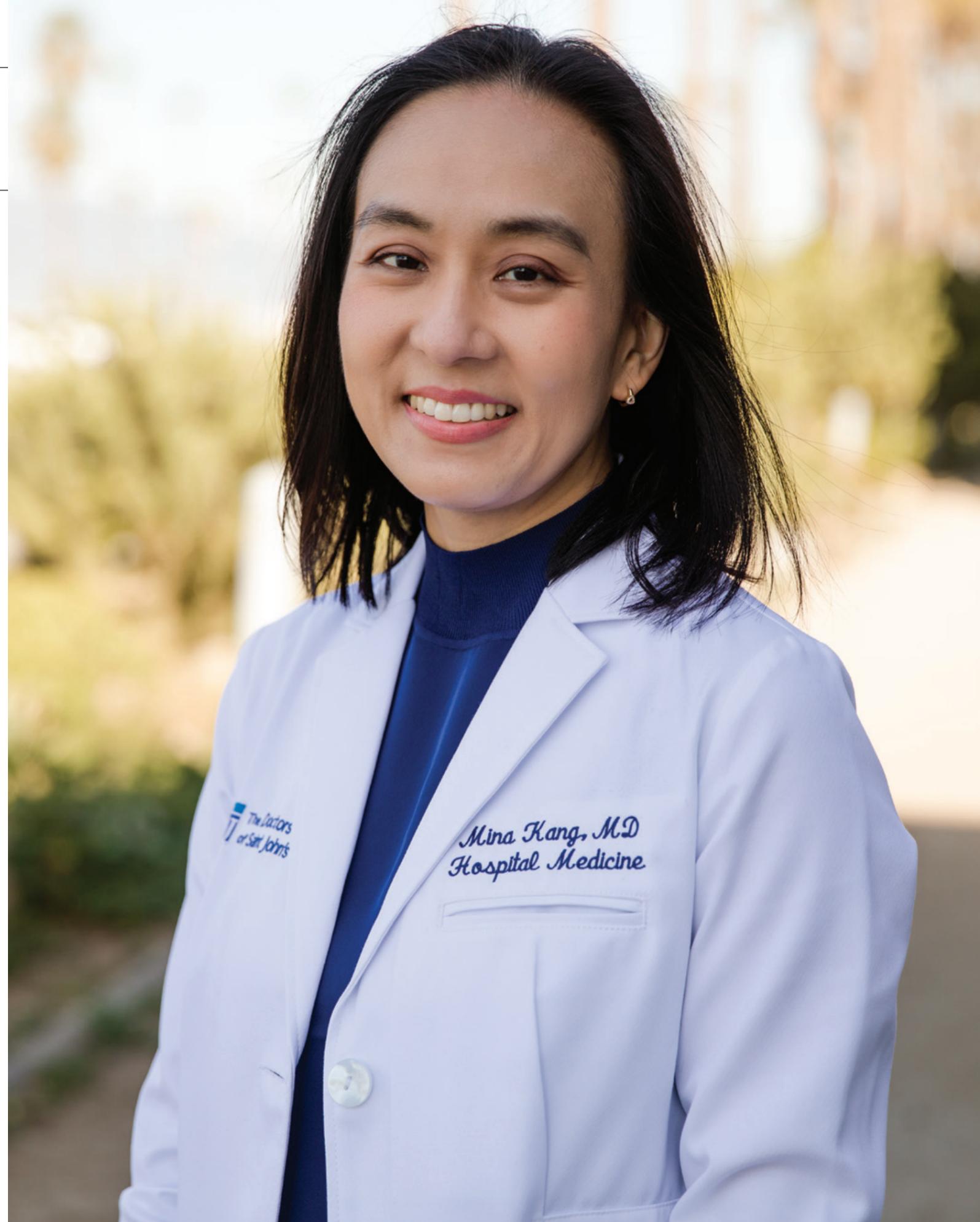
page about what happened during the hospitalization. Additionally, we practice on the same electronic medical record system as many of our primary care physicians and can communicate with physicians through this electronic record.

Why did you become a hospitalist, and what do you most enjoy about it?

I chose to become a hospitalist because I enjoy caring for patients in the hospital, coordinating complex care and forming relationships with patients and families while helping them through a difficult time. I really like having all my patients in one place and being able to visit them early, late or even multiple times a day, based on situational need. I also enjoy the relationships I have with my specialist colleagues as we work to take care of patients together in the hospital.

How has being a hospitalist prepared you for your new role as chief medical officer?

I believe having practiced medicine in the hospital setting for over 10 years is my greatest asset as I move to my new role. Hospitalists have a deep knowledge of how hospitals work as well as how hospitals could work better to improve patient care. My experience with complex decision-making as it pertains to patient care and navigating difficult care conversations can now be used toward solving complex problems on a larger scale. I think the goal of a hospitalist and hospital CMO is the same. Ultimately, we both want high-quality patient care in the hospital with a focus on patient comfort and efficiency. 🍷



A MILESTONE FOR THE Power of Partnership Campaign

Trustees of Saint John's Health Center Foundation, Kathleen McCarthy Kostlan, Bill Apfelbaum, and Roger Wacker, along with the president of the Associates for Breast and Prostate Cancer Studeis, Gloria Gebbia, cheer on Michael Ricks, chief executive of Providence Saint John's Health Center. Photo credit: Fred Siegel



POWER OF PARTNERSHIP Milestones

Overall goal over three years:

\$200 million

Current amount raised over two years:

\$205 million

Amount raised just in 2020:

\$92 million

JOIN THE PARTNERSHIP

It's up to us to ensure that we, along with our children and grandchildren, can continue to count on Saint John's for the best health care on the Westside. Through the institute model with its focus on translating leading-edge research directly to the bedside, coupled with our philanthropic support, we will persist in providing superior health care to our community. We hope you continue to join us in making this campaign an extraordinary success. The commitment we make today will shape the Saint John's of tomorrow—and generations to come.

For more information on supporting Saint John's and the Power of Partnership campaign, please call 310-829-8424.

The Saint John's Health Center Foundation's Power of Partnership Campaign, a three-year endeavor to raise \$200 million for Providence Saint John's Health Center, Saint John's Cancer Institute and Pacific Neuroscience Institute, has surpassed yet another milestone. Thanks to the generosity of our donors, campaign committee members, trustees, physicians,

nurses and hospital administration, we've raised \$205 million in just over two years—an all-time campaign record for the foundation. Another record-breaking success was the \$92 million raised in 2020—the most the foundation has ever raised in a single year since its inception in 1974.

These monumental successes were achieved despite the unprecedented challenges generated by the COVID-19

pandemic. In fact, the pandemic has proved beyond a doubt that Saint John's track record of compassionate care, clinical excellence and leading-edge research is needed now more than ever in prevailing against a health crisis of this magnitude.

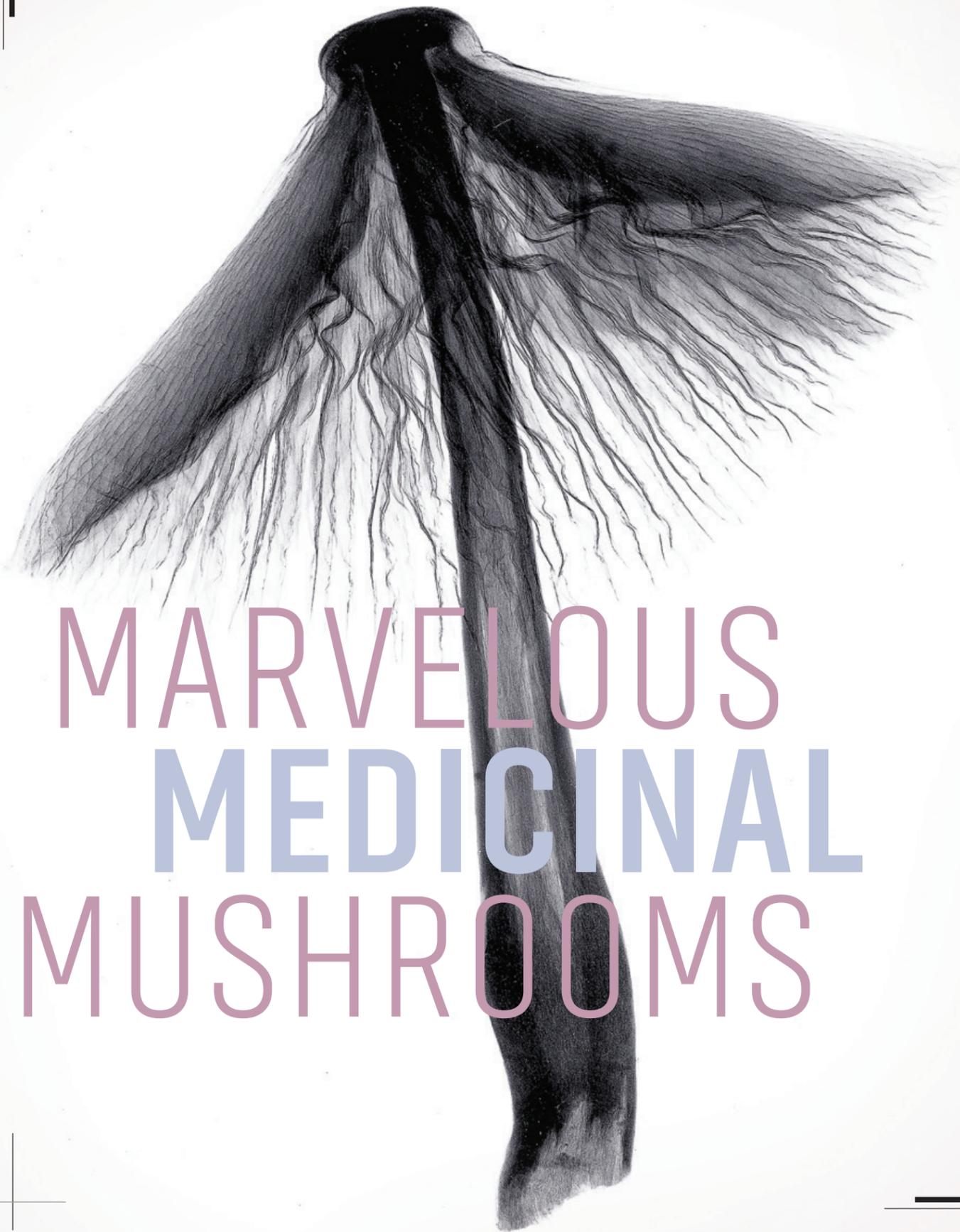
It is through this campaign that we rallied community support to ensure our health center and its institutes continue the trajectory of excellence

and progress, while launching a new vision led by the health center board of directors and Michael Ricks, chief executive of Providence Saint John's Health Center, to grow our campus into a robust, academic institute model for the future. But this important work isn't finished.

With four months remaining in the Power of Partnership Campaign, we're committed to staying the course and shattering more fundraising records. We are called upon by our community to serve their growing health care needs now and into the future. 📞

"IT'S REMARKABLE THAT WE'VE HAD THIS TREMENDOUS GROWTH IN GIVING DURING THE TIME OF THE PANDEMIC."

ROBERT O. KLEIN, PRESIDENT AND CEO SAINT JOHN'S HEALTH CENTER FOUNDATION



MARVELOUS MEDICINAL MUSHROOMS

THROUGHOUT MEDICINE, RESEARCHERS HAVE TURNED TO NATURE FOR COMPOUNDS TO PROMOTE HEALING. AT SAINT JOHN'S CANCER INSTITUTE, RESEARCHERS ARE EXPLORING THE CANCER-FIGHTING PROPERTIES OF COMMON WHITE BUTTON MUSHROOMS, *AGARICUS BISPORUS*, WHILE PACIFIC NEUROSCIENCE INSTITUTE SCIENTISTS ARE INVESTIGATING THE EMOTIONAL HEALING POTENTIAL OF GENUS *PSILOCYBE* MUSHROOMS.

THE CANCER-FIGHTING POTENTIAL OF *AGARICUS BISPORUS*

Every year, about 1 in 8 men in the U.S. will be diagnosed with prostate cancer. Przemyslaw Twardowski, MD, director of clinical research, urology and urologic oncology at Saint John's Cancer Institute, hopes to expand treatment options for these patients through two clinical trials conducted in partnership and collaboration with City of Hope. These clinical trials, funded by a National Cancer Institute RO1 Grant and based on Dr. Twardowski's previous research, will

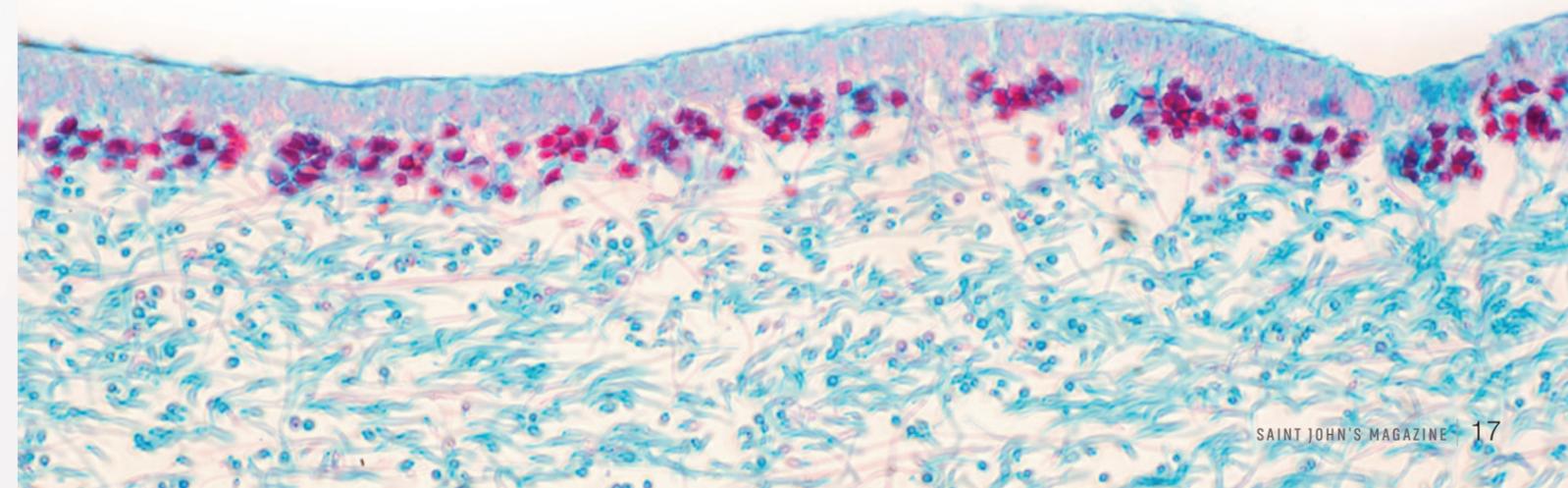
examine the potential cancer-fighting properties of common white button mushrooms, or *agaricus bisporus*.

Both clinical trials will be conducted over a one-year period and focus on patients with early stages of prostate cancer who will be administered tablets derived from *agaricus bisporus*. The first group consists of patients who have had surgery or surgery with radiation and had a good postsurgical prognosis. However, later their PSA—or prostate-specific antigen, a protein produced by the prostate gland—has gone up, which suggests that the

cancer is not cured.

"They don't have any visible cancer activity, like CT scans or bone scans, but their elevated PSA is a harbinger that some residual cancer is resurfacing," says Dr. Twardowski. "With this group, we will be testing whether the mushroom treatment will stabilize or hopefully lower the PSA."

The second group of patients have been recently diagnosed with prostate cancer but have not been treated because their cancer is slow growing. "Typically, these types of patients are put on what's called active surveillance,



which includes MRI-type scans, PSA monitoring and periodic biopsies to see if the cancer becomes more aggressive before treatment is instituted,” says Dr. Twardowski. “So these patients will be given the mushroom tablets to see if we can essentially prevent the need for future treatment over the length of the program.”

For the first three months of the study, only half the participants in both groups will receive the treatment so the mushroom tablets’ effectiveness can be measured against the control group. However, after three months the tablets’ initial effectiveness will be evaluated, and all participants will have an opportunity to receive the treatment.

STUDYING NATURE WITH SCIENTIFIC RIGOR

As an oncologist with a subspecialty in prostate, bladder, kidney and testicular cancers, Dr. Twardowski has lectured both nationally and internationally, has been extensively published, and has been a principal investigator and contributor to hundreds of clinical trials that have advanced treatment

options for patients. His research in the curative potential of white button mushrooms was inspired by his cancer patients’ interest in dietary and natural substances to improve their health as well as early research by his collaborator, Shiuan Chen, PhD, of City of Hope, into the cancer-fighting properties of *agaricus bisporus*.

“Many patients in my practice—and I think this is the case in oncology in general—take multiple over-the-counter supplements on their own, but it’s often based on sketchy and limited scientific evidence,” he says. “Yet I do believe there may be certain types of natural products that do have legitimate anticancer effects that need to be studied in a more scientific, rigorous way.”

The current trial is based on previous research he conducted in collaboration with Chen which suggested white button mushrooms had anti-prostate cancer properties. That study, published in May 2015 in the American Cancer Society journal *Cancer*, demonstrated that 30% of patients



Dr. Przemyslaw Twardowski is studying the anticancer properties of mushrooms.

To learn more about Dr. Twardowski’s research in urologic oncology, please contact Mary Byrnes at 310-582-7102 or mary.byrnes@stjohns.org

with relapsing prostate cancer after surgery who were treated with *agaricus bisporus* had decreased PSA levels.

If these new clinical studies support the previous research, then further investigation will be needed to discover the actual mechanism behind *agaricus bisporus*’ cancer-fighting ability. Dr. Twardowski hypothesizes that it relates to cancer immunotherapy, a form of treatment that uses the body’s immune system.

“In our preliminary studies, both in those based on blood samples from patients we’ve treated and laboratory work, it seems that there are certain aspects of the anticancer immune system that are accelerated by the treatment with this mushroom tablet,” he says. “Discovering this mechanism would be the next exciting step in this research.”

Philanthropic funding will help power this promising research, Dr. Twardowski says, by permitting the researchers to instinctively follow nature’s signposts.

“Philanthropy gives us flexibility to explore deeper levels than what may be possible with a government grant,” he says. “It is vital for moving the field of cancer research forward.”

PSILOCYBIN AND THE TRIP PROGRAM

A growing body of research now supports the potential use of mushrooms containing the chemical psilocybin for a range of cognitive, mental and behavior disorders. Several research projects at Pacific Neuroscience Institute at Providence Saint John’s Health Center are aimed at determining the safety and efficacy for psilocybin-based therapies, says Keith Heinzerling, MD, an addiction medicine specialist and well-published clinical investigator. Dr. Heinzerling recently joined Pacific Neuroscience Institute as director of its new Pacific Treatment & Research in Psychedelics (TRIP) Program.

Psilocybin, which is found in a range of genus *Psilocybe* mushrooms, has been the subject of decades of research for treating such conditions

as depression, anxiety, post-traumatic stress disorder (PTSD) and drug and alcohol use disorders. PNI researchers are launching several clinical trials to investigate the life-changing possibilities of psilocybin, Dr. Heinzerling says.

“My goal for the TRIP Program is to provide very sound scientific methods, innovation and compassionate care,” says Dr. Heinzerling.

TRIP researchers are currently conducting a clinical trial using psychotherapy combined with psilocybin for patients with alcohol use disorder. Other TRIP studies are in early stages, including one to help patients undergoing the complicated grief of losing a loved one to COVID-19 and another for terminal cancer patients experiencing psychological distress caused by their diagnosis.

These studies all follow strict safety protocols and adhere to long-held concepts on the importance of set and setting. Consenting and eligible patients are first provided with psychotherapy sessions to prepare them to optimize their mindset. The actual psilocybin treatment or journey which lasts four to five hours takes place in a controlled setting in a comfortable room with eyeshades and music, under the supervision of two trained professional guides. In the days and weeks after the journey, patients receive talk therapy to help them integrate the experience.

HOW DOES IT WORK?

A crucial factor in the psilocybin treatment’s effectiveness is whether the patient experiences a transcendent, often called “mystical,” experience during the session, Dr. Heinzerling says. “People will tell you that they saw the meaning of life, that they felt one with God or the universe, that their ego had dissolved,” he says.

This experience can help patients have extraordinary insights into themselves and their behavior. “Traditional pharmaceuticals are useful in helping patients with depression or anxiety disorders feel better and those with substance



To learn more about Pacific Neuroscience Institute’s TRIP program, please contact Meghan Chereck at 310-829-8394 or meghan.chereck@stjohns.org



abuse problems experience less cravings, but patients often relapse because underlying issues have not been addressed,” says Dr. Heinzerling. “And psychedelics like psilocybin can be a tool for a patient who wants to change and understand themselves better, even when it’s a hard process.”

According to Daniel F. Kelly, MD, a neurosurgeon and PNI director, psilocybin mimics serotonin, a brain neurotransmitter. By stimulating serotonin receptors called 5-HT2A receptors throughout the cerebral cortex, life-altering and behavior-altering insights can be achieved.

“Based on several landmark studies from major research institutions—including Imperial College of London, Johns Hopkins and University of Zurich—the working theory is that psilocybin affects the brain’s default mode network which is a large-scale network located predominantly in the frontal and parietal lobes of the brain and can be considered a neural construct for one’s ego,” he says.

The default mode network seems to be where people get stuck ruminating about the past, worrying about the future, focusing on addictions and generating negativity. Psilocybin seems to unlock or dampen down the default

mode network allowing much greater connectivity between brain regions that don’t normally communicate. While the exact mechanism of this brain reset is still not clearly understood, the result for many patients is truly life-changing, he says.

“A remarkable aspect of psilocybin and similar compounds is that their impact is transdiagnostic, meaning they appear to be effective for not only depression and anxiety, but also possibly addiction and post-traumatic stress disorder,” Dr. Kelly says.

A study published last year in the prestigious scientific journal *Cell* pointed to the effects of the substance on the 5-Hydroxytryptamine 2A (5-HT2A) receptor in the brain as a possible mechanism of action. Moreover, several landmark studies from major research institutions have brought research on psilocybin into the mainstream. Some of the studies include detailed brain imaging showing the physiological impact of the substance, he says.

HELP WITH ADDICTION

One of the most needed areas of mental health distress is for addiction including alcohol, nicotine and opioids. Psilocybin-assisted therapy

has shown promise in several early clinical trials for these disorders.

A recent study conducted by the NYU Grossman School of Medicine and presented at the American Psychiatric Association 2019 annual meeting found that one or two psilocybin sessions significantly reduced alcohol cravings. The TRIP program’s clinical trial for alcohol use disorder will investigate whether the number of subjects who have this epiphany-like experience, which is key to its success, can increase by changing the session’s setting.

According to Dr. Heinzerling, patients in the TRIP alcohol use disorder study will be given 25 milligrams of a pharmaceutical, synthetic version of psilocybin that is identical to that in the genus *Psilocybe* mushroom. At the beginning of the session, half the patients have the standard setting, which is putting on eye shades and listening to music, which helps them focus internally. The other half will view a 40-minute nature-themed film with music created by award-winning filmmaker Louie Schwartzberg who produced the 2019 film *Fantastic Fungi*.

“Researchers at the Imperial College in London have noted that reconnecting with nature can be

therapeutic for people who have depression, anxiety or alcohol use disorder,” says Dr. Heinzerling. “We wanted to see if by including Schwartzberg’s Visual Healing films, we can increase that connection to nature to help people cut back or stop their alcohol use.” Thus far, five of 20 patients have already been enrolled in the study.

Interest is also growing regarding psilocybin for helping with nicotine addiction. One small study from Johns Hopkins University found 70% of study participants who smoked had stopped smoking six months after a single psilocybin-assisted therapy session with preparation and integration sessions on either side of the psilocybin journey.

EMOTIONAL HEALING AND LONG-TERM RELIEF

Dr. Kelly says that TRIP is hoping to launch another psilocybin clinical trial for people with “complicated grief,” to be conducted in collaboration with Françoise Bourzat, a somatic psychologist and experienced guide, and Dr. Chris Adrian, a palliative care expert. “That trial looks to enroll 40 patients who lost a loved one during the COVID-19 pandemic and are suffering from prolonged grief of six months or more,” says Dr. Kelly.

The need for more effective therapies to help people consumed by prolonged grief is all too apparent in the COVID-19 pandemic, when funerals and memorial services have been long postponed, says Dr. Heinzerling. “So many people who have lost loved ones to COVID-19 are suffering because they had to put their grief on hold.”

TRIP is also planning research on the use of psilocybin to help terminally ill cancer patients who are

experiencing anxiety, depression and other forms of spiritual distress, says Shanthi Gowrinathan, MD, director of psycho-oncology and cancer support services at the Saint John’s Cancer Institute and director of psycho-oncology at PNI.

Research conducted at the NYU Grossman School of Medicine and published in the *Journal of Psychopharmacology* showed that one dose of psilocybin in combination with psychotherapy can provide cancer patients with long-term relief of emotional distress.

“Psilocybin is markedly tailored for cancer patients because it’s relatively medically benign,” Dr. Gowrinathan says. “It’s fairly well tolerated and doesn’t have the side effects and issues that may make it hard to use for someone with cancer.”

Philanthropy helps support the meticulous biological and early clinical research that will help answer key questions about genus *Psilocybe* mushrooms, Dr. Heinzerling says.

“We are grateful for the seed money we’ve received from the Annenberg Foundation and other private donors,” he says.

Such research has the potential to pave the way toward much-needed, larger clinical trials. Therapies based on genus *Psilocybe* mushrooms may fill a void in psychiatry, says Dr. Gowrinathan, noting that one of her cancer patients who died recently had suffered severe emotional distress in her final months.

“I wasn’t able to help her using traditional psychotropic medications,” Dr. Gowrinathan says. “I would have loved to have something else to offer her. I can’t put enough value on the ability to give someone peace of mind at the end of life. Nothing would be more rewarding than that.”

Paying It Forward

Thankful for medical research that has benefited them, the McLoughlin family donates to help others.

BY NANCY SOKOLER STEINER

PHOTOGRAPHED BY PHILLIP GRAYBILL

Barbara and John McLoughlin have turned to Providence Saint John's Health Center for their medical needs for close to six decades. A year after the couple moved to Santa Monica from the East Coast in 1962, Barbara delivered daughter Linda at Saint John's. Siblings Patty, Cathy and Mike followed—all making their debut at the “family” hospital.

Funds were tight in those early days with John just out of law school. Before delivering her third baby, Barbara insisted they wait in the car even as her contractions grew closer together. It was late in the evening, and she didn't want to pay for an extra night.

Today, the couple's finances are secure. And in appreciation for research at Saint John's that has benefited them directly, Barbara and John recently made a generous gift to support the work of three exceptional Saint John's physicians, including a longtime friend of the family, geriatric psychiatrist David Merrill, MD, PhD, director of the Pacific Brain Health Center at Pacific Neuroscience Institute (PNI).

The McLoughlins met Dr. Merrill when John, retired from his successful career as a corporate

attorney, began experiencing mild cognitive decline. John started receiving care from Dr. Merrill, who was then working at another institution.

“My dad is a very bright, very cerebral, very accomplished man,” says daughter Linda McLoughlin Figel. “Dr. Merrill was just so amazing in helping us navigate those early stages, explaining what was involved and what it meant for my dad and our family.”

Impressed with Dr. Merrill's research and grateful for his care, John and Barbara made their first substantial philanthropic donation, a five-year grant to fund Dr. Merrill's work on slowing cognitive decline. When he moved to Saint John's in 2018, the funding followed him to PNI. The McLoughlin family this year renewed their pledge with another five-year grant.

“The McLoughlins were a significant part of the reason I came here,” says Dr. Merrill. “They spoke enthusiastically about the hospital and the doctors, and that made me feel comfortable joining the Saint John's family.”

John's treatment involves efforts “to slow down his cognitive decline and optimize his physical health,”

“They're an incredibly tight and supportive family. That makes a huge difference in terms of patient recovery—more than people realize.”

says Dr. Merrill. “I work with him, Barbara and their children, as well as his other doctors, to address any issues and keep his outlook positive.” John's regimen combines medications for brain function and healthy lifestyle behaviors including exercise, a Mediterranean diet, minimizing stress and engaging in cognitively enriching activities such as reading financial news and reminiscing with his family.

When John first came to Dr. Merrill, his son, Mike, asked how much time his father had remaining. Dr. Merrill

estimated two years. That was 10 years ago.

That's why, when the McLoughlin's gift to Dr. Merrill approached its completion at the end of 2020, Barbara insisted on renewing funding. Her children enthusiastically supported the decision. “Dr. Merrill's research,” says Linda, “really spoke to us.”

“We've been studying and developing an on-site program where people perform cognitive training and physical exercise simultaneously. That seems to help both memory and

frontal executive function in older adults at risk for memory loss,” says Dr. Merrill. “We hope this brain training will slow down the progression of Alzheimer's disease in those who already have it and may become part of a prevention protocol for those at risk. The McLoughlin's gift will help support these prevention trials.”

“This program was built from donor contributions,” he adds. “Without philanthropy, we don't have the funds to develop novel lifestyle programs. We're looking to get the program





(Back row) Patty McLoughlin Major, Michael McLoughlin
(Front row) Barbara McLoughlin, John McLoughlin, Linda McLoughlin Figel



The McLoughlin grandchildren
(Back row) Erin McLoughlin Figel, Kaito McLoughlin, David Patrick Figel
(Front row) Barbara McLoughlin, John McLoughlin

covered by health insurance, but that's a long process and we need good data from our pilot studies, which are donor-funded."

Along with their renewed support of Dr. Merrill's work, the McLoughlins have directed half of their gift toward research on urologic cancers. Receiving the funds are Saint John's Cancer Institute physicians Jennifer Linehan, MD, associate professor of urology and urologic oncology, and Przemyslaw Twardowski, MD, professor of medical oncology at the Cancer Institute.

Three years ago, Barbara was rushed to Saint John's emergency room with severe abdominal pains. Dr. Linehan diagnosed her with upper tract urothelial carcinoma, a rare form of bladder cancer that reached up to the kidney.

"This cancer can be very aggressive," says Dr. Linehan. She removed Barbara's kidney to prevent spread of the tumor, which was about the size of a grain of sugar. But the

cancer still metastasized to the liver. Dr. Twardowski then started treating Barbara with chemotherapy.

"The chemotherapy reduced her cancer by about 20% to 30%, but it was difficult for her to endure because of the side effects," says Dr. Twardowski. He switched Barbara to a new immunotherapy drug that had only recently been approved. In fact, Dr. Twardowski had participated in the clinical trials leading to that approval.

"This treatment only works for about 20% of patients, so the odds weren't in her favor," he says. "But for that 20%, we see a dramatic, prolonged and durable effect."

Fortunately, Barbara beat the odds. After five treatments, her liver cancer completely disappeared. "This shows the progress in the application of new drugs," says Dr. Twardowski. "Five years ago, this option wasn't available."

Dr. Linehan and Dr. Twardowski credit Barbara's family with helping her surmount the challenges of treatment. "Her family takes incredible care of

To learn more about supporting Dr. Twardowski's or Dr. Linehan's leading-edge research, please contact Mary Byrnes at 310-829-7102 or mary.byrnes@stjohns.org.

her. At least one of her children was always with her," Dr. Linehan says, referring to Linda, Patty and Mike (Cathy lives out of town). "They would come to appointments together and ask really intelligent questions."

Dr. Twardowski agrees. "They're an incredibly tight and supportive family. That makes a huge difference in terms of patient recovery—more than people realize."

"Dr. Linehan and Dr. Twardowski saved my mom's life," says Mike. "They were very comprehensive with explaining our options and they were always responsive when we would call or email with questions." (Mike himself received lifesaving care at Saint John's for a previously undetected hole in his heart.)

"A donation like this allows you to do the preliminary work that you can then take to the government to demonstrate you've made some headway."

Dr. Linehan explains that there is no way to find kidney cancer from blood or urine samples, making detection and monitoring an intrusive process for patients. She is working to identify specific biomarkers, or indicators, in blood or urine that would signal cancer's presence. She will use the funding from the McLoughlins to continue this research.

"A donation like this allows you to do the preliminary work that you can then take to the government to demonstrate you've made some headway," says Dr. Linehan. "Only then can you start to get National Institute of Health grants. These kinds of donations can be a huge stepping-stone."

Dr. Twardowski will apply the funds toward research on prostate cancer, the

most common type of urologic cancer. His projects include looking at the anticancer properties of a mushroom extract (see page 17) as well as conducting clinical trials to see if administering two immunotherapy drugs (currently used for other cancers) improves outcomes when given to high-risk prostate cancer patients before surgery.

Barbara and John McLoughlin understand the importance of philanthropy and admire how well it is utilized in their own backyard. "This donation felt very personal to my parents," says Linda. "Saint John's is their local hospital, where they've been in good times and bad. It doesn't feel like sending off a check someplace where you never see it. They feel a real connection here." 🍀

To learn more about supporting medical research on cognitive decline, please contact Meghan Chereck at 310-829-8394 or meghan.chereck@stjohns.org.

EXPANDING OUR IMPACT

THE COMMUNITY IMPACT FUND WAS LAUNCHED OUT OF A LONG-STANDING TRADITION OF CARING FOR OUR WESTSIDE COMMUNITY.

BY MELANIE ANDERSON

Each year in January, local nonprofit leaders and Saint John's Health Center Foundation stakeholders enjoy a celebratory breakfast hosted by the foundation in honor of the new class of Community Impact Fund (CIF) grant recipients. "It's the best meeting of the year," says foundation trustee Bill Garland. "There's such great energy in the room."

Now, after five years of giving, friends and supporters of Providence Saint John's Health Center can take pride in the unique CIF program and all it stands for.

The foundation began awarding CIF grants in 2015 after sponsorship of Saint John's transitioned from the Sisters of Charity of Leavenworth to Providence Health & Services. As part of the agreement, the attorney general of California required creating a fund for health-related purposes that would be managed by the foundation

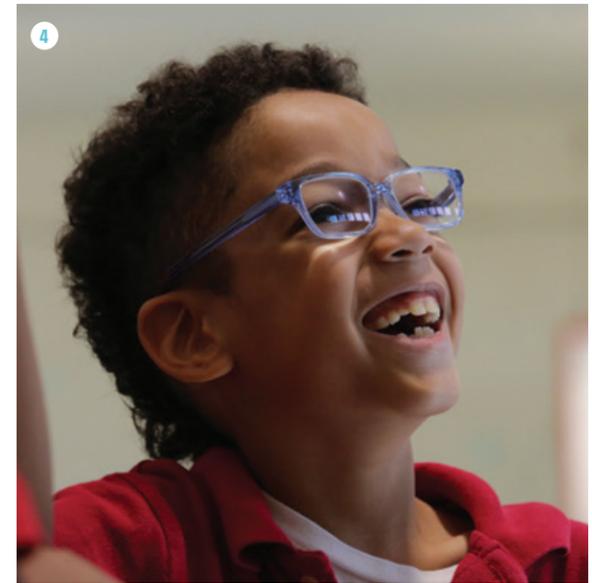
and distributed to community partners serving vulnerable populations within the hospital's service area of 29 zip codes.

But the true roots of the CIF can be traced back to the mutual relationship of respect between the hospital and the Westside community that stretches back to the founding of Saint John's in 1942, says Robert O. Klein, president and chief executive officer of the Saint John's Health Center Foundation. The hospital had always worked with various not-for-profit service providers on the Westside to help address specific community needs. During the turbulent months in 2013–2014 when the health center's sponsorship and future were steeped in uncertainty, the foundation, its trustees and the hospital leadership and physician staff clung to the hope of remaining true to its values of compassionate service to the community, he says.



The Community Impact Fund (CIF) in action:

1. The People Concern staff receiving grocery donations.
2. Diana Helena Martin turned to the UCLA/VA Veteran Family Wellness Center, a CIF grantee, for help with post-deployment issues.
3. Cynthia Klingelfuss and son Arvind have become a stronger family unit with help from the CFDC.
4. Vision To Learn is one of the Community Impact Fund grantees that serves children.
5. CLARE|MATRIX is using CIF support to expand sober living opportunities to its clients.
6. Advocates in Pacific Palisades clean up abandoned camps and meet with homeless clients.



Thus, when the Sisters of Charity agreed to turn over the sponsorship of Saint John's to the Sisters of Providence, that goal was not lost, Klein says.

"The Sisters of Charity passed the governance, heritage and values they established at Saint John's over the years and trusted the Sisters of Providence to carry that forward," he explains. "The attorney general could see the health center had supported the community and that Providence was the right sponsor for Saint John's. Saint John's, as a not-for-profit, had been a community partner in the truest sense."

The transaction between the two religious orders involved about \$70 million that would have stayed with the Sisters of Charity health system, with no distribution in California. However, the attorney general ruled that those funds could not leave the community.

Clinic and WISE & Healthy Aging within the service area of Saint John's," says foundation trustee Bill Simon. "When this pool of money became available, it really was a natural extension of what Saint John's had been doing for decades."

Foundation trustee Kathleen McCarthy Kostlan agrees. "The idea that a hospital has funds like this to do good work is just fantastic, and it really speaks to the gratitude from the hospital to the community and vice versa," she says. "Each supports the other, so it benefits both immeasurably."

Along with others, Garland, Kostlan and Simon eagerly joined the inaugural CIF Advisory Committee, which was chaired by McKinzie and tasked with overseeing the fund.

"We decided as a committee very early on that rather than take a shotgun

"IT BRINGS A SMILE TO MY FACE WHEN YOU SEE THE IMPACT IN OUR COMMUNITY OF THE CIF, WHETHER IT'S CLARE, SOUND BODY SOUND MIND OR THE SANTA MONICA FAMILY YMCA. YOU SEE AN IMMEDIATE IMPACT."

"One of the requirements for a change in sponsorship of a nonprofit hospital in California is approval of the California attorney general," says foundation trustee Carl McKinzie. "The foundation trustees did not want money that had been raised in the community to flow outside the community. The attorney general fully agreed."

Thus, the Community Impact Fund was born. And while the agreement details might have been a bit complicated, the result was clear. The Community Impact Fund would allow Saint John's to continue, and even increase, its commitment to community service and charity.

"Saint John's has a history of being very active in the community, obviously from the medical perspective but also other perspectives—whether it was sponsoring the 5K/10K Fourth of July race in Pacific Palisades or being supportive of some of the great institutions like Venice Family

approach and give every nonprofit in our service area a small stipend, we would endeavor to make needle-moving changes," says Garland. "We have a smaller number of causes that we give to, but we're making impactful donations that are transforming these organizations and really allowing them to expand the number of people served."

EFFECTING NEEDLE-MOVING CHANGE

Each year, the foundation awards CIF grants to 15 to 18 community partners focused on children and families, homelessness, and/or mental and behavioral health. "It brings a smile to my face when you see the impact in our community of the CIF, whether it's CLARE, Sound Body Sound Mind or the Santa Monica Family YMCA," says Simon. "You see an immediate impact."

The committee, which does not accept



PHOTOGRAPHED BY PHILLIP GRAYBILL

CIF COMMITTEE MEMBERS:

(back row, from left) Bill Simon, Bill Garland, Kathleen McCarthy Kostlan
(front row) Robert O. Klein, Carl McKinzie

Not pictured: Michael Wayne, Chair, Rae Archibald, Marian Craver, Mary Flaherty, Justin Joe, Steaven Jones, Paul Kanin, Paul Makarewicz, John Robertson MD, Donna Schweers, Charles Smith, Brent Stratton

unsolicited grant applications, identifies potential grantees based on need and knowledge of organizations doing good work in the community. JMC Philanthropic Advisors helps vet candidates and measures the impact of the grants. “Their professional guidance gives us comfort that qualified grant recipients have been identified, verification that the funds have been well spent and the extent to which grant goals were accomplished,” says McKinzie.

“These committee members are dedicated volunteers,” says Jeff Schaffer, president of JMC Philanthropic Advisors. “They are invested in the community and have long knowledge of the needs and resources available to support the community. They are passionate about the work.”

Responsible philanthropic giving is hard work, Schaffer notes, requiring committee members to spend many hours on due diligence, site visits, grantee meetings and measuring outcomes. The committee’s desire to make the most out of the program was apparent during the pandemic.

“In the past year, when we were dealing with the COVID-19 pandemic, the committee was willing to step up and make accommodations and grants to allow the grantees to shift the funds to meet urgent needs,” he says. “The committee members have demonstrated they are very good partners to the nonprofits supported by the CIF.”

Committee members also hear directly from grantees at the annual breakfast, committee meetings, site visits and, in some cases, personal conversations. “In fact, each member has an assigned cause that they’re close with, either through past giving or they know people in upper management or they’re volunteers within that organization,” says Garland, who identifies the Westside Food Bank as one of his causes.

Simon has a special connection to UCLA Health Sound Body Sound Mind, which provides state-of-the-art fitness equipment and a curriculum to enhance physical education at

5 YEARS

of the Community Impact Fund

Total number of grantees (2016–2020): 28

Total amount of grants (2016–2020): \$6.3 million

2020 Funding: \$1.46 million

local schools. He and his wife, Cindy, founded the program as a nonprofit before UCLA Health acquired it. Thanks to CIF support, Sound Body Sound Mind has expanded to serve many middle schools and high schools within the Saint John’s service area.

“We’re in probably 10 schools in the Saint John’s service area, so that’s about 15,000 students served every day school is in session,” says Simon. “That’s an example where the day you put in the equipment students can start working out. The focus has been on nonathletes, because the athletic teams have special coaching and equipment at many schools. For example, at Santa Monica High School and at Venice High, we specified that the equipment be used principally by students in their physical education classes.”

CIF grants have also benefited the hospital. When Saint John’s experienced an uptick in homeless individuals presenting to the emergency department despite not having medical emergencies, the CIF began funding a charity care navigator at the hospital.

“We would have to divert ambulances because we just didn’t have room,” says McKinzie. “By getting navigators who understand the social services area and can help connect people to meals, other health care needs through agencies such as Venice Family Clinic and housing through The People Concern, it’s made a big difference for the

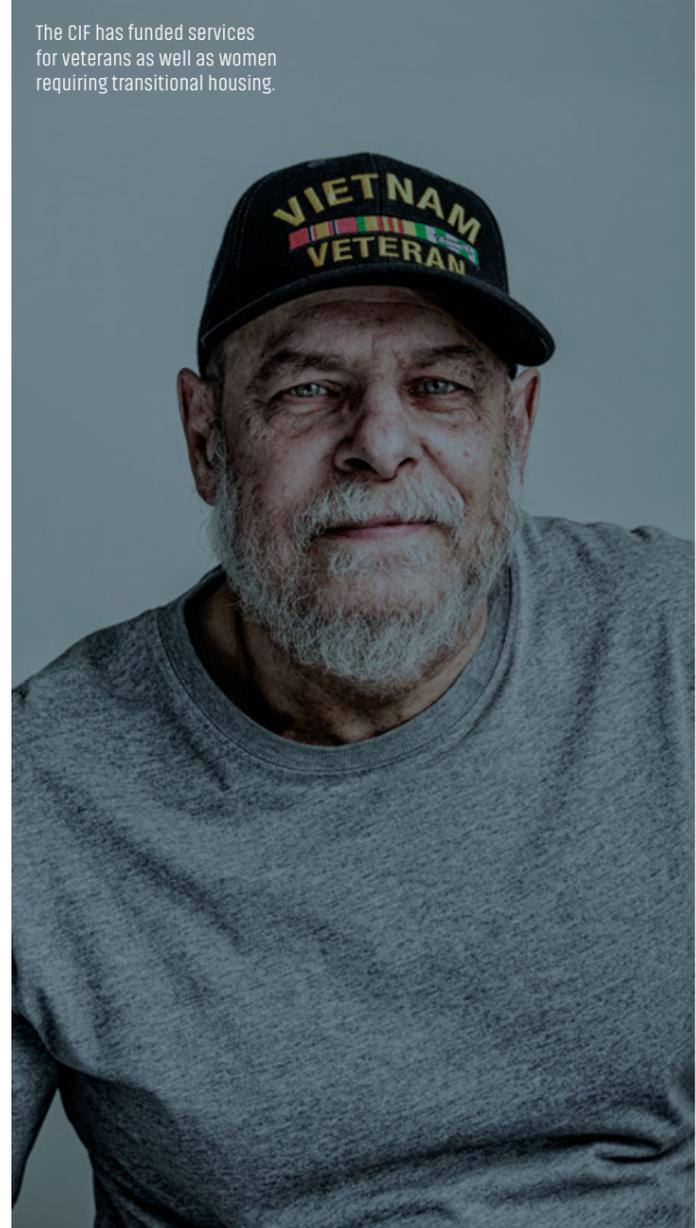
people who are homeless and also for Saint John’s by freeing up beds in the emergency department or in the hospital. That’s one of my favorite CIF-funded programs.”

Another CIF grant helped launch a respite bed program at one of The People Concern’s Santa Monica access centers. “Basically, it’s a triage where a homeless person could receive basic medical care with a registered nurse, all through CIF funding, so they would have a place to go other than the emergency room,” says Garland, who was a Saint John’s emergency department volunteer for 11 years. “It dramatically reduced the backlog once we brought that program up online. That was something I saw on my weekly volunteering, and that was one of my more rewarding moments on the committee.”

RESPONDING TO CHANGING NEEDS

Over the past seven years, Kostlan says it has been gratifying to see the CIF program grow and evolve. “We started small and have gotten a little bit larger, and we’ve spread out a little bit in terms of our impact,” she says. “I don’t think initially we did anything with homelessness. That has come in more recent years. And as the need arises, we have been able to respond to it.”

During the pandemic, CIF grants have been crucial to helping the Westside Food Bank and other local nonprofits meet an increased demand for services.



The CIF has funded services for veterans as well as women requiring transitional housing.



“The attorney general gave us special permission to make emergency grants for things needed for the pandemic, particularly by the hospital,” says McKinzie. “The foundation made additional grants of about \$5 million for COVID-19 related needs.”

Another unexpected but positive development has been the relationships and synergies that have formed among grantees because of the annual breakfasts and other gatherings of the grantees. “It’s neat to start the ball rolling by bringing these organizations

together under one roof,” says Garland, “and then to see the conversations continue without the Community Impact Fund being part of it. That always brings a tickle to our hearts.”

Catholic Big Brothers Big Sisters, which McKinzie says “had an abundance of ‘bigs’ willing to help kids,” began working with the Boys and Girls Club of Santa Monica and the Santa Monica Family YMCA after connecting through the CIF. “I’ve derived great satisfaction from having a voice in funding some of these agencies

and then seeing the good that’s come from that,” says McKinzie. “It’s really made a difference in the community, the knowledge of the community and the health care of the community.”

The foundation’s CIF committee members relish their roles, Klein says.

“I think the CIF has been a wonderful undertaking for us,” he says. “We’ve also benefited by a robust investment market and return, and we’ve been able to grow the fund somewhat. The committee has had a great time doing this.”

Continuum of Care

During her life, cancer survivor Jean L. Gilbert gave to others. Now her legacy gift will provide cancer supportive care services for years to come.

BY SHARI ROAN / PHOTOGRAPHED BY LAUREN PRESSEY

After struggling with a rare neurological condition for several months, Kathryn Black was devastated to learn she had a dangerous form of breast cancer in 2018. Treating the condition, triple-negative breast cancer, required a mastectomy, chemotherapy, radiation and a subsequent surgery for lymphedema, a painful postsurgical condition causing swelling.

By 2019, the retired attorney, age 73, was depressed, withdrawn and anxious about a cancer recurrence. However, she eventually found her footing when a nurse at Saint John's Cancer Institute saw Black's suffering and steered her toward the cancer supportive care services program at Saint John's.

"The cancer was pretty depressing. Triple-negative is a challenge because it has a higher recurrence rate," says Black. "I was just having a hard time. A Saint John's nurse, Rebecca Crane-Okada, PhD, RN, was so helpful getting me into the cancer supportive care services program. I had no idea this was available."

Today, every cancer patient coming through the Saint John's Cancer Institute is evaluated to identify supportive care needs. The program endeavors to address the repercussions resulting from a cancer diagnosis and treatment—including management of treatment side effects, psychological and emotional health issues, changes in family dynamics, logistical and financial problems.

"These are the things that can be impacted by the treatment and the cancer itself," says Shanthi Gowrinathan, MD, a psychiatrist and director of psycho-oncology and cancer support services at Saint John's. "Addressing these issues proactively leads to better outcomes and better quality of life."

The supportive care program at Saint John's is now undergoing a significant expansion thanks to a donation from the Jean L. Gilbert Trust. The gift will allow supportive care team members to further address patient financial needs.

TREATING THE WHOLE PATIENT

The supportive care team includes experts in psychiatry, social work, preventive care, survivorship, palliative care and nutrition. Patients can receive help for such problems as insomnia due to cancer treatment, loss of appetite or changes to their GI tract because of chemotherapy and radiation, or assistance addressing family relationships destabilized by a cancer diagnosis. Every cancer patient is assessed on a regular basis to identify supportive care issues, Dr. Gowrinathan says.

"Getting diagnosed with cancer can remove you from your life without your permission," she says. "Supportive care deals with anything that is affecting the patient's quality of life. Often, for example, patients assume the side effects they're experiencing are part of cancer treatment, and they feel they have to just put up with it. But there's a tremendous amount of knowledge about how to ameliorate side effects."

"Our goal is to get people to feel like themselves during and after treatment—having moments of joy and interacting with their families and doing the things they still love."

Black credits several supportive care services with returning her to a comfortable life embellished by the joy of having a new dog—a rescue poodle-Pekingese mix named Olive. She received psychotherapy and pharmacological interventions from Dr. Gowrinathan to quell depression and anxiety caused by her cancer



The cancer supportive care services program at Saint John's helped Kathryn Black recover.

treatment. Black, who had lost a significant amount of weight while ill, also received nutrition counseling. She received support for the effects of the lymphedema, including therapies to reduce the pain and advice on garments she could comfortably wear.

"People have no idea what having cancer is like," Black says. "They think you have breast cancer and get surgery, chemo and that's it. And it's not. I liked Dr. Gowrinathan because she has direct experience with cancer patients. She focuses on the things

that would be beneficial for cancer patients like me."

JEAN GILBERT'S LEGACY

The cancer supportive services program can also help patients with personal finances impacted by cancer

treatment or diagnosis—what has become known in recent years as financial toxicity related to cancer.

“Our social workers go out of their way to help people figure out what insurance will pay for or where to find resources. But until the Jean Gilbert gift, we’ve been unable to deal with financial concerns that have come up,” says Dr. Gowrinathan. “That’s why we’re so over-the-moon about the gift. Because it’s these little things that make a patient feel that someone cares, and that may make all the difference.”

The gift is designed to replace the work of the Santa Monica woman who inspired it. Jean Gilbert spent many years before her passing last year caring for others with cancer.

“What we’re doing here is part of a natural continuation of how she was able to help and serve people,” says Paula Majeski, a longtime friend of Gilbert’s and a trustee. “She ministered to people making sure they could focus on their healing instead of worrying about how they were going to manage their day-to-day expenses.”

“This trust is like an extension of what she was doing before,” says Holly Engelman, also a longtime friend of Gilbert’s and co-trustee. “It can be applied to more people as they are going through cancer—supporting people when they are outside the doctor’s office with rent, transportation and other needs.”

Gilbert was a quiet and unassuming woman, according to her friends. Although, they say, she had a laugh that would turn heads. While dedicated to helping others, she avoided calling any attention to herself.

“She was very observant and very empathetic,” Majeski says. “When she would see people were having trouble with medical needs, she would quietly step in and pay for things without people knowing who it was from.”

Gilbert devoted herself to the study of psychology, spirituality and personal growth. She used her cancer diagnosis to learn more about herself and how to heal and grow through the experience. She worked as the director of a personal growth seminar company for a time in Australia, and after returning to the United States, she dedicated herself to quietly serving others in her church and in volunteer work.

She was first diagnosed with breast cancer in middle age and underwent a double mastectomy. The disease recurred and she lived with it for almost 25 years, finally succumbing to cancer on February 27, 2020, at age 70.

Throughout her cancer journey, she educated herself about wellness and coping, and turned her attention to other cancer patients, Majeski says. “She tried everything and researched everything. She was always around people with similar diagnoses to share what she learned and learn from them.”

Gilbert wanted her legacy of healing, loving and caring for others to continue through the gift she left for cancer supportive care services program, and she enlisted Engelman and Majeski as trustees to manage the gift.

“We were with Jean through her journey of cancer. She went just about everywhere—Cedars, USC, UCLA,” Majeski says. “But she preferred the experience at Saint John’s. She felt supported and cared for here.”

“She would always comment that if you were going to be in the hospital, Saint John’s was the place to be. It was peaceful, spiritual and the staff was always kind and compassionate.”

ADDRESSING FINANCIAL TOXICITY
With the funds from the Gilbert donation, supportive care team members will be able to expand the

“The funds will be directed to what Jean wanted, and what she wanted was to ease people’s way.”



Jean L. Gilbert spent her life assisting others and left an estate gift aimed at helping cancer patients feel cared for and less anxious.

To learn more about the cancer special needs fund and supportive care services at Providence Saint John’s Health Center, contact Jeanne Goldsmith at 310-582-7344 or jeanne.goldsmith@stjohns.org

program to provide financial assistance for special needs and vouchers for transportation and hotel rooms.

Recently, Engelman says, she and Majeski were told of a cancer patient on a tight budget who was skimping on food because she wanted to pay for a cat sitter while she was undergoing cancer treatment. With funds from the cancer supportive service program, the woman was able to care for her cat and pay for groceries.

Majeski, Engelman and Dr. Gowrinathan hope the gift inspires other donations that will create a legacy program. “The funds will be directed to what Jean wanted, and what she wanted was to ease people’s way,” Dr. Gowrinathan says. “We hope that her legacy will live on past this initial gift.”

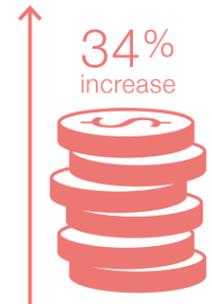
Saint John’s has a history of treating the whole patient and never turning a blind eye toward those in need—elements that were important to Gilbert in selecting Saint John’s for the gift. “There is a whole support structure they are putting in place at Saint John’s that supports her vision,” Majeski says. “They are really charging themselves with making sure they are caring for people on all levels.”

Gilbert would be happy to see how the gift will be utilized but wouldn’t want thanks, she notes. “Jean mentioned, prior to her death, ‘I feel like I haven’t left a legacy,’ and this gift will carry her legacy of loving and caring to those in need,” Engelman explains. “How wonderful we can support her vision and legacy of helping people anonymously and quietly and with no strings attached through this gift.”

CANCER AND FINANCIAL TOXICITY

The personal financial toll linked to a cancer diagnosis is receiving growing attention as the cost of cancer treatment increases, says Shanthi Gowrinathan, MD. While more people are surviving cancer than ever before, the cost of newer medications and the lengthy nature of cancer treatment can create devastating financial problems for patients, including job loss, depletion of personal savings and even bankruptcy. More importantly, Dr. Gowrinathan says, financial problems can interfere with treatment, and the stress related to financial toxicity can impact cancer outcomes and quality of life.

Total expenditure for cancer care in the U.S.



Source: American Cancer Society, Cancer Action Network “the Costs of Cancer,” 2020

By the Numbers

Cancer patients are **2.5 times** more likely to file for bankruptcy.

Cancer is the **second-most expensive** disease in the U.S.

Cancer patients miss **22.3 more workdays** per year than other workers.

Cancer survivors under age 65 have **double the rate of financial hardship** compared to cancer patients over age 65.

In 2018, U.S. cancer patients paid **\$5.6 billion** in out-of-pocket cancer treatment costs.

Source: Triagecancer.org, FACS, ACS

Among cancer survivors:

- 62% worried about large bills
- 40% had to make financial sacrifices to pay for their treatment
- 34% had to borrow money or go into debt to pay for therapy
- 52% said they owed \$10,000 or more

Source: [Livestrong survey](http://Livestrong.org)



FINDING— AND SHARING— HOPE

**A PUBLIC SERVICE ANNOUNCEMENT
ORIGINATING AT SAINT JOHN'S
CELEBRATES WORLD PREMATURITY
DAY AND MORE.**

BY VICTORIA CLAYTON / PHOTOGRAPHED BY MONICA OROZCO

“We saw all these healthy, vibrant children, and just seeing that gave us hope when we needed it most.”

A love letter can come in many forms. Jean Paulo Lasmar, a director-producer and photographer, composed his love letter in the form of a public service announcement to raise awareness for the 380,000 premature babies born in the U.S. each year—including a very special birth about five years ago at Providence Saint John's Health Center.

Lasmar and wife Silvia, who moved in 2012 to Southern California from Brazil, had their son, Gabriel, unexpectedly early at Saint John's in December 2015. The experience was a wild ride with—thankfully—a blessed ending.

Silvia, who was pregnant with twins, says the pregnancy began normally. The couple moved from Downtown Los Angeles to Santa Monica to be closer to Saint John's only because they knew having twins made the pregnancy high-risk. Around the six-month mark, however, there was trouble. “There's no real reason it happened, but we lost our daughter, and I was hospitalized,” explains Silvia.

Gabriel had to be delivered soon after. At under 4 pounds, Gabriel was the size of Jean Paulo's hand. He battled pneumothorax, a common but serious respiratory condition for premature babies, and clung to life in Saint John's Neonatal Intensive Care Unit—and he'd stay for two months.

At Saint John's, a highly skilled NICU health care team devoted themselves to fastidious care for Gabriel. For this, the Lasmars are filled with immense gratitude. But they admit that there were dark days. Like any new parents navigating an uncertain outcome, they were terrified at times and felt helpless.

“I never dreamed I'd leave the hospital as a new mom without taking my baby home. It was horrible,” says Silvia. Recovering, she dedicated herself to pumping breast milk eight times a day so her supply would sustain the baby once he was strong enough to breastfeed. She stationed herself at baby Gabe's side all day, every day, except for a two-week period when she contracted a cold and was forced to stay away.

Jean Paulo, who had just completed an MFA degree at USC's School for Cinematic Arts, did the same. But he also did what he was trained to do: He grabbed his camera and documented the family's emotional roller coaster.

“I knew all along I wanted to do this for my child. I wanted to give him the gift of documenting his life,” says Jean Paulo. “But of course, I didn't know we were in for this kind of story.”

Naturally, Dad didn't capture everything, because when in emergency mode all he could do was hold Silvia's hand. But he got plenty. “Gabriel is very lucky. His father takes beautiful pictures,” says Silvia.

Many parents just want to forget the drama of a difficult birth. Not the Lasmars. Years later—Gabriel is now a 5-year-old scooter-riding, Lego-building,

bilingual wonder—Jean Paulo kept thinking about those dark days when the couple felt so scared. He recalled the fear when the doctors had to intubate tiny Gabriel to be placed on a ventilator. He pondered how, during COVID-19, so many people were sharing a type of fear and uncertainty similar to what the Lasmars had felt.

Working with his friend Henrique Tanji, a music composer, Jean Paulo took his family's real-life experience and created a video project to offer hope to the world. The result was ultimately called *Breathe: Gabriel's Story*, a video with original music written by Tanji and Jean Paulo.

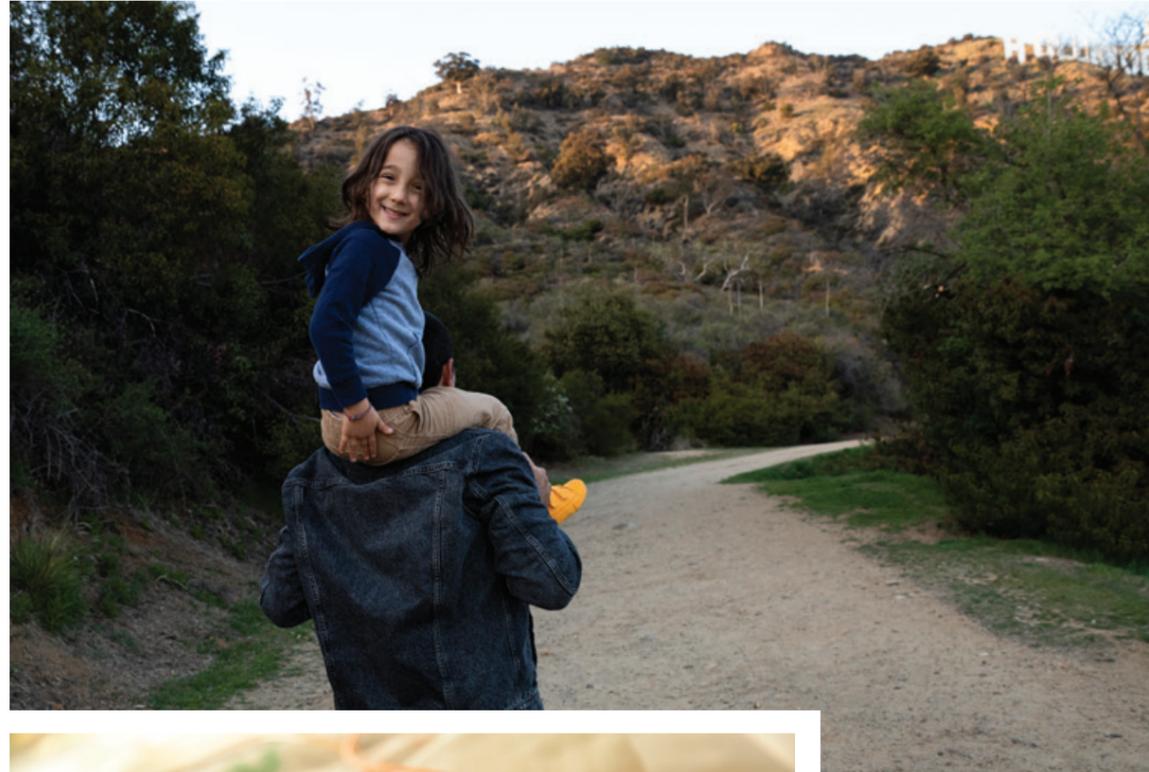
"When we were in the hospital and having the most fear, a nurse pulled Silvia and me aside and said, 'You need to look at this,'" explains Jean Paulo. The nurse handed them an album. The book contained photos of children as they were in the NICU—many with far worse conditions than Gabriel—and then as they looked months and even many years later.

"We saw all these healthy, vibrant children, and just seeing that gave us hope when we needed it most," says Silvia. That's exactly what the filmmaking team hoped their project could do.

Eventually Jean Paulo and Tanji showed Gabriel's story to Wid Souza, VP associate creative director at New York advertising agency Area 23, who connected them with the March of Dimes, a nonprofit that works to improve the health of babies and moms. Gabriel's story soon became a major television campaign to raise awareness for World Prematurity Day, which takes place each November 17.

The Lasmar family also gifted Saint John's the use of *Breathe: Gabriel's Story* to raise awareness and celebrate the care they received at Saint John's NICU.

Nurse Pari Ghaffari says that the generosity of the Lasmar family is just one more example of the community she has admired over her 38 years of working at Saint John's. Ghaffari, who was the very first nurse trained to work in the NICU when the hospital launched the program in the 1990s, says the reason Saint John's exceeds expectations is often because of people like the Lasmars. "We have donors who truly want to make a difference," says Ghaffari.



Gabriel Lasmar is an active, healthy 5-year-old.



These NICU supporters, she says, not only want to make sure the world knows about preemies and what can be done to care for them, but they also often make sure Saint John's has the latest technology. Because of generous donations, for example, Saint John's was one of the first area NICUs to have Giraffe Incubator Care stations, state-of-the-art incubators that make it easier and safer for health care providers and parents to connect with and care for preemies.

Other gifts have included advanced mobile X-ray units that give immediate images for catheter placement, baby cams so parents can observe their baby 24/7 from anywhere via a secure website, and much more. Volunteers and donations also provide for warm touches like beautiful hand-drawn placards with the newborn's name and hand-knit caps for each preemie.

"Most recently, philanthropy has made it possible for us to completely remodel our waiting room so it's even more sibling-friendly," says Ghaffari. "Now we're just waiting for the day when COVID-19 protocols will allow us to use it more."

NICU gratitude doesn't surprise Nate Mabry, RN, former executive director of Surgical Services and Women's Health at Saint John's. "I think people really want to support the NICU and what they're doing. I have never seen more dedicated health care workers," says Mabry, whose own twins also spent some time in the NICU. "These are nurses, technicians and doctors who take their jobs so seriously. They are really there giving everything they got to some of our most vulnerable patients."

Jean Paulo says the decision to give back "with an open heart and arms wide" was an easy one.

"Before our experiences with Saint John's, I had always thought of hospitals as cold places," he says. "But at Saint John's we felt something more, something deeply emotional and compassionate coming out of everyone. And at times that was the only thing holding us together."

Silvia says the health care team, but especially the nurses, taught her no less than how to be a mother. To the Lasmars, telling their story was intricately tied with telling the Saint John's story.

"It feels full circle. Like we came back to where it all began," says Jean Paulo. Besides, there was a perfect arc. "From coming into the hospital so fearful to walking out of the hospital with our baby and saying, 'We can do this. This is the best day of our lives.' That's transformation. That's hope."

And, for sure, that's love. 🍷



To learn more about supporting the NICU at Providence Saint John's Health Center, contact Meghan Chereck at 310-829-8394 or meghan.chereck@stjohns.org.

Watch *Breathe: Gabriel's Story* at youtube.com/watch?v=YMExjATMo9c

All in a Day's Work

Dr. Byron Vreeland doesn't waste a minute in making the most of life.

BY SHARI ROAN / PHOTOGRAPHED BY MATTHEW SMITH

On a typical day, retired dentist Byron Vreeland, DDS, can be found somewhere on his sprawling compound in the Beverly Glen Canyon, clearing brush, chopping wood or shoring up hillsides. At 85, he hasn't slowed down a bit, preferring to walk his beloved land or aim his bulldozer up a dirt road.

In quieter moments at home, however, he has begun to prepare his estate for the end of his life, noting that it's the responsible thing to do at his age. His careful estate planning includes his recent decision to earmark a gift to the Saint John's Health Center Foundation. Dr. Vreeland has specified in his estate plans that the gift should benefit the emergency department at Providence Saint John's Health Center.

"I've been taken to that emergency department a couple of times," Dr. Vreeland says with a chuckle. "Saint John's is a great hospital. I was never married and didn't have children. I want to leave what I have to where it will make the most difference. There is nothing more important than a community's hospital."

Dr. Vreeland's gift to the emergency department will benefit patients for many years to come, says Russ Kino, MD, medical director of emergency services and chief medical informatics officer at Saint John's.

"We in the emergency department are so grateful to this remarkable man," Dr. Kino says. "It's a fitting and wonderful legacy that matches his exceptional life story, which I have been so privileged to know through a friendship that I have been blessed to share with him. His humble, understated,

principled and humorous approach to life belies his adventurous and fearless spirit that has culminated in exceptional personal and professional achievements."

Such philanthropy, Dr. Kino adds, "allows us to go above and beyond to deliver exceptional care so that we don't just meet the goals for safety, quality and patient satisfaction but surpass them for our patients' benefit."

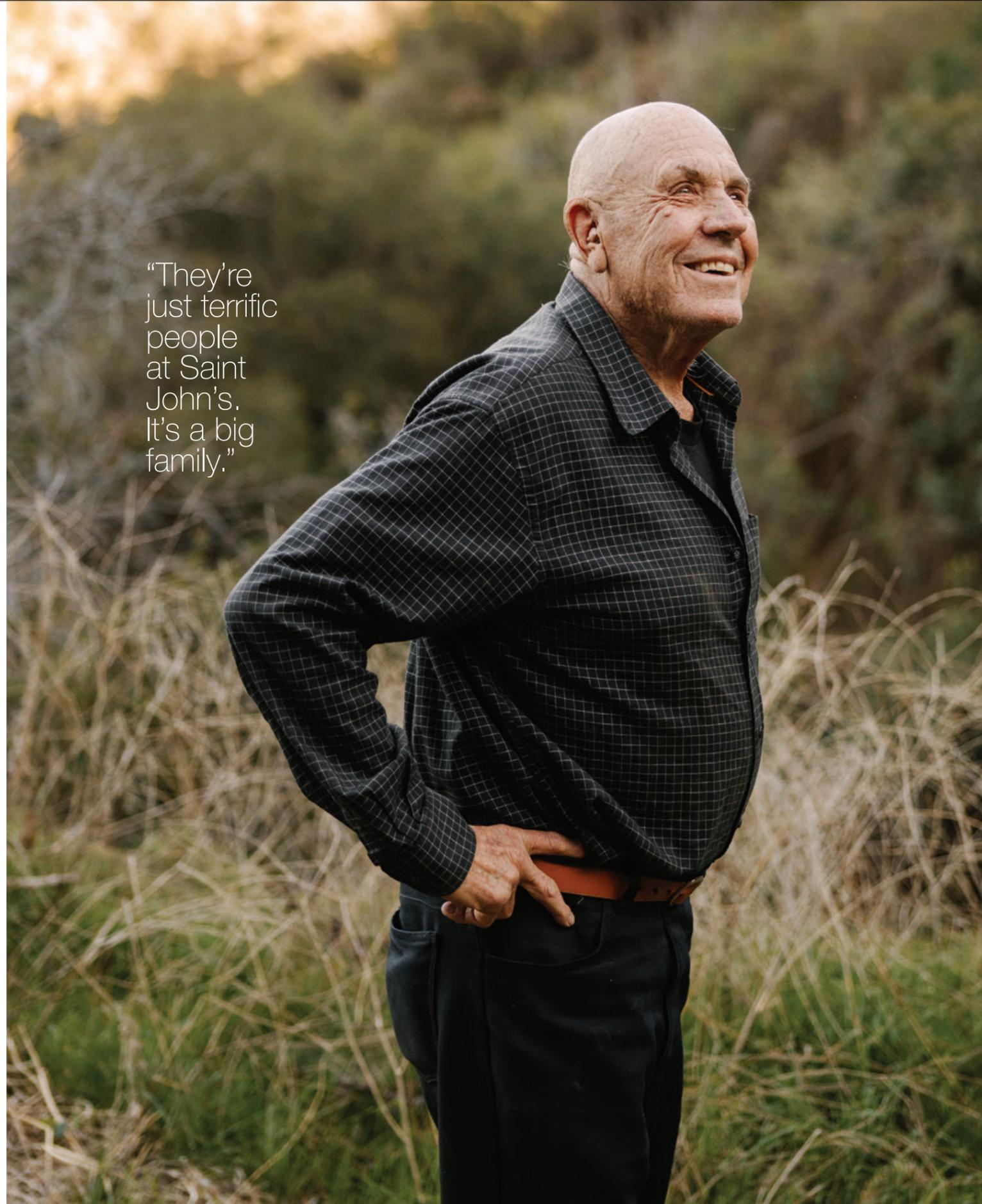
Dr. Vreeland's rich and full life has given him a unique perspective on the joy of helping others. He was born at the old Santa Monica Hospital and grew up on the Westside. When he was 14, he learned blacksmithing in his uncle's shop. Two years later, his father, who was studio chief at Hal Roach Studios, gave him a job building set construction.

Dr. Vreeland worked at the studio for 12 years while attending UCLA followed by the University of Southern California School of Dentistry. He established a dental practice in Beverly Hills—closing his practice for a few years after he was drafted into the Army during the Vietnam War.

"My dad got me into a studio to work in carpentry," he says. "I loved working with my hands. Dentistry is a version of that. I always enjoyed helping people out. They were so grateful when I did something to change their life."

After completing military service, he returned to dentistry part-time and also entered the home construction business. His love of unique architecture led to interests in stained glass windows, leaded glass lamps and, later, bohemian pottery.

"They're just terrific people at Saint John's. It's a big family."



THE GRACE OF LEGACY GIVING

Legacy gifts, such as bequests, are made through charitable estate planning and can have significant tax advantages for you and your heirs. There are many additional reasons to consider a legacy gift:

- Charitable bequests are viewed as one of the most meaningful expressions of gratitude for care received.
- It allows you to leave a legacy in an area that may be close to your heart.
- You may be able to make an impact greater than you thought possible.
- Legacy donors may be eligible for special recognition and amenities.

Our experienced staff can work confidentially with you and your financial advisors to help ensure your charitable wishes are fulfilled. Please contact Andy Trilling, vice president of principal gifts, at 310-449-5246 or Andrew.Trilling@stjohns.org

"The first Tiffany lamp I bought was very expensive, and I wondered if I really could afford it. This was way back in the '60s," he recalls. "But the seller told me that these lamps are a constant source of pleasure. That is the truth of the matter."

Dr. Vreeland, who also is a concert-level pianist who learned the instrument from his mother beginning at age 4, ultimately became an art collector and an associate at United Arts and Antiques in Beverly Hills, owned by Don O'Neill. The gallery was a major importer of art nouveau objects. Dr. Vreeland eventually joined another Beverly Hills gallery.

Today, he is in the process of



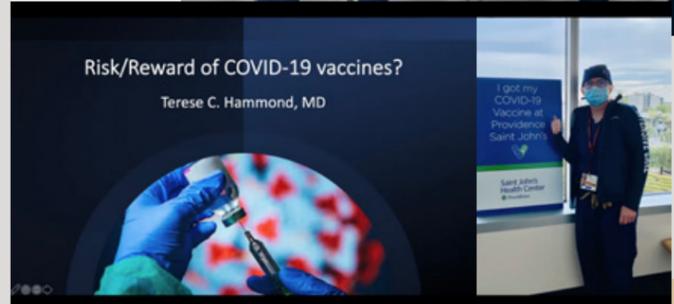
liquidating his personal collection to organize and plan his estate. It's a labor of love. Philanthropy brings him great satisfaction, Dr. Vreeland says.

"I'm so happy to do it," he says. "I've met with Dr. Kino a couple of times, and they are so grateful for the gift. They're just terrific people at Saint John's. It's a big family."

The emergency room family at Saint John's will use the gift thoughtfully and with patient care and comfort foremost in mind, says Andy Trilling, vice president of legacy and principal gifts at Saint John's Health Center Foundation.

"The gift is a powerful testament to the great care Dr. Kino and the entire Saint John's team give their patients," he says. "We are truly grateful to Dr. Vreeland for his visionary philanthropy and for sharing his future estate plans with us. We appreciate knowing of Dr. Vreeland's wishes to support the incredible work of the emergency department in advance, which enables Saint John's to plan strategically for the future and to recognize his generosity during his lifetime." 

Visit our webinars online at saintjohnsfoundation.org/our-webinars



While we eagerly await holding in-person gatherings in the future, Saint John's Health Center Foundation has continued its series of educational webinars into 2021. Recent webinars covered such topics as colorectal cancer incidence and screening, COVID-19, male health at midlife and a webinar on the strategic vision at Saint John's hosted by chief executive Michael Ricks. Thank you to the speakers and webinar participants for keeping in touch with us during this challenging time.

SAINT JOHN'S HEALTH CENTER FOUNDATION BOARD OF TRUSTEES

- | | | |
|------------------------------|---------------------------|---------------------------|
| Mary H. Flaherty, Chair | Tonian Hohberg | Stanley Trilling |
| Robert Amonic, MD, Secretary | Mark C. Holscher | Donna F. Tuttle |
| Craig C. Benell, Treasurer | John G. Huarte | Bennet Van de Bunt |
| Charles F. Adams | Stanley Iezman | Roger Wacker |
| William S. Anderson | Steaven K. Jones Jr. | Patrick J. Wayne |
| Robert L. Antin | Paul R. Kanin | Brian M. Webber |
| William M. Apfelbaum | Mary Ellen Kanoff | Edward White |
| Rae W. Archibald, PhD | Jordan L. Kaplan | Shannon M. Wickstrom |
| Margot S. Armbruster | Russ Kino, MD | Gretchen A. Willison |
| J. Jeffrey Assaf | Kathleen McCarthy Kostlan | Michael E. Wise |
| Lee A. Ault III | Bernadette Leiweke | Brett G. Wyard |
| Donnalisa Parks Barnum | Bob Levitt | |
| Ambassador Frank E. Baxter | Judith D. Licklider | LIFE |
| Rudolph A. Bedford, MD | Robert J. Lowe | Sister Maureen Craig, SCL |
| James P. Birdwell Jr. | Carl W. McKinzie | Robert A. Day |
| Norris J. Bishton Jr. | Bruce A. Meyer | Richard M. Ferry |
| Eric Borstein | Carolyn B. Minchin | Ambassador Glen Holden |
| Abbott L. Brown | Peter W. Mullin | Robert J. Wagner |
| Jules Buenabenta | Paul D. Natterson, MD | |
| Charles G. Cale | Lee S. Neibart | EMERITUS |
| Rick J. Caruso | Lisa D. Nesbitt | Waldo H. Burnside |
| Alex M. Chaves | Chris Newman | Robert T. Campion † |
| Jonathan R. Cole, MD | Shelby Notkin | A. Redmond Doms † |
| Jonathan L. Congdon | Dominic J. Ornat | J. Howard Edgerton † |
| Cynthia S. Connolly | Peter C.D. Pelikan, MD | Jerry B. Epstein † |
| Richard F. Corlin, MD | Putter Pence | James L. Hesburgh |
| Angela Courtin | Jill Posnick | Mrs. Earle M. Jorgensen † |
| Marian H. Craver | Dallas P. Price-Van Breda | Glen McDaniel † |
| Michael W. Croft | Ernie L. Prudente, MD | Ruben F. Mettler, PhD † |
| Richard R. Crowell | Justin E. Rawlins | John H. Michel † |
| Kathy Danhaki | John M. Robertson, MD | Sister Marie Madeleine |
| George H. Davis Jr. | Jeanne D. Robinson | Shonka, SCL |
| Mary Y. Davis | William P. Rutledge | Flora L. Thornton † |
| Kevin Ehrhart, MD | Daniel S. Sampson | |
| Marc Ezralow | Theodore H. Schneider | EX-OFFICIO |
| Miles Fisher | Carole Schwartz | Howard Chait, MD |
| Frances R. Flanagan | Donna L. Schweers | Janis Gallo |
| James H. Fordyce | Robert Shuwarger | John F. Goeders |
| Bradford M. Freeman | Laura Siart | Robert O. Klein |
| William M. Garland III | William E. Simon Jr. | Kevin Manemann |
| Risa L. Gertner | Cary Singleton | Michael Ricks |
| Kristin Gibello | Rosa K. Sinnott | |
| Allan B. Goldman | Loraine Sinskey | † deceased |
| Jae Goodman | Michael S. Sitrick | |
| Glenn A. Goriitsky, MD | Charles F. Smith | |
| Thomas F. Grojean | Brent Stratton | |
| Peter V. Haight | Nadine E. Tilley | |
| David L. Ho | James J. Toth II | |
| Marcia Wilson Hobbs | J. David Tracy | |

PACIFIC NEUROSCIENCE INSTITUTE

- | | |
|----------------------------|--|
| PHYSICIANS | ADVANCED PRACTICE PROVIDERS |
| Abbas A. Anwar, MD | Lamia Adelby, MSN, NP-C |
| Garni Barkhoudarian, MD | Jared Chow, PA-Cr |
| David M. Butler, MD | Natasha Cueto, MSN, APN, AGACNP-BC |
| William G. Buxton, MD | Mason Devon, PA-C |
| Jose Carrillo, MD | Steven Dillavou, PA-C |
| Natalie Diaz, MD | Olivia Doyle, PA-C |
| Barbara Giesser, MD | Amy Eisenberg, MSN, ARNP, CNRN |
| Shanthi Gowrinathan, MD | Mihae Kim, AGNP-BC |
| Chester F. Griffiths, MD | Susan Koh, RN, BSN |
| Jian Guan, MD | Jennifer Kulesza, PA-C |
| Keith Heinzerling, MD | Evie Landa, MPH, MSHS, PA-C |
| Samuel Hou, MD, PhD | Theresa Martello, BSN, CCRN |
| Adi Iyer, MD, MS | Minhdan Nguyen, MHS, PA-C |
| Scott A. Kaiser, MD | Renee Ovando, RN, MSN, SCRNP, AGNP |
| Daniel F. Kelly, MD | Lisa Park, MSN, AG ACNP-BC |
| Santosh Kesari, MD, PhD | Amanda Rodriguez, RN |
| Amit Kochhar, MD | Kamila Szweda, RN, MSN, FNP |
| Howard R. Krauss, MD | Giselle Tamula, MSN, PA-C |
| Jean-Philippe Langevin, MD | Judy Truong, PA-C |
| Daniel Lee, MD | Claudia Wong, FNP-BC |
| Jeremy E. Levenson, MD | |
| Neil A. Martin, MD | RESEARCH & CLINICAL TRIALS TEAM |
| Omid Mehdizadeh, MD | Ashley Archer |
| David A. Merrill, MD, PhD | Annamarie Allnut |
| Chipp S. Miller, MD | Jennifer Bramen, PhD |
| Stella Panos, PhD | Aarthi Ganapathi |
| Melita Petrossian, MD | Ryan Glatt, FAFS, BSc |
| Verna R. Porter, MD | Mini Gill, RN, BSN |
| Christopher Putman, MD | Annie Heng, RN, BSN |
| Akanksha Sharma, MD | Jack Hodes |
| Walavan Sivakumar, MD | Tiffany Juarez, PhD |
| Jason W. Tarpley, MD, PhD | DeLisa Madere |
| George P. Teitelbaum, MD | Sarah McEwen, PhD |
| Naveed Wagle, MD | Raffi Nersesian |
| | Natsuko Nomura |
| | Elmar Nurmemmedov, PhD, MBA |
| | Yueqin Quan |
| | Kyron Pierce |
| | Molly Rapozo, MS, RDN, CD |
| | Marlon Saria, PhD, RN |
| | Colby Slyapich |
| | Gacia Tachejian, MSW |
| | Alexandre Wojcinski, PhD |

**SJCI
FACULTY LIST**

INSTITUTE FACULTY

- Ronnie Abraham**
Assistant Professor
- Warren Allen, MD**
Associate Professor of Pathology
- Katherine Araque, MD**
Assistant Professor, Translational Neurosciences & Neurotherapeutics
- Garni Barkhoudarian, MD**
Associate Professor of Neurosurgery, Department of Translational Neurosciences and Neurotherapeutics; Director of Skull Base Microdissection Anatomy Laboratory
- Anton J. Bilchik, MD, PhD**
Professor of Surgical Oncology; Director of Gastrointestinal Research Program
- Matias Bustos, MD, PhD**
Assistant Professor
- William Buxton, MD**
Associate Professor of Neurosciences, Department of Translational Neurosciences and Neurotherapeutics
- Jose Carrillo, MD**
Associate Professor of Neurosciences, Department of Translational Neurosciences and Neurotherapeutics
- Lisa M. Chaiken, MD**
Assistant Professor of Radiation Oncology
- Yingduan Cheng, MD, PhD**
Instructor, Translational Molecular Medicine
- Rebecca Crane-Okada, PhD, RN, CNS, AOCN**
Professor of Oncology; Director of Breast Cancer Navigation Program, Margie Petersen Breast Center
- Natalie Diaz, MD**
Neurology, Pacific Movement Disorders Center
- Richard Essner, MD**
Professor of Surgical Oncology; Director of Surgical Oncology; Co-Director of Melanoma and Cutaneous Oncology Research Program
- Crystal E. Fancher, MD**
Assistant Professor, Breast Surgical Oncologist
- Trevan Fischer, MD**
Assistant Professor of Surgical Oncology; Assistant Director of Complex General Surgical Oncology Fellowship
- Leland J. Foshag, MD**
Professor of Surgical Oncology; Director of Complex General Surgical Oncology Fellowship
- Richard Frieder, MD**
Assistant Professor of Genetics
- Simon Gabriel, MD**
Assistant Professor of Radiology
- Barbara Giesser**
Adjunct Assistant Professor
- Melanie Goldfarb, MD**
Associate Professor of Surgical Oncology; Director of Center for Endocrine Tumors and Disorders; Director of Cancer Survivorship
- Ora Gordon, MD, MS**
Professor of Genetics
- Chester Griffiths, MD**
Professor of Neurosurgery, Department of Translational Neurosciences and Neurotherapeutics
- Janie Grumley, MD**
Associate Professor of Surgical Oncology; Director of Comprehensive Breast Program, Margie Petersen Breast Center
- Dave S.B. Hoon, MSc, PhD**
Professor & Director of Translational Molecular Medicine; Director of Genomic Sequencing Center
- Daniel Kelly, MD**
Professor of Neurosurgery, Department of Translational Neurosciences and Neurotherapeutics; Director of Brain Tumor Center and Pituitary Disorders Program
- Mark J. Kelly, MD**
Assistant Professor of Urologic Oncology
- Santosh Kesari, MD, PhD**
Professor of Neurosciences and Chair, Department of Translational Neurosciences and Neurotherapeutics

- David Krasne, MD**
Professor of Pathology
- Scott Layne, MD**
Professor, Infectious Disease Medicine
- Jennifer Linehan, MD**
Associate Professor of Urology; Director of Urology Translational Research
- Brian Madden, MD**
Adjunct Professor of Medicine
- Diego M. Marzese, PhD**
Assistant Professor of Translational Molecular Medicine
- Sarah McEwen, PhD**
Associate Professor of Neurosciences, Department of Translational Neurosciences and Neurotherapeutics
- Robert J. McKenna Jr., MD**
Professor and Chair of Thoracic Oncology
- David Merrill, MD**
Associate Professor of Neurosciences, Department of Translational Neurosciences and Neurotherapeutics
- Mehran Movassaghi, MD, MBA**
Assistant Professor of Urologic Oncology
- Elmar Nurmemedov, PhD**
Assistant Professor of Neurosciences, Department of Translational Neurosciences and Neurotherapeutics
- Osita Onugha, MD**
Assistant Professor of Thoracic Surgery
- Verna Porter, MD**
Professor of Neurosciences, Department of Translational Neurosciences and Neurotherapeutics
- Marlon G. Saria, RN, PhD**
Assistant Professor of Neurosciences, Department of Translational Neurosciences and Neurotherapeutics
- Frederick Singer, MD**
Professor of Endocrinology; Director of Endocrinology & Bone Disease Program
- Walavan Sivakumar, MD**
Assistant Professor of Neurosurgery, Department of Translational Neurosciences and Neurotherapeutics
- Ira Smalberg, MD**
RAssociate Professor of Radiology
- Jason Tarpley, MD**
Assistant Professor, Translational Neurosciences & Neurotherapeutics
- Przemyslaw W. Twardowski, MD**
Professor of Medical Oncology and Urologic Oncology; Director of Clinical Research, Urology and Urologic Oncology
- Steven Vasilev, MD**
Professor of Gynecologic Oncology; Medical Director of Integrative Gynecologic Oncology
- Timothy Wilson, MD**
Professor and Chair of Urology; Director of Urologic Oncology Research Program
- Robert Wollman, MD**
Adjunct Professor of Radiation Oncology
- Venkata M. Yenugonda, PhD**
Associate Professor of Neurosciences, Department of Translational Neurosciences and Neurotherapeutics; Director of Drug Discovery and Nanomedicine Research Program



When serious illness impacted Jean L. Gilbert, Providence Saint John's Health Center and Saint John's Cancer Institute made the experience easier. Jean L. Gilbert and her loved ones never forgot.



We will never forget the impactful gift of the Jean L. Gilbert Trust in support of the Power of Partnership campaign. When you give a gift to Saint John's Health Center Foundation, you can help ease the way of patients suffering from cancer and other serious diseases. Your essential support enables us to continue to serve you, your family and the local community we all love.



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



Saint John's

Health Center Foundation

2121 Santa Monica Boulevard
Santa Monica, CA 90404 USA
310-829-8424

SaintJohnsFoundation.org



NONPROFIT
ORGANIZATION
U.S. POSTAGE

PAID

LOS ANGELES, CA
PERMIT NO. 31327



- PAGE 12 -

Hooray for Hospitalists | A growing medical specialty focuses on the care and needs of inpatients.



- PAGE 36 -

The Artist and the Baby | A filmmaker documents his child's premature birth and NICU stay at Saint John's.

Substances like psilocybin “can be a tool for a patient who wants to change and understand themselves better, even when it’s a hard process.”

—KEITH HEINZERLING, MD

Marvelous
Medicinal Mushrooms

- PAGE 16 -

