

SAINT JOHN'S

THE MAGAZINE OF SAINT JOHN'S HEALTH CENTER FOUNDATION

Fall/Winter 2022

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» Medical innovations save lives in ways unimaginable 80 years ago. On our 80th anniversary, Providence Saint John's Health Center reflects on our progress and renews our commitment to innovation. In this issue, we highlight extraordinary advances restoring health for members of our community.

Beauty, health and wellness expert Kym Douglas regularly shares advice on television and practices healthy habits, so a diagnosis of breast cancer was disconcerting. Douglas recounts how Saint John's doctors teamed up to perform breast reconstruction at the same time of mastectomy and provided emotional care when a new crisis occurred (page 10).

Developing personalized, precision treatments for brain tumors and neurological disorders is the lifework of Santosh Kesari, MD, PhD. His work as a physician and scientist at Saint John's inspired a \$1 million gift by the Fritz B. Burns Foundation. Discover how this transformative donation enhances efforts to treat brain cancer (page 16).

Young and athletic, Elias Riskin isn't the typical heart patient. With both atrial and ventricular fibrillation, Riskin credits his doctors, Shephal K. Doshi, MD, and Peter Pak, MD, for his advanced, well-rounded medical care as well as Saint John's for acquiring specialized equipment to treat his condition. On page 20, see how philanthropy supports new equipment acquisition and development of novel techniques to save lives.

Pioneering surgical oncology played a role in Leland Smith's treatment and recovery from bladder cancer. On page 32, track his arduous journey from first symptoms to his 18-month remission. Understand why Smith says, "I was sustained by family, friends and faith. But I was healed by the urologic oncology team at Saint John's."

Two decades ago, Saint John's launched Angels of the ER, one of the first programs in America that trains volunteers to assist patients, families and medical teams in the ER. After two years away due to COVID-19, the much-missed Angels are back providing exceptional, compassionate care (page 28).

When we think of medical innovations, thoughts turn to new procedures and medications for diagnosing and treating conditions. However, Saint John's knows that human compassion is a game changer for outcomes too. As you consider giving back this holiday season, we promise that gifts to Saint John's provide much-needed support for novel research and treatments for patients' overall quality of life, healing body, mind and spirit.

ROBERT O. KLEIN

President and CEO, Saint John's Health Center Foundation

MICHAEL RICKS

Chief Executive, Providence Saint John's Health Center,
Saint John's Cancer Institute

ROGER WACKER

Chair, Saint John's Health Center Foundation Board of Trustees



L to R: Robert Klein, Michael Ricks, Roger Wacker





STROKE GOLD PLUS

For the third year in a row, Providence Saint John's Health Center has received the American Heart Association's *GoldPlus* Get With The Guidelines® – Stroke quality achievement award for their commitment to ensuring stroke patients receive the most appropriate treatment according to nationally recognized, research-based guidelines—ultimately leading to more lives saved and reduced disability.

» **STROKE IS THE NO. 5 CAUSE OF DEATH AND A LEADING CAUSE OF DISABILITY IN THE U.S.**

“Get With The Guidelines makes it easier for our teams to put proven knowledge and guidelines to work on a daily basis, which studies show can help patients recover better.”

—Jason Tarpley, MD, PhD, director of Pacific Neuroscience Institute's Stroke & Neurovascular Center

» Remember this mnemonic to help you identify which parts of the body can be involved in stroke and to seek help quickly:

BE FAST



Balance



Eyes



Face



Arm or leg



Speech



Time

» ABOUT THAT VACCINE CARD

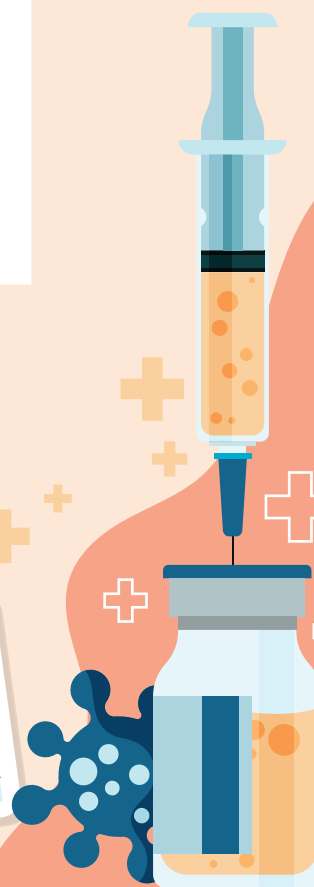
The federal government recently approved bivalent COVID-19 booster shots from Moderna and Pfizer. The bivalent booster protects you against the most common new variants of the virus. If you've already received the initial two-dose COVID-19 vaccine and two boosters, you'll probably need to ask for a new vaccine card to add information on the bivalent booster. Take photos of both of your COVID-19 vaccine cards on a smart phone for easier storage.

BEFORE GETTING THE BIVALENT BOOSTER:

- Wait at least two months after having your last dose of any COVID-19 vaccine.
- Wait at least three months after having COVID-19.

NEED HELP FINDING A COVID 19 VACCINE?

CALL 800-232-0233 OR
GO TO [VACCINES.GOV](https://www.vaccines.gov).





» WELCOMING SCOTT M. KLEIN TO THE BOARD OF TRUSTEES

Scott M. Klein has joined the Saint John's Health Center Foundation board of trustees. Klein is the founder, co-chairman and co-CEO of Beach Point Capital Management. He has more than 25 years of experience in public and private credit markets, investing in high-yield and distressed debt and managing alternative investment portfolios. Prior to founding Beach Point, Klein co-led the multibillion-dollar alternative credit business at Post Advisory Group and worked as a bankruptcy attorney. He graduated magna cum laude from the Wharton School of the University of Pennsylvania and received a law degree from UCLA Law School where he served on the Law Review.

Klein serves on the board of governors of Cedars Sinai Hospital, the board of trustees of Brentwood School and the advisory boards of UCLA Law School and the Lowell Milken Institute for Business Law and Policy. He resides in Brentwood with his wife, Melissa, and children, Catherine and Ethan.

» HOSPITAL VOLUNTEERISM IS BACK

Providence Saint John's Health Center has relaunched its hospital volunteer program after a two-year hiatus due to COVID-19.

SEE OUR STORY ON PAGE 24 ABOUT ONE OF VOLUNTEER PROGRAMS.



275

Number of active volunteers at Saint John's pre-COVID-19

80%

U.S. hospitals that use volunteers



7.3%

Ratio of volunteers in the United States who work in health care

Sources: American Hospital Association; Bureau of Labor Statistics

Q & A

A Focus on Joints

An outstanding orthopedic service just keeps getting better.

BY LAUREL DIGANGI AND SHARI ROAN

Providence Saint John's Health Center is privileged to offer patients top-rated orthopedic services. Kevin M. Ehrhart, MD, has expertise in joint replacement surgery and open-shoulder surgery. During his many years at Saint John's, he has held several active leadership positions including chief of staff, chair of the surgery department and a member of the board of directors. Andrew Yun, MD, is medical director of the Joint Replacement Program at Saint John's. He is a nationally recognized expert in hip and knee joint replacement, specializing in anterior hip approach, minimally invasive total knee and robotic partial knee surgeries. We asked these two esteemed orthopedic surgeons to describe their philosophy of care and what's new in their clinics.

When should people seek the advice of an orthopedic doctor if they're dealing with pain, stiffness or lack of mobility?

Dr. Ehrhart: That's really hard to answer because the biggest variable is people's mindset. But if you're having increasing pain or it's getting more uncomfortable to walk, you need to see a doctor.

Dr. Yun: I think patients present when they are ready for a diagnosis or treatment. It's appropriate for many patients to wait and see if pain goes away. Arthritis is upsetting and frustrating for some people. Many people are not ready to face that diagnosis.

But arthritis is rarely, if ever, an emergency. It never becomes unfixable. A window of opportunity for correction is always available.

Are joint replacement surgeries increasing? If so, why?

Dr. Ehrhart: In 2012, there were 650,000 total hips and knees done in the U.S. Experts predict that by 2027, there will be 4.2 million—that's a sixfold increase. There are many reasons why. The population is growing and aging. Furthermore, people don't accept getting old and not being physically active.

Are patients seeking joint replacement surgery at younger ages?

Dr. Yun: The average age for joint replacement has decreased over the past 10 to 15 years. I think that's because younger patients are now more comfortable with the idea of treatment than they had been historically. The implants themselves have improved dramatically in durability.

What are some of the most recent innovations in your field?

Dr. Yun: There are three main advances:

1. Improvement in technology. Artificial intelligence, computers and robotics are technologies that assist in the precision and accuracy of surgery.
2. There is a shift toward shorter length of stay in the hospital and same-day surgery.
3. There is a shift away from narcotics in the postoperative period—in some cases, even an elimination of narcotics in the postoperative period. However, pain control is very individualized.

Dr. Ehrhart: Anesthesiologists are very involved doing nerve blocks to help with the postoperative pain. We use injectable medications that last 24 to 36 hours. We also use a whole cocktail of three or four postoperative medications that can really lower the use of opioids. But the most beneficial and innovative change I've seen in my 44 years at Saint John's is robotic surgery. It's a game changer. It just makes the precision so much more accurate.

What makes the Center for Hip & Knee Replacement at Saint John's unique?

Dr. Ehrhart: Saint John's provides overall excellent patient care. And for joint replacement, the busiest doctor in the country is probably Dr. Andrew Yun, our medical director. And he's a very good surgeon. There is much truth to the adage that someone who's done something far more often is going to do it better than someone who does it once in a while.

Dr. Yun: We are here to help and support people. We have a core team of health care providers who have worked together for 17 years and have taken care of more than 12,000 patients. It's the highest level of safety and quality. Surgery is an inherently risky life event. But surgery with an experienced team and in an experienced institution increases dramatically the probability of a favorable outcome. 📞

To support orthopedic services at Providence Saint John's Health Center, contact Jeanne Goldsmith at 310-582-7344 or jeanne.goldsmith@stjohns.org.

2012
650,000
2027
4.2 million
total hips
and knees

AVERAGE AGE FOR
Hip
replacement
65

AVERAGE AGE FOR
Knee
replacement
66



WARRIOR WOMAN





KYM DOUGLAS PUT ON A HAPPY FACE BEFORE THE TV CAMERAS AND FOUGHT CANCER BEHIND THE SCENES.

BY SHARI ROAN / PHOTOGRAPHED BY PHILLIP GRAYBILL

Life was good for Kym Douglas, and good meant busy. The longtime journalist and TV personality covered health and wellness for *The Ellen DeGeneres Show* and appeared on other shows and infomercials. Always healthy and energetic, she didn't worry about postponing her mammogram year after year.

"I was about three years late for my mammogram," says Douglas, 63. "I was so busy, busy, busy that I couldn't get my mammogram. I drink green juices. I don't eat meat. I don't smoke. I had done almost everything right."

Cancer was not in the cards, she thought.

Today, Douglas is wiser and more experienced about the vicissitudes of life. She is also the proud survivor of stage 3 breast cancer and a big fan of the Providence Saint John's Health Center team that treated her and got her through a stunning and

transformative time in her life. While Douglas looks back with some regret that she didn't get her regular mammograms on schedule, she says she made the right choice when she selected Saint John's for her care.

"The place you select for care is important, and Saint John's provided me with so much grace and kindness," Douglas says. "When you feel you've lost all control, you need to have people around you who make you feel secure. They inspired confidence."

Douglas' journey into the bewildering world of cancer began in April 2018 when she scheduled that long-delayed mammogram. Even then, Douglas says, she felt impatient about having to make time for the exam. When her gynecologist, Sheryl A. Ross, MD, asked Douglas to return for another, more specific test, Douglas thought, "This is a false alarm. This is really annoying."

But it wasn't a false alarm. Dr. Ross scheduled Douglas for a biopsy after the second imaging test also revealed suspicious findings. Within a few days, Douglas had a diagnosis: ductal carcinoma in situ (DCIS). DCIS is a very early-stage type of breast cancer that is sometimes called stage 0, and it's highly curable. Since the cancerous cells seemed to be scattered throughout her breast, however, Douglas would need a mastectomy. She also decided to have the other, healthy breast removed.

"I really prayed about it and talked to my son and husband about it," she says. "For some reason, during my prayer time, I just kept thinking, 'Go ahead and take both breasts.' Everyone said, 'You have stage 0. What are you doing? Why?' I thought, 'I'll get the surgery, and then I'll never have to think about it again.'"

A NEW DIAGNOSIS

The surgery took place in April 2018. Douglas chose the surgeon, Alice Chung, MD, and the reconstructive surgeon, Tiffany Grunwald, MD, to perform the simultaneous mastectomy and breast reconstruction. Everyone felt good about the plan, Douglas recalls.

"The doctors said, 'Kym, you're healthy and in great shape. Everything is going to be fine. We'll be in and out. Don't worry about a thing,'" she says. "Everything went well. I felt the worst was over. I took care of this, and we'll move forward."

"The place you select for care is important, and Saint John's provided me with so much grace and kindness."

A week later, Douglas and her husband, Jerry Douglas (an actor who died in November 2021), met the doctors for a follow-up of the tests that examined the lymph nodes and tissue margins. The news was devastating. Toward the end of the surgery, Dr. Chung and Dr. Grunwald had found three larger tumors lodged in her chest wall. These tumors were not visible on any of the imaging tests prior to surgery. The diagnosis was now stage 3 breast cancer.

"Jerry was crying; I was crying," Douglas recalls. "I was thinking, 'How do I have three tumors?'"

It's rare to see an initial breast cancer diagnosis go from stage 0 to stage 3, but surgery sometimes reveals more extensive disease, says Dr. Grunwald,

"It's one of those things where people think, 'it's DCIS I don't have to worry about it.' But we take every case seriously," says Dr. Grunwald, a board-certified plastic surgeon who is division chief of plastic and reconstructive surgery at Saint John's and executive medical director of the Women's Health and Wellness Institute.

Douglas immediately began treatment to halt any recurrence of the cancer. Her treatment regimen included 18-1/2 weeks of chemotherapy and 8-1/2 weeks of radiation. Douglas, ever the stalwart professional, continued with her TV appearances during chemo and radiation, leaving Saint John's after a treatment and driving to the studios in Burbank. She lost her long, blond hair, and her skin became dull.

"I'm a beauty, wellness and health expert on high-definition TV every day," Douglas says. "I went from Ms. Sunshine to Ms. Nightmare! I was green. I was bald. I had no eyelashes and no eyebrows. I thought, 'My life is over.' Up to that point, I had a pretty charmed life. When this hit it was like: wow."

She calls the period "the darkest time in my fight to stay alive." One morning she walked down a brick path on her property to a small ravine behind her home feeling despair, tears sliding down her cheeks. The path abruptly ended. "It was the perfect metaphor for what I was feeling. I had nowhere left to go," she recalls.

She bargained with God, asking for a sign—a bird or butterfly or a falling leaf—that she would be OK. Nothing. She turned to walk home, defeated, when she realized she was standing squarely on the flattened stump of a large oak tree that had been cut down long ago. She had her sign. The base of the oak tree on which she stood was a symbol of foundations—the things in life that provide support and gird us through tough times.

"A jolt went through my body as if to say, 'I have been



Kym Douglas relied on faith, a positive outlook and the support of family, friends and her health care team to overcome a battle with cancer.

holding you all along, and my strength is there and so is yours,” Douglas says. “It’s our foundations that give us our strength and purpose and power to carry on. I still go down to my stump every morning. It’s my place of refuge and prayer. I encourage everyone to find a place they can go to get recharged.”

With Jerry and her son, Hunter, by her side, Douglas fought her way through the months of treatment. Girlfriends accompanied her to chemotherapy sessions. They would spend the time talking about anything but cancer and negative emotions.

Dr. Grunwald says she is always impressed by the fight her patients demonstrate to themselves and to the outside world. Douglas personified that courage.

“It’s a tremendous part of why I love what I do,” she says. “At the beginning, these patients are like a deer in the headlights. They have a horrible diagnosis. They think their life is going to change forever. And little by little, you see them rise to the occasion. They say,

‘I’m doing chemo, and then I’m going to work.’ It’s a tremendous transformation to see and be a part of it. It lifts me up every day to see the indomitable spirit of these warrior women.”

At the TV studios, Douglas also found strength and support. But her own determination kept her in front of the camera.

“A makeup artist drew on eyebrows and glued on false lashes and slathered me in makeup,” she recalls. “I wore a wig and a big, loose sweater because my skin was raw from the radiation. I stuffed cabbage leaves in my bra to keep the fabric from rubbing on my sore skin. And I went before the cameras and am talking about how to be healthy and beautiful and amazing. I wasn’t going to let cancer steal my positive attitude.”

The position of the tumors meant that Douglas needed to receive a maximum dose of radiation, and the radiation caused an extreme skin reaction, says Lisa Chaiken, MD, a board-certified radiation



For more information on supporting the Women's Health & Wellness Institute, contact Meghan Chereck at 310-829-8394 or meghan.chereck@stjohns.org.

oncologist at Saint John's who treated Douglas.

"Kym was amazing. She just ploughed through it," Dr. Chaiken says. "She came in with the most positive attitude. Whether it was chemo or radiation, she found a way to deal with it."

EMPATHY AND APPRECIATION

On the day of her last radiation treatment, Douglas recorded a video message on Instagram as she walked to her car in the Saint John's parking lot.

"I said, 'It's my last day of radiation, and I'm done. I thank this hospital and the good Lord. Now I start my healing,'" she recalls. "I'm so thankful to my doctors. Dr. Chaiken is the most amazing radiation oncologist. I got through this due to all the good people at Saint John's."

The Saint John's breast cancer team works hard at their own communication, organization and friendship so that they can offer seamless, gentle care to their patients, Dr. Grunwald says.

"The comprehensive, coordinated care isn't as unique in breast cancer centers, but the little family that we have here is unique," she explains. "We have each other's cell phone numbers. We talk to each other. The physicians

are family and friends, and that has a tremendous impact on patient care. Our whole goal is to ease our patients' way."

Dr. Chaiken concurs that Saint John's fosters a uniquely caring atmosphere for its patients.

"We have the same state-of-the-art care and advanced technology as any major cancer institute," she says. "But we treat patients with tender, loving care. From people who actually answer the phones to messages that don't get lost to patients who text me. We're available all the time. We're very hands-on. It gives people a little more sense of control."

Today, cancer-free, Douglas sees life through a different lens. She's still an in-demand TV personality and plenty busy—but not too rushed to enjoy and take stock of her life. She is hosting a new podcast sponsored by Saint John's Health Center Foundation, entitled "Your Healthy Dose with Kym Douglas." She has written about her cancer experience and has shared it with viewers.

"I needed to turn my pain into purpose," she says. "I changed my priorities drastically. I looked for a new, deeper, richer and more meaningful path in

IMMEDIATE BENEFIT FROM BREAST RECONSTRUCTION SURGERY

The breast health experts at Providence Saint John's Health Center consider more than just curing cancer. They are leading experts in helping their patients find satisfying aesthetic solutions related to breast surgery.

For women undergoing mastectomy, that often means choosing to have breast reconstruction done at the time of the mastectomy, says Tiffany Grunwald, MD, a board-certified plastic and reconstructive surgeon at Saint John's.

"Some patients don't know this option is possible," says Dr. Grunwald. "In Los Angeles, we do this 95% of the time. But around the country, only 40% of patients are offered immediate reconstruction."

At Saint John's, the team at the Margie Petersen Breast Center, which this year is celebrating its 30th anniversary, work together to meet all of the patient's needs.

"We take the time to rearrange our schedules and take care of the patient together at the same time," Dr. Grunwald says.

In recent years, breast surgeons have developed techniques that dramatically improve the aesthetic results of surgery, she notes. Women who want a breast implant can have that procedure at the same time as surgery to remove the tumor. Another option is autologous fat transfer, during which fat is taken from one area of the body and used to rebuild the breast.

Janie Grumley, MD, director of the Margie Peterson Breast Center, is a leading authority on oncoplasty, a technique to rebuild or reshape the breast during surgery to remove a tumor.

"Cancer surgeons are using these plastic surgery techniques and designing our cancer operations using similar incisions, so we can reshape the breast and not leave the woman with a deformity," Dr. Grumley says.



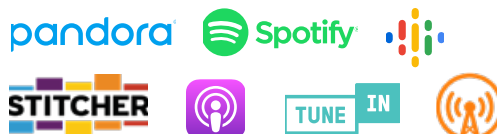
To make an appointment at the Women's Health & Wellness Institute call 833-3FOR-HER

A PODCAST TO KEEP YOU UP TO DATE

Join important conversations about the latest in health care treatments, research and trends. Get to know the physicians, researchers, caregivers, patients, and supporters of Providence Saint John's Health Center and all its institutes so you can make educated health decisions.



AVAILABLE ON THESE PLATFORMS:



my career. I have the privilege to be the host of this wonderful, new podcast that helps people learn about their health and understand all the options, doctors and services available to them through Saint Johns. I have learned so much more about my own health and ways to keep my health a top priority—and our podcast listeners will too. It's been a blessing and a gift."

Her health crisis has given her empathy and a new appreciation for the inner strength she found when her life took a frightening turn. "My illness has given me a deeper purpose," she says. "Now I can empathize with people who are going through things. I can encourage women to take their health seriously. I can encourage people to always maintain a spirit of hope." 🙏

THOUGHTFUL GIVING

A BOARD MEMBER OF FRITZ B. BURNS FOUNDATION STUDIED THE WORK OF DR. SANTOSH KESARI, WHICH LED TO A TRANSFORMATIVE GIFT TO SUPPORT HIS RESEARCH.

BY PATRICK J. KIGER / PHOTOGRAPHED BY MICHAEL NEVEUX

Some philanthropists who support medical research are moved by their own harrowing experience with a disease or perhaps the sadness of losing a family member to it. But Justin Rawlins, who orchestrated a \$1 million gift by the Fritz B. Burns Foundation to fund research on treatments for brain cancer and neurological diseases at Saint John's, didn't have such a personal stake.

Rawlins, a corporate finance attorney from Pacific Palisades who also is a trustee of the Saint John's Health Center Foundation, says he was motivated by the desire to identify cutting-edge research that could generate the most impact for the dollar. He also was influenced by his admiration for Santosh Kesari, MD, PhD, a neurologist and neuro-oncologist who focuses on developing personalized, precision treatments for brain tumors and other cancers.

Those two factors drove Rawlins to spend several years learning about Dr. Kesari's work. He continually passed along information to the Burns Foundation board as part of his proposal that the foundation consider a contribution to Saint John's.







Dr. Santosh Kesari (center) and Saint John's Health Center Foundation president and CEO Robert Klein (far right) receive a donation from the Fritz B. Burns Foundation. The donation was spearheaded by Rex and Maureen Rawlinson and Justin Rawlins, who sit on the board of the Burns Foundation.

"We're trying to make impactful gifts," Rawlins explains. "So if I hear about something that sounds like an interesting advance, I try to look into it."

Rawlins learned about Dr. Kesari's research partly through his participation in the "brain trust," a group of Saint John's Health Center Foundation board members and medical researchers who meet informally, either in person or in virtual videoconferences, to talk about the latest and most promising potential medical advances in treating brain cancer and neurological disorders and what is needed to advance the work to the next level.

Through the brain trust, Rawlins met Dr. Kesari, who is chairman of the Department of Translational Neurosciences at Saint John's Cancer Institute and director of neuro-oncology at the Pacific Neuroscience Institute. Rawlins was impressed by how Dr. Kesari combined the roles of physician and scientist.

"I liked the idea that a lot of what Dr. Kesari is doing is hands-on, real-time research," Rawlins says. "Particularly for something like precision medicine, I think you'll get significantly better feedback."

Dr. Kesari, who has 20 years of experience in his field and is the author of more than 350 scientific publications, reviews and books and holder of several patents, is interested in cancer stem cells, immunotherapy and targeted therapies. The holder of both a medical degree and a doctorate in molecular biology from the University of Pennsylvania, he believes that it's necessary to gain a better molecular and biological understanding of cancer to develop precision strategies for eradicating brain tumors.

"The context of this gift is that we're trying to do personalized medicine for cancer and neurological patients," he explains.

"What we've learned is that what we call broadly the same brain tumor under the microscope is actually very different in each individual patient when you look at the genetic level," Dr. Kesari says. "We're using comprehensive genetic sequencing of the tumor to figure out what the best treatment options are for each patient. It's about having more effective targeted medicines that are better at killing tumors with fewer side effects. If you can pick which patients

are going to benefit the most from each of these drugs, then you're really going to be able to improve the outcomes and reduce the toxicities—and costs—in a big way."

Dr. Kesari said the new funding from the Burns Foundation will enable Saint John's to buy new equipment to facilitate sophisticated studies of tumors at the cellular level. "We can analyze every single cell in the tumor and understand the heterogeneity, the difference from one cell to another which will give new insights into personalized therapies like never before."

The same cellular studies also may be used to analyze non-tumor cells from the blood and spinal fluid of patients with Alzheimer's disease, Parkinson's disease, multiple sclerosis and other types of neurological disorders. "We can better understand what's abnormal in these different patients, which will help us tailor better treatments," Dr. Kesari explains. "The supporting infrastructure that Justin and the foundation are giving us will allow us to do personalized medicine on a broader scale."

The idea of accelerating the development of personalized treatments also appealed to Rawlins, Dr. Kesari recalls. "I think it really triggered him to find a way to help us with this funding, which is really transformational for us. He wanted to help us to move faster, and that's how we resonated with the foundation mission."

Rawlins thought that the work at Saint Johns was a good fit for the Fritz B. Burns Foundation, whose namesake, a noted Los Angeles real estate developer and philanthropist, had teamed with industrialist Henry J. Kaiser to build thousands of homes for returning veterans after World War II. Rawlins' grandfather, Joseph E. Rawlinson, was a business partner and close confidant of Burns and became president of the Burns Foundation a few years after the developer's death in 1979. Today, several members of the Rawlinson family sit on the board, including Rawlins and his parents, Rex and Maureen Rawlinson, who serve as president and vice president.

Instead of immediately proposing a donation, Rawlins spent several years laying the groundwork for a gift big enough to be a game-changer. After explaining Dr. Kesari's work at Saint John's to the board, he periodically updated board members on the progress of the research and its promise. That process eventually won their confidence.

"We're always looking for leadership, so we were impressed by the information Justin gave


"Without humanity, immensely difficult things like innovation in cancer treatment can be overwhelming. But with humanity, the fires never go out."

us about Dr. Kesari's work at Saint John's," explains Rex Rawlinson. "The more familiar we became with the work, the more impressed we were. But most of all we were impressed by the humanity of Dr. Kesari and those around him. Without humanity, immensely difficult things like innovation in cancer treatment can be overwhelming. But with humanity, the fires never go out. Backing the right people is important to us, and we have complete confidence these people are having, and will have, a major impact on cancer treatment."

When Rawlins isn't busy with his legal practice at the firm of Paul Hastings in Century City or spending time with his wife and four children, the Loyola Law School graduate plays golf, a sport that he took up a few years ago to replace his youthful passion for soccer. But he still manages to allocate a little time to following Dr. Kesari's research.

"I don't want to create the impression that I'm helicoptering over things, but definitely, every few months we touch base," he says. "When I'm at the hospital or when he comes to the brain trust meetings, I'll get an update."

Rawlins' dream is for Dr. Kesari and Saint John's to achieve a breakthrough that puts brain cancers into remission or greatly increases the life expectancy of cancer patients. But he says it's also important for philanthropic benefactors to show patience and understand the incremental progress that medical researchers often make. Even being able to slow the progression of brain cancer and give patients several additional years with a good quality of life would represent a significant victory, he says.

To use a baseball analogy, he says: "We'd love to hit a home run, of course. But success is at a singles level." 



For more information about supporting Dr. Kesari's research, contact Mary Byrnes at 310-582-7102 or mary.byrnes@stjohns.org.

THE BODY ELECTRIC



SOPHISTICATED CARE FOCUSES ON THE HEART'S ELECTRICAL SYSTEM.

BY NANCY SOKOLER STEINER / PHOTOGRAPHED BY PHILLIP GRAYBILL

As a 6-foot-8, multisport athlete and former college rower, Elias Riskin did not expect to face heart problems. But at age 20, he was diagnosed with an enlarged and weakening heart. Now 29, he has experienced at least two episodes of atrial fibrillation (irregular heartbeat) severe enough to require the administration of shocks to restore heart rhythm.

Then, in February, Riskin was on the Jurassic World ride at Universal Studios when he went into cardiac arrest. He received CPR and electric shocks to his heart at Universal and was rushed to a nearby hospital. He remained hospitalized for a month, facing multiple issues relating to his heart failure. His perilous condition required him to spend more than two weeks intubated. At one point, he had to wear a vest to shock his heart into function if it faltered.

"It really just felt like a test of endurance," Riskin says. "The hardest times were at night when it would beep and I thought it was about to go off. When I took it off to shower I would hope that nothing went wrong. I didn't sleep or eat much during this time."

Following his discharge after the incident at Universal, Riskin, his friends and family looked for a heart specialist who could oversee his care going forward, preventing these near-death experiences. They chose Shephal K. Doshi, MD, director of cardiac electrophysiology and pacing at Providence Saint John's Health Center and director of cardiac electrophysiology research at the Pacific Heart Institute.

At Saint John's, Riskin was able to find the advanced care and reassurance he needed. "I've seen improvements in my heart health since working with the physicians at Saint John's," says Riskin.

Dr. Doshi specializes in therapies for arrhythmias, irregular or abnormal heart rhythms caused by malfunctions of the heart's electrical system. "Electrophysiologists are the 'electricians' within the practice of cardiology," he explains. "We treat the heart's electrical system. Interventional cardiologists, in contrast, are the 'plumbers,' who treat the blockages in the hearts' network of vessels and arteries."

ADVANCED CARE FOR ATRIAL FIBRILLATION

Atrial fibrillation (A-fib) is the most common type of arrhythmia, says Dr. Doshi, who estimates the condition affects between 5 and 10 million people in the United States. According to the Centers for Disease Control and Prevention, that number will reach 12.1 million cases in 2030. Risk factors for A-fib include advanced age, high blood pressure, family history and smoking.

Some patients with A-fib may notice a racing or fluttering heart, but many have no symptoms. Dr. Doshi urges anyone who experiences irregular feelings in the chest to see their primary care physician or cardiologist.

A-fib increases the risk of stroke as it can cause blood to collect in the heart's upper chambers, forming clots that could potentially travel to the brain. It is associated with an approximately fivefold

To make an
appointment with Saint
John's heart team,
call 844-687-6872.

increased risk of ischemic stroke, according to the CDC. And strokes caused by A-fib tend to be more severe than strokes due to other underlying causes.

For many patients, ablation can successfully treat A-fib. Ablation typically involves burning or freezing small areas of tissue to interrupt the transmission of abnormal electrical signals.

“At Saint Johns, we’re involved in clinical trials looking at additional ways to fix A-fib as well as additional ways to prevent stroke,” says Dr. Doshi. “Currently, we’re pioneering the way ablations are performed through involvement in landmark clinical trials using a novel technology called pulse field ablation. We’re helping determine whether it provides even better results and may allow us to treat older, higher-risk patients.”

Dr. Doshi has also helped pioneer novel ways of preventing stroke through new techniques and devices for left atrial appendage closure. This approach offers new hope for patients who cannot take blood thinners, the standard treatment for stroke prevention.

When A-fib causes blood to pool in the heart and form stroke-threatening clots, they generally develop in an area of the left atrium called the left atrial appendage. The Watchman is a circular device, about the size of a quarter, implanted in the heart to close off the entrance to the left atrial appendage. Resembling a small umbrella, it shelters the area. Soon, skin cells adhere to the Watchman and heart tissue grows over it to form a permanent barrier.

“In addition to being principal investigators for the Watchman device itself, we’re now pioneering a way to perform the procedure without the need for general anesthesia,” says Dr. Doshi. “We did the first commercial case of this in 2020, and the patient was conversing the whole time.”

Like atrial fibrillation, ventricular fibrillation involves an irregular heartbeat caused by disordered electrical activity. Atrial fibrillation takes place in the heart’s left and right upper chambers, the atria, while ventricular fibrillation involves the two lower chambers, the ventricles. Much more serious than A-fib, ventricular fibrillation can cause sudden cardiac arrest and requires immediate attention. Immediate treatment involves CPR, defibrillation and medication, while longer-term care requires a wearable or implantable defibrillator.

AN EXCEPTIONAL CASE

Elias Riskin suffers from both atrial and ventricular fibrillation. Dr. Doshi determined that he needed an implantable defibrillator, a device that monitors the heart rate and can deliver a strong electrical shock to restore the heartbeat if needed. Ordinarily, that would entail a device with two leads, the wires that run between the device’s pulse generator and the heart.

Dr. Doshi felt that given his age and condition, Riskin would benefit from a special kind of defibrillator that uses one lead but can sense signals from other chambers. It wasn’t equipment normally carried by most hospitals.

“I asked senior leadership at Saint John’s to request this device,” Dr. Doshi says. “A lot of hospitals wouldn’t go the extra mile to do that, but they did. And then Providence went the extra mile by approving this unusual and costly exception.”

In March, Dr. Doshi implanted Riskin’s new defibrillator. “He took the time to explain everything so that when the day of surgery came, I felt confident about what was happening,” Riskin says.

“He’s doing well and was able to take a trip overseas recently,” Doshi reports. “We’re hoping with novel medications, which he wasn’t taking before, and some other new therapies along with lifestyle changes, his prognosis will be good.”

Dr. Doshi’s partner in treating Riskin is Peter Pak, MD. Dr. Pak specializes cardiomyopathy, conditions that weaken the heart muscle, and is working with Riskin on medications and lifestyle modifications to improve heart function.

Riskin’s experiences of near death and hospitalization have taken a toll on him, and he’s still dealing with post-traumatic stress. He knows that his future is still uncertain. At the same time, he says, “It’s been a journey and it’s given me a lot of perspective on things, and it’s been sort of beautiful in some ways.”

He spends time hiking and swimming, activities that generate mental, physical and emotional strength.

“I really like swimming and hiking for the mental and physical peace it brings me,” he says. “There’s something about the quiet of trails and the feeling of going under a wave as it breaks that just gives me an immense feeling of perspective. And I generally sleep better and relax more when I’m physically tired.”

He credits his strong relationship with Dr. Doshi and Dr. Pak for his ability to move on with his life.

"The importance of cardiac health has been strongly emphasized to me, and I'm approaching my recovery with the perspective that my focus should be on lifestyle decisions," Riskin says. "I truly feel that my medical needs are being carefully watched and taken care of by my doctors, so I am doing everything I can, like eating well and getting lots of exercise, to become as healthy as possible."

PHILANTHROPY MAKES PROGRESS POSSIBLE

"Saint John's is a national training center for physicians worldwide to come observe innovative heart procedures," says Dr. Doshi. For example, earlier this year, he demonstrated ablation techniques to 12 physicians visiting from Latin American countries. The prior week, he traveled to Boston to demonstrate advanced ablation techniques and the following week was heading to Japan to train physicians.

Dr. Doshi has published research in top peer-reviewed academic journals including the *Journal of the American Medical Association*, *The Lancet*, *Circulation* and the *Journal of the American College of Cardiology*.

"Philanthropic support has allowed us to acquire the equipment we needed, which we have used in novel ways and with new techniques," says Dr. Doshi. "Without philanthropic support, we wouldn't be where we are today."

At the same time, he notes, "Atrial fibrillation is one of the fastest growing fields in cardiology because it's a disease of aging, so we're just at the start of an epidemic of A-fib. Much new technology is being created, researched and developed, and we will need continuous philanthropic support to remain a leading center in

treating these arrhythmias."

Friends and supporters of Saint John's have stepped up to make lifesaving advances possible, he added. "The Saint John's Health Center Foundation has been incredibly supportive to cardiology. And as we look ahead, with the right institutional and foundational support, we can expand access and develop even more innovative programs for patients with cardiac disease in Santa Monica and beyond." 🍷



"It's been a journey and it's given me a lot of perspective on things, and it's been sort of beautiful in some ways."

For more information on supporting innovations in cardiology and electrophysiology, contact Marquina Munoz-Freedman at 310-829-8348 or marquina.munoz-freedman@stjohns.org.

STRENGTHENING YOUNG FAMILIES

CLARIS HEALTH PROVIDES COMPASSIONATE
HEALTH CARE TO REPRODUCTIVE-AGE ADULTS.

Clare Nerney, with Harper-Lee,
6, Bright, 2, and infant Arrow,
found high-quality pregnancy
care at Claris Health.



THE GIFT OF HEALTH

The Community Impact Fund (CIF) was established by Saint John's Health Center Foundation to support our local health care partners in improving the health of our community. Each year the CIF committee reviews applications and makes grants to entities, striving to improve the health of local residents. In this issue of *Saint John's*, we describe the services of Claris Health.

Clare Nerney was unable to breathe and overwhelmed with dread. It was August 2020 at the height of the COVID-19 epidemic. Nerney, pregnant and not due for five weeks, suddenly found herself hospitalized with COVID-19-related pneumonia and a blood clot in her lung. Now on oxygen, she felt her strength rapidly declining. She feared she would lose her baby or perhaps—at the age of 27—her own life.

Several months earlier, Nerney, a freelance writer and single mother, had moved to a new neighborhood in Los Angeles and sought assistance at Claris Health, a nonprofit community care clinic, when she realized she was pregnant. The organization had provided her with prenatal care and counseling. Now in the hospital, frightened and alone, Nerney turned to her certified nurse midwife, Stacie Wolcott, who was then part of the Claris Health team.

"I had so many questions," says Nerney. When ER doctors wanted to do a CT scan on Nerney's lung, she was concerned it might hurt the baby. Wolcott reassured her that the procedure was safe. Although unable to be with Nerney at the hospital due to COVID-19 restrictions, Wolcott nevertheless stayed in constant contact with her through text messages during her entire labor and delivery.

"Once I texted her at 2 a.m. She responded right away, and that brought me so much peace," Nerney says. She was finally transported to another hospital with a neonatal intensive care unit. Surrounded by a medical team wearing personal protective equipment, she delivered a healthy daughter named Bright.

BY LAUREL DIGANGI / PHOTOGRAPHED BY SARAH HAMLIN

NONJUDGMENTAL ASSISTANCE

Claris Health, which is a grant recipient of the Saint John's Health Center Foundation's Community Impact Fund, provides comprehensive medical care, emotional support and a sense of community primarily for pregnant women and families with children under the age of 5. Services include birth control, pregnancy testing, ultrasound scanning, well-woman exams, sexually transmitted infection testing and treatment for both men and women, prenatal care and basic health assessment at mobile clinic locations to all individuals ages 18 and older (or 12 and older with parental consent).

Claris Health also offers therapy, parenting classes, and support groups for those who have experienced a miscarriage, stillbirth, pregnancy termination or placed a baby for adoption. Services are generally free or very low-cost. Claris Health also accepts Medi-Cal and LA Care and offers financial aid for qualifying patients.

Through CIF grants received in 2019, 2020 and 2021, Claris Health has been able to offer people like Nerney an array of compassionate, nonjudgmental assistance.

"Often health care can become so clinical that we forget the humanity of the people we're serving, we forget that they walk into our exam room with so many other things going on in their lives," says Talitha Phillips, chief executive officer of Claris Health. "Our goal at Claris Health is to provide a space for them to share what's going on. Being able to meet some of those other needs is incredibly powerful, especially when you're dealing with populations that have a history of trauma and are used to poor interactions with the medical community."

"The people at Claris made me feel so welcome," Nerney says. "When I came in for my first appointment, I brought my daughter, Harper, who was almost 4, and they gave her a new toy. It was such a relief to know that with Claris, I now had a family in Los Angeles who cared about the health and well-

being of my daughter and the baby growing inside me."

WELL-BEING IN PREGNANCY

Claris Health was founded in the 1970s as a counseling and education center. James Moran, MD, currently a laborist at Providence Saint John's Health Center, served as its medical director for more than 40 years. Phillips herself first learned of Claris Health in 1999 when she was a college student and walked through their doors as a client. "I felt so loved and cared for," she says. "And in such a nonjudgmental way."

Phillips never dreamed that two years later, she would be hired as director and be integral to the growth of the organization. In 2004, Claris Health was licensed as a medical clinic by the state and has rapidly expanded since. With its primary location in West Los Angeles, in 2009 Claris Health added a satellite clinic in South Los Angeles, and Phillips became CEO. Then in 2019, a CIF grant enabled Claris Health to fund a mobile clinic that brings services to communities that often lack access to care.

Reproductive health services are a central service for Claris Health. One way the organization supports a pregnant woman's entire well-being is through a program called "centering pregnancy." In this program, offered for those with low-risk pregnancies, women receive prenatal care in a group setting.

"Patients are placed in a cohort group with other pregnant people who are due within the same month. Sessions are facilitated by a certified nurse midwife, combining education, health care and peer-to-peer learning," says Phillips. "In this very personalized, relational care, women feel heard and get to ask questions. The program is evidence-based and reduces racial disparity in health care and maternal and infant mortality."

SUPPORT FOR PARENTS

Claris Health offers free parenting classes on a number of different topics such as childbirth preparation, potty training, sleep training, safety

14.4% WOMEN AGES 18 AND OVER WHO ARE IN FAIR OR POOR HEALTH

9.5% FEMALES UNDER AGE 65 WITHOUT HEALTH INSURANCE COVERAGE

66% WOMEN AGES 18 AND OVER WHO HAD A PAP TEST WITHIN THE PAST THREE YEARS

18% WOMEN WHO ARE NOT USING THEIR PREFERRED METHOD OF CONTRACEPTION, MANY DUE TO COST

21% RATIO OF LOW-INCOME AND UNINSURED WOMEN WHO RECEIVE CONTRACEPTIVE CARE FROM PUBLICLY FUNDED CLINICS

52% WOMEN AGES 15 TO 44 WHO HAD A PELVIC EXAM IN PAST YEAR

Sources: CDC, Kaiser Family Foundation





A family enrolled in the Claris program shops for free baby supplies at the Lynwood clinic.

and developmental stages. Individual parents and couples often join these classes not only for the information they receive but also for the opportunities for support and sharing with other new parents and parents-to-be.

The most recent CIF grant Claris Health received enabled them to provide special assistance to parents who were required to take court-mandated parenting classes. Claris Health partnered with Every Mother's Advocate to provide personal advocates to these parents.

"It's an incredible program, and we've seen so many positive changes by making the program more individualized," says Phillips. "For example, we learned that one of the mothers who had taken the parenting classes now had to prove to the court that she had bought individual beds for her children. We were able to purchase the beds for her, and by the time her case went before the judge, she had satisfied all her requirements and was able to be reunited with her children. CIF is excellent at helping you think through gaps that you can fill, especially when you need to get seed funds to get a program launched."

Another special program Claris Health offers is Reality Check, a sexual health and relational health program for middle schools, high schools and youth groups. Through assemblies, events and group discussions, young people are empowered to make healthy decisions. "We spend a lot of time talking about both the dangerous and helpful ways the media influences young people in regard to their sexuality and relationships," says Phillips.

Today, Nerney, 29, lives in Rhode Island with her three daughters: Harper, age 6, Bright, age 2, and 3-month-old Arrow. She enjoys taking her daughters to the beach and vegan cafes and watching Harper ride horses. Last year she was one of the speakers invited to share her transformative story at Claris Health's gala. "Sharing my story was scary but liberating. The people at Claris made me feel beautiful and empowered," says Nerney.

Phillips agrees. "We want people to feel as if they're not alone," she says. "That really speaks to the heart and the posture of our agency. Claris means clarity, and our goal is to help people find brightness and clarity in the midst of confusion." 🌀

THE ANGELS RETURN

AFTER A PAUSE DUE TO COVID-19, A STORIED VOLUNTEER PROGRAM IN THE EMERGENCY DEPARTMENT IS REVIVED.

BY SHARI ROAN / PHOTOGRAPHED BY SHANE O'DONNELL

Providence Saint John's Health Center has frequently drawn national acclaim for pioneering new medical procedures or treatments. But about two decades ago, the health center made news for a different reason. It founded one of the first programs in the country that used trained volunteers to assist patients, families and the medical team in an emergency department.

Now, after a two-year hiatus of the program due to the COVID-19 pandemic, the highly valued Angels of the ER are back on the job, working quietly and tirelessly to make the bustling Saint John's emergency department function at its highest level of quality and compassion.

"The whole department is overjoyed to have them back," says Russ Kino, MD, director of the ED. "We set this up roughly 20 years ago to be fundamentally different from most other hospital volunteer programs. Most hospitals use their volunteers to deliver or pick up things. The Angels' role is to bring that extra human touch to the patient."

Prior to COVID-19, about 42 people served as Angels. The program resumed earlier this year, and Grenda Pearlman, senior manager of volunteer services at Saint John's, is working to rebuild the volunteer corps. Ideally, Angels are available in the ED every day from 9 a.m. to 9 p.m.—with three teams working four-hour shifts.

The Angels typically consist of retired individuals desiring volunteer work along with some working folks who want to give back to their community. Some Angels are young adults who are exploring careers in health care and wish to become more familiar with medical or nursing professions.

"Most of our volunteers enjoy the satisfaction of giving back and sharing their time with others," says Mary White, a longtime Angel who now helps coordinate the program. "Some of our volunteers are ex-patients who are grateful for the care they received. They understand what it's like from the patient's perspective, and they liked their Saint John's experience. A patient's experience



ANGELS OF THE ER

often comes down to the people they encounter. That can be a volunteer.”

The Angels fulfill a multitude of tasks while leaving health care to the medical professionals, White says. They often sit with a patient who is alone or chat with patients and family members to help fill the time while tests are conducted. Angels often deliver drinks, snacks or warm blankets to patients or family members. They can find a nurse to attend to the patient if needed, or try to get answers to questions.

“Our goal is to make the patient experience a more satisfying one,” White says. “The idea is to try to be the patient’s advocate wherever possible and let them know someone cares about them. Patients might get settled in an exam room and blood work is processed or a scan is ordered, and the patients have a lot of downtime waiting for results. You can help during those periods to make sure they are as comfortable as possible.”

The Angels bring a human touch to the hectic and sometimes intense atmosphere in the ED, Dr. Kino says. ED medical staff is typically busy addressing urgent and lifesaving medical tasks.

“The Angels bring that human element of caring and intimacy that we as a busy clinical team cannot easily give when we have so many really sick people to manage all at the same time,” he says. “They bring that extra dimension of gentle intimacy and help to improve communication. These things make a big difference to the patient.”

There is data to prove his point. According to Dr. Kino, after the Angels program was implemented, the patient satisfaction scores in the ED rose. “Our patient satisfaction scores went up tremendously even though we hadn’t done anything else differently,” he says. “That was very telling.”

The Angels sometimes fill an unexpected need, he notes. Several years ago, Dr. Kino says, he faced the worst possible situation: He had to tell parents that their child had died.

“The parents had no idea what had happened, and I was absolutely dreading having to tell them. It’s the worst part of my job,” he says. “I asked one of the Angels

CRAIG WESTON

Age: 58

Investment advisor/
professional sports
photographer

Years as an Angel: 15



“My four-hour shift each week balances my life both spiritually and mentally. My responsibility is to be there for the patients and help the staff in any way I can. I find a friendly conversation and a warm blanket can go a long way in the ER to help foster a calm and positive experience for those dealing with a challenging time. Personally, I love being immersed in this dynamic medical environment and feel exhausted yet energized with life after every shift. And making friendships among the staff has been rewarding.”

GABRIELE GOLDAPER

Age: 85

Instructor at the Fashion Institute
of Design & Merchandising/50-year
veteran of the apparel industry

Years as an Angel: 10



“I want to be involved in helping people above and beyond their medical needs. I was in the ER this morning. There was a lady who was extremely anxious about being in the ER. I spent about 20 minutes just talking to her. By the time I left, she wasn’t anxious anymore. I kept telling her, ‘This is the best place for you to be. All your medical needs are going to be met in an outstanding manner. I’m here to tell you that if you need anything beyond that, I’ll help you.’ I try to help people feel better about needing to be in the ER.”

ANN CRUCHLEY

Age: 77

Retired after a career in advertising

Years as an Angel: 6

"There's always plenty to do as an Angel of the ER. My favorites are making sure the incredible nurses and doctors have everything they need. For example, when I started there were never enough pillows in the ER. That makes sense because when a patient was transferred to another unit, their pillow went with them. But I also volunteer in ortho and saw that when a patient comes up from surgery, they bring a pillow with them. Ortho had lots of extra pillows. So I asked for permission and began moving 60 to 100 pillows down to the ER on a weekly basis. It was a win-win for both units. I'm happy and grateful to be an Angel. When I get home after each shift, I think about what happened that day. I'm sure I get much more from the experience than those I can help."



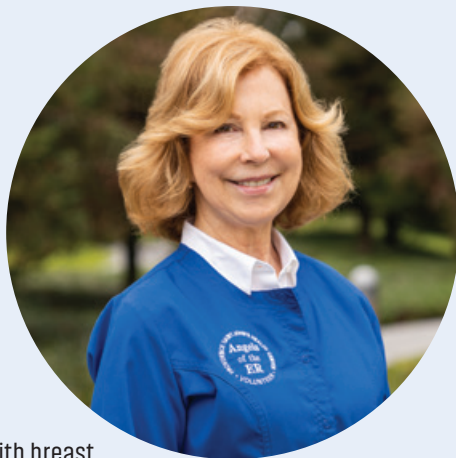
MARY WHITE

Age: 73

Homemaker

Years as an Angel: 15

"I had my own experience with breast cancer. It gave me a perspective. I had surgery at Saint John's and could see things from a patient's point of view. A good Angel has to be empathetic and patient. A big part of the job is being able to read situations. You need that life experience that makes you see a broader picture. We don't ask personal questions or probing things about their illnesses, but sometimes the situation calls for a personal touch. That kind of experience can be very comforting."



if she was up for coming into the room with me. She didn't flinch. She said, 'Absolutely, I will be there with you.' We talked to the family, and the Angel took over and handled the whole situation incredibly well."

Later, Dr. Kino encountered the volunteer in the ED and asked her how she was able to address the situation so gracefully, providing the bereaved family with comforting words. "I said, 'How did you know how to handle that? You make such a big difference,'" he recalls. "She said, 'Russ, it's because I lost a child. I knew how that family was going to feel.'"

He adds, "That is the kind of thing the Angels bring to the jobs. They have life experience. That's the kind of stuff that, no matter how long you go to medical school, doctors and nurses sometimes can't bring to the table."

At the end of a shift, the Angels only want to know they've made someone's day a bit easier, White says. "If I am able to interact enough with a patient and they feel they were listened to and cared for, that's what I want. If a doctor or a nurse interacts with me and thanks me or is happy that I'm there, that is also great because a big part of our mission is to take a little bit of a burden off them that's not medical."

As one of the first ED volunteer programs in the country, the Angels of the ER attracted national attention, winning the Hospital Award for Volunteer Excellence by the American Hospital Association in 2011. The Angels program is part of a robust volunteer corps at Saint John's that, pre-COVID-19, numbered about 275 active volunteers.

Pearlman is now in the process of bringing volunteers back to the health center, working through a long waiting list of people who are ready to resume their duties. "The volunteers are now back in every area," she says. "We are thrilled that so many want to come back. The volunteers are just such a gift. They are loving, compassionate, smart, helpful people who are willing to do whatever we need them to do."

The Angels enhance an emergency department that is privileged to serve the community to the best of its ability, Dr. Kino says. "We are not a treat-em-and-street-em emergency department. Our focus is really going the extra mile for the patients. Our focus is on superlative care and great customer service." 📞

IT TAKES A TEAM

**SAINT JOHN'S CANCER INSTITUTE
PHYSICIANS JOIN FORCES TO HELP A
PATIENT BEAT BLADDER CANCER.**

BY ROBIN HEFFLER / PHOTOGRAPHED BY PHILLIP GRAYBILL

In the spring of 2020, Leland Smith, then 56 and a corporate lawyer, began having trouble urinating. He felt the urge but it was hard to empty his bladder. So he saw a Westside urologist who ran tests and gave him medications that seemed to help. Then in October of that year, Smith had an extensive physical exam, which showed some kidney function impairment.

His primary care physician, Jill Wei, MD, a member of the Saint John's Physician Partners network, was concerned and quickly ordered an ultrasound of his kidneys and bladder. When the results revealed a large mass on his bladder, Dr. Wei referred him to Jennifer Linehan, MD, a urologist who is part of the Urology and Urologic Oncology Center of Excellence at the Saint John's Cancer Institute.



Shortly after the ultrasound and surgery using a camera into the bladder to remove the tumor, Smith learned his life could be in jeopardy. “The biopsy showed the tumor was a high-grade bladder cancer that had invaded deep into the bladder muscle, which is typically seen in patients in their mid-70s,” she says. “The gold standard for treating this is chemotherapy and then bladder removal because of the high risk of the cancer spreading to other organs and a poor life expectancy.”

For Smith, the diagnosis led to “perhaps the darkest moment of my treatment—telling my wife and four sons that I had cancer.” It was also the beginning of a complicated process to achieve the best possible health outcome through the skill, compassion and commitment of Saint John’s Cancer Institute staff.

The institute’s Urology and Urologic Oncology Center of Excellence specializes in the treatment of bladder, kidney, testicular and prostate cancer. Utilizing a multidisciplinary, team-based approach, the center provides patients with personalized care that is rooted in skill, experience and compassion. Urologic oncology specialists offer minimally invasive treatment techniques and innovations, including robot-assisted surgery to remove the bladder and create a new bladder out of the small bowel.

“I feel fortunate to have ended up under the care of really good doctors who were straightforward, experienced, willing to answer all my questions and worked together very effectively,” says Smith.

AN ARDUOUS JOURNEY

In late November 2020, Smith began what was planned to be four chemotherapy cycles, managed by Przemyslaw Twardowski MD, a medical oncologist and director of clinical research, urology and urologic oncology at Saint John’s Cancer Institute. He only underwent three cycles because “his kidneys weren’t filtering his blood efficiently possibly due to the chemotherapy,” says Dr. Linehan, “and if patients are having side effects, sometimes we’ll cut the chemotherapy cycles short.”

Smith says the chemo made him very tired, but he has kudos for the health center staff who cared for him during the treatment and during COVID-19 when family visits weren’t allowed. “The nurses in the infusion room were amazing, particularly since I was completely reliant on their help and care. Some of my infusion days lasted for over eight hours,” he says. “They were as kind as they could be to me and the other patients there.”

After three months of chemo, in February 2021, Smith underwent bladder, prostate and lymph node removal followed by bladder reconstruction surgeries. Timothy Wilson, MD, professor and chair of urology and urologic oncology, led the team that removed his bladder and Dr. Linehan then created a new one using a portion of his small intestine or bowel, a procedure called neobladder construction.

During the three weeks Smith was in the hospital

recovering from the surgeries, he experienced multiple side effects that are typical following this type of surgery: weight loss, infections and a hernia.

“The first three months after these procedures tend to be the hardest—getting used to the new bladder, urine infections and electrolyte abnormalities,” Dr. Linehan says. “Patients have been glad that I gave them a heads-up about this—half of the fear is not knowing what to expect.”

One typical side effect is the urinary infection that went into Smith’s bloodstream. “Patients are immunocompromised by chemotherapy and because the digestive system is opened up during surgery to create the new bladder it can expose bacteria,” Dr. Linehan says. “In this case, it was manageable because we caught it early.” Complications can also arise, she explains, because “you’re taking away the bladder, how the body stores and empties urine and replacing it with bowel, an organ that has been doing a totally different job—absorbing and storing nutrients.”

The challenges Smith faced weren’t over, however. In March 2021, he had emergency colon surgery performed by Dr. Linehan and Anton Bilchik, MD, PhD, professor of surgery and chief of medicine at the Saint John’s Cancer Institute, because he had developed scar tissue that caused his bowel to become trapped, and a portion of his intestines had become twisted.

THE POWER TO HEAL

Today, Smith is fully recovered and sees Dr. Linehan for check-ups every three months. He will continue to be monitored for at least 10 years. “He’s doing excellent,” Dr. Linehan says. “There’s no recurrence of cancer. His bladder is functional; he’s exercising, and his kidney function is good.”

“The Saint John’s staff treated me with a lot of concern, kindness and respect and made me feel that I was receiving top-notch care,” says Smith, who is retired and enjoys traveling and spending time with his wife and sons. “They also treated my case with urgency and made themselves available when I needed them.”

Dr. Linehan, whose practice includes treating kidney and prostate cancer, says that physician accessibility before, during and after procedures is one of the strengths of Saint John’s Urology Center. “We got him in for surgery three days after his tumor was found on ultrasound, and when we knew the severity of the issue, we had him into treatment within a week. We also used the latest robotic surgery to

To make an appointment
with Saint John’s Cancer
Institute’s urology and
urologic oncology team,
call 310-582-7137.

“They treated my case with urgency and made themselves available when I needed them.”



remove the bladder and speed his recovery,” she says. “His experience shows the benefits of having a care team that is constantly available, a medical oncologist and two surgeons who are all in same unit, and ongoing follow-up visits. And, when patients have complications or other issues post-surgery, we’re there for them.”

Smith’s treatment also reflects the doctor’s philosophy of patient care. “For cancer patients, it’s having a lot of compassion to treat them as I would my own family members,” says Dr. Linehan, who makes time to provide pro bono urological care to the low-income patients of the Venice Family Clinic. “My cancer patients have direct access to me. It makes it easier to assess problems earlier and get things taken care of.”

The urology team is among the nation’s leaders in minimally invasive surgery, including robot-assisted techniques, in the removal and reconstruction of bladders. This surgical approach results in less blood loss, faster recovery time and less pain and need for narcotics. Patients often experience an earlier return to normal activities. In follow-up visits, patients receive innovative blood tests that can provide early detection if the cancer returns and can guide physicians on the best treatment approach.

Dr. Linehan and other Saint John’s physicians also conduct research. She is involved in prostate and kidney studies, including developing urine tests that, for the first time, will be able to detect kidney cancer. The team has also employed new technology like the blue light cystoscopy which can see very small almost microscopic cancers in the bladder and updated PET scans and imaging to detect cancer and check for metastasis.”

Dr. Wilson, Dr. Linehan and Dr. Twardowski offer clinical trials for invasive and noninvasive bladder cancer. They are testing new therapies using chemoradiation with a small ring that goes inside the bladder. They also have focused programs on trimodal therapy to provide bladder-sparing options for those who cannot have or do not want cystectomy. Dr. Twardowski has focused clinical trials for new systemic therapies for patients who have metastatic bladder cancer. Dr. Wilson has been working on a device that can collect cancer cells from the blood that can be tested and used as a true liquid biopsy.

Philanthropic support has been critical for both treatment and research advances. “It’s allowed us to hire and construct teams of physicians and researchers to deliver better patient care and buy equipment to detect and see very tiny tumors when bladder cancer recurs,” she says. “New technologies are coming out all the time. With the help of donors, we would like to employ those innovations at Saint John’s.”

Pioneering surgical oncology played a role in Smith’s recovery, he notes. “I am now 18 months into recovery. My cancer is in remission, and I have adjusted to the ‘new normal’ of my neobladder. Throughout, I was sustained by family, friends and faith. But I was healed by the urologic oncology team at Saint John’s.” 🙏

For more information on supporting urologic oncology treatment and research contact Mary Byrnes at 310-582-7102 or mary.byrnes@stjohns.org.

Plotting a Course for Charitable Giving

Bob and Birdie Feldman, both avid sailors, have charted a way to leave an estate gift to Saint John's.

BY NANCY BRANDS WARD / PHOTOGRAPHED BY MATTHEW SMITH

Bob and Birdie Feldman believe that if you don't have your health, you don't have anything. That belief has formed the basis of their philanthropic efforts as they've dedicated most of their charitable contributions over the years to medicine and health care.

"There are a lot of good causes," says Birdie. "But we specifically believe in medical-related giving because we want to support any research that can help cure disease."

Over the past couple of decades, the Marina del Rey couple of 47 years have offered gifts to support research, technology and physician training at Providence Saint John's Health Center. They've earmarked their gifts to support cancer and heart disease since family and friends suffered from both.

"We'd like to eradicate cancer and heart disease," Bob says. "We're fortunate that we can contribute financially to that."

Now at ages 84 and 71, Bob and Birdie are thinking more long-term, designating a gift to Saint John's as part of their estate planning.

"We are truly grateful to the Feldmans for their visionary support," says Andy Trilling, vice president of principal gifts at Saint John's Health Center Foundation. "Birdie and Bob have wisely utilized a powerful estate planning instrument that provides them with annual income, a significant tax-deduction, and ultimately, a generous gift to Saint John's."

The Feldmans established a charitable remainder trust which is mutually beneficial to the donor and Saint John's by allowing the donors to draw a percentage income of the trust for the rest of their lives, after which the principal is passed to the charitable organization.

Planned Giving enables people of any means to leave a lasting philanthropic legacy. "When someone passes, his or her estate can only go to one of three places: their heirs, the government (IRS) or to charity," says Trilling. "In many cases, with thoughtful estate planning, money that might be heavily taxed can go to their favorite charities and heirs instead."

"In our case, the choice was clear," says

Birdie. "Without a charitable plan, a significant portion of our estate would end up going to the IRS, and we have every confidence Saint John's will better direct those funds to make an impact in areas we care about."


The government recognizes that charitable giving is an important way to encourage contributions, and it has become a powerful arm of our social infrastructure, Trilling says. "The government lets citizens decide what they want to support through tax deductions and other popular estate planning tools such as a charitable remainder trust," he says.

In the property business for 50-plus years, the Feldmans are winding down from handling the "tenants, termites and toilets" business, which after five decades has begun to feel like a bit of a chore. They'll turn several of their apartment buildings into charitable remainder trusts—one will go to Saint John's as part of their estate. The gift will be unrestricted since, as Birdie notes, medicine constantly advances and other areas of medicine may emerge as significant targets for research.

Neither Bob nor Birdie suffers from serious health issues. But every experience they've had with Saint John's—either their own or through friends and relatives—has been overwhelmingly positive. "The doctors are all personable, attentive, professional and conscientious," Bob says.

The Feldmans keep up with progress at Saint John's, attending programs about advances in research, equipment and procedures such as robotic surgery. In mid-September, they were very impressed with a session at the health center focusing on new techniques in neurosurgery.

When they're not at home in Marina del Rey, they are boating on their 53-foot DeFever. They expect to set sail in 2023 for an extended excursion in the Pacific Northwest, where they've made many friends over the years. Boating keeps them healthy, they say. "There's a saying: 'God does not subtract from your allotted days the time spent sailing,'" Bob says. "I think it's true—a lot of people in our yacht club are in their 90s and 100s."

They know when their sailing days are over, however, their generous gift to Saint John's will live on. 



Bob and Birdie Feldman choose a charitable remainder trust for estate planning.

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Legacy gifts, such as bequests, are made through charitable estate planning and can have significant tax advantages for you and your heirs. It allows you to make a difference in an area that may be close to your heart, and you may be able to make an impact greater than you thought possible. There are many ways to make a legacy gift:

- A gift through your will or living trust
- A charitable gift annuity or trust that provides income for you or a loved one for life
- A gift from your IRA can save you or your heirs “double tax”
- A future gift of your home and receive income for life

We are truly grateful to our friends who create a lasting legacy at Saint John's. 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 Andy.Trilling@stjohns.org.

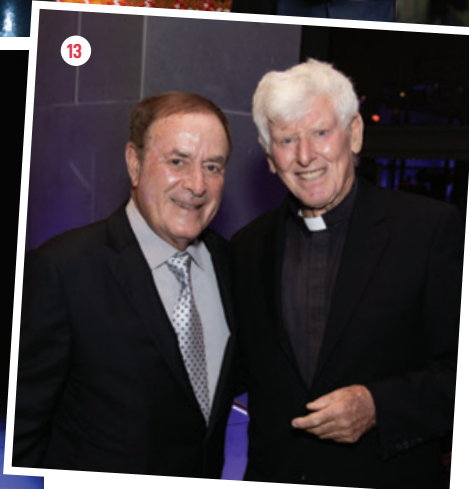
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80TH ANNIVERSARY CELEBRATION

The Saint John's Health Center Foundation hosted the 80th Anniversary Celebration on October 29 to honor Providence Saint John's Health Center on its milestone anniversary. More than 400 attendees enjoyed the festive event, emceed by Al Michaels, at The Broad Stage in Santa Monica. The biennial gala celebration is produced to raise funds for vital programs and services at Saint John's and to bring together donors, physicians, trustees, leaders and friends for an evening of entertainment and visual story-telling centering on the health center's 80-year history of serving the community of West Los Angeles. Nearly \$900,000 was raised at the gala to benefit vital, leading-edge programs, services and the greatest needs within our distinguished institutes of excellence at Saint John's Health Center including digestive health, cancer, cardiovascular, orthopedic and spine, neuroscience and women's health and wellness.

Sponsors included Peter Douglas, Mary and Jay Flaherty, Eileen and John Huarte, Donna Schweers and Tom Geiser, The Berry Gordy Foundation for Truth and Justice, Tina and Rick Caruso, Danhaki Family Foundation, Martha and David Ho, and Beth and Bob Lowe.






1. Cocktail reception
2. John Robertson, MD, Kym Douglas, Bob Klein
3. Brian Webber, Darren Seidel, Bill Garland III
4. Jay Flaherty, Mary Flaherty
5. Anton Bilchik, MD, Berry Gordy, Michael Ricks
6. John Danhaki, Kathy Danhaki
7. (First row) Brenda Borstein, Al Borstein, Roger Wacker (Second row) Jonathon Fischer, Birdie Feldman, Mike Avila, Bob Feldman, Angelle Grace Wacker, Chris Griffiths, Chester Griffiths, MD, Farah Gozini, Christine Avanti-Fischer, Steve Gozini
8. Jeanne Robinson, Harry Robinson
9. Dinner on the terrace
10. Kym Douglas, Michael Ricks
11. Sirah Vettese, Michael Wise
12. Shoshana Bean
13. Al Michaels, Fr. Patrick Comerford
14. Cafe mocha from the specialty coffee bar and sweet station

POWER OF PINK LUNCHEON & BOUTIQUE

The Inaugural Power of Pink Luncheon & Boutique was held October 19 in celebration of the 30th anniversary of the Margie Petersen Breast Center at Providence Saint John's Health Center. More than 300 supporters attended the event, held at the Skirball Cultural Center and featuring educational sessions on the latest developments in breast cancer prevention, treatment and research. A raffle and boutique shopping raised \$227,000 in funds to benefit breast cancer research and the Breast Surgical Oncology Fellowship Program at Saint John's.

Angelle Grace Wacker was honored with the Spirit of Hope Award at the luncheon. Wacker is a philanthropist, a breast cancer survivor and an advocate of breast cancer awareness and health initiatives.

Deepest thanks to the 2022 Power of Pink co-chairs Kim Kraver Lee and Ellen Weitman whose passion, vision and leadership led to Power of Pink's success. 



"We are so grateful to everyone who helped us far exceed our financial goal. We are looking forward to working with Dr. Janie Grumley and everyone at the Margie Petersen Breast Center as they continue to innovate and improve women's breast health." —ELLEN WEITMAN, CO-CHAIR OF POWER OF PINK LUNCHEON AND BOUTIQUE



1. Margie Petersen Breast Center Team
2. Dr. Janie Grumley 3. Angelle Grace Wacker accepting award with her husband, Roger
4. Power of Pink Luncheon & Boutique Co-Chairs, (from left) Ellen Weitman, Dr. Janie Grumley and Kim Kraver Lee 5. Dr. Parvin Peddi

"I am passionate about supporting the training of the next generation of breast surgeons so that all women, everywhere, can be afforded access to the innovative treatment options offered at Saint John's. I am so proud of the success of this event and that every dollar raised will go directly towards supporting the Breast Surgical Oncology Fellowship and important research."

—KIM KRAVER LEE, CO-CHAIR OF POWER OF PINK LUNCHEON AND BOUTIQUE



Sister Maureen Craig

1934-2022

Sister Maureen Craig, 88, a Sister of Charity of Leavenworth (SCL) for 69 years, died on June 14 in Ross Hall at the SCL Mother House, Leavenworth, Kansas. Sister Maureen was a gifted storyteller, a wise counselor, a go-to problem-solver, a caring advocate, a clever and witty speaker, a spiritual leader and a dedicated wordsmith. She was also warm and welcoming and took notice of the underdog and the underserved. In all she did, she embodied the SCL's characteristic virtue of charity.

She was born in Little Rock, AR, the ninth of 10 children. The family moved to Tulsa when she was 6. After a year and a half of college, she entered the SCL Community on February 11, 1953, and professed vows as Sister John Mary Craig

on February 22, 1955. She was an outstanding teacher, but after 32 years in education she changed her ministry focus to health care. In 1987, she went to Saint John's to work as a chaplain and assistant to Sister Marie Madeleine Shonka, president and CEO of Saint John's. A few years later, Sister Marie Madeleine asked Sister Maureen to write a book on the 50-year history of Saint John's entitled "The Golden Promise." The well-received book was published in 1992.

She eventually became the foundation chaplain and a foundation trustee. She also worked with the Native Sons of the Golden West, the health center's longest continuous donors, in their support of Saint John's Cleft Palate Program.

In 1994, she weathered the

disastrous Northridge earthquake. She sometimes joked with friends that if her faith and courage could get her through a natural disaster, she could get through anything.

In 2000, she was recognized as a Woman of Distinction by the YMCA of Santa Monica at their Woman of the Year Dinner. Sister Maureen received the hospital's Caritas Award in 2012 for her service to Saint John's. She retired in 2019.

"Although we are saddened by her passing, we are grateful to have been witness to her life of service and goodwill," says Bob Klein, president and CEO of Saint John's Health Center Foundation. "In all things, she truly embraced and embodied our health center's mission, acting as a living expression of God's healing love." ☺

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same time. These
things make a big
difference to the
patient."

—RUSS KINO, MD

The Angels Return

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