

Advancing Medicine. *Touching Lives.*

RHODE ISLAND HOSPITAL • 2022



Rhode Island Hospital
Lifespan. Delivering health with care.®



COVER: A vision becomes reality. The future of spine care at the Norman Prince Spine Institute. *See Page 16.*

ABOVE: Nurses delivering compassionate care at Rhode Island Hospital.



Saul N. Weingart, MD

President, Rhode Island Hospital
and Hasbro Children's Hospital



Robert K. Vincent

Chair, Rhode Island Hospital
Foundation Board of Trustees

Dear Friend,
Advancing Medicine. Touching Lives. isn't just the name of a Rhode Island Hospital publication. It's what we do here. Day in and day out, our devoted, compassionate team of doctors, nurses, and support staff collaborates with world-class researchers and educators to ensure our patients have access to the very best care. Right here in Rhode Island.

Our people are committed to the mission of *Delivering health with care*, always putting patients at the heart of everything they do and always striving to achieve optimal outcomes.

It's challenging and rewarding work, for sure. But we don't do it alone. The Rhode Island Hospital team has a team of supporters behind it, inspiring us to be our best. In fact, it's the extraordinary generosity of our donor family—caring individuals, like you, as well as partnering organizations—that makes our lifesaving work possible. So, thank you.

As you read through this latest issue of our magazine, please know how appreciative we are to have you by our side and how deeply we cherish your support. The grateful patient stories, groundbreaking research, program milestones, and world-class medicine highlighted in these pages are all testament to your giving spirit in action. Happy reading!

With warmest regards,

Saul N. Weingart, MD

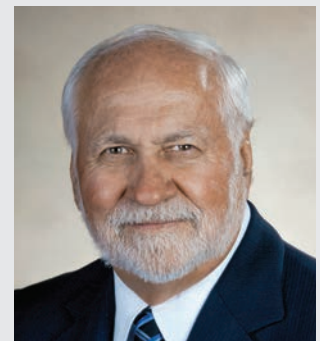
Robert K. Vincent

For nearly 160 years, Rhode Island Hospital has maintained a special relationship with the community it serves; one that is deeply rooted in the belief that the whole is greater than the sum of its parts.

As part of Lifespan, the state's largest academic health system, Rhode Island Hospital embraces a similar "team" philosophy when *Delivering health with care*. Our collaborations with world-class clinicians, researchers, and educators enable us to touch more lives and realize better outcomes—and it's your extraordinary support that makes so much of our work possible. And for that, I am forever grateful.

With appreciation,

Lawrence A. Aubin, Sr.



Lawrence A. Aubin, Sr.

Chairman, Lifespan Board of Directors
Chairman, Rhode Island Hospital
Board of Trustees

GRATITUDE SHINES THROUGH GRIEF, INSPIRES \$1 MILLION GIFT



After being unable to see her children and grandchildren for an extended period of time due to the pandemic, it meant the world to Pat (front, left) to spend as much time with them as she did over her final months.

It was April 2021 and John Tarantino and his wife, Pat, felt things were moving in a good direction. The couple—parents to three adult children and grandparents to four—had recently been vaccinated against COVID-19. And after more than a year without seeing their middle daughter and her family due to the pandemic, they safely visited from Maine.

“It felt so normal,” says John, an accomplished attorney with Adler Pollock & Sheehan, and managing trustee of the Papitto Opportunity Connection. “It was a magical week that left us optimistic about the summer.”

By the end of their daughter’s visit, Pat’s hip was bothering her. She and John didn’t think much about it and chalked it up to overdoing it with the grandkids.

But when the pain got worse, Pat went to her physician, who ordered an MRI. Its results were shocking. There was a large lesion in Pat’s left hip.

“We knew it was cancer, but we didn’t know what kind,” says John. “My head was spinning.”

With the fortunate ability to go anywhere for his wife’s care, John turned to a trusted friend for advice. When that friend told him who they needed to see was right here in Providence, John didn’t question it.

The doctor was Howard Safran, MD, Chief of Hematology/Oncology at the Lifespan Cancer Institute at Rhode Island, The Miriam, and Newport hospitals. Within a day, John and Pat were in his office.

Testing confirmed stage 4 pancreatic cancer. “It’s a diagnosis with a zero percent survival rate,” John says, “but I never met anyone stronger than Pat.”

Before Pat could begin treatment, Dr. Safran needed to know whether the lesion was pancreatic cancer that had metastasized, or a second primary cancer. If a second cancer, amputating Pat’s leg was discussed.

A biopsy confirmed the lesion was pancreatic, and an orthopedic surgeon, Derek Jenkins, MD, was at the ready to insert a rod and pin to stabilize Pat's hip. She was told she'd need a walker. Following a month healing from the hip procedure, Pat began chemotherapy in June. After a few treatments, her tumor-associated antigens plummeted by 90 percent and her mobility improved to where she didn't need her walker. She and John spent time on Cape Cod. The holidays were particularly special with their family.

"We were picturing a miracle," John says, thinking back. "She felt good. She was doing the things she wanted to."

In January 2022, however, it all changed.

Pat's antigens began to rise; the tumor was growing again. Dr. Safran initiated a new course of chemo, which left Pat weak and had minimal impact on her cancer. She needed the walker again, and then a wheelchair.

"The only thing left was to pray for a clinical trial," says John.

Through his resources at the Lifespan Cancer Institute, Dr. Safran identified a promising trial. Only 12 persons in the country could participate and Pat was accepted. The experimental drug would be administered at Rhode Island Hospital.

Pat made it through two treatments before a move to hospice needed to be considered. From that painful, yet necessary decision came what John calls "a beautiful human moment" that only galvanized the compassionate care his wife received and he felt.

"It's something I'll never forget. Dr. Safran asked me if he could remove his mask because we had never seen his face to that point... he took it off and he hugged Pat. And then one-by-one every nurse came in and did the same—we got to say goodbye to them as people and see what they all looked like."

"Nothing would make me happier than to be alive and hear Dr. Safran tell me that stage 4 pancreatic cancer is no longer a death sentence..."

—John Tarantino

On April 16 of this year, Pat passed away peacefully with John by her side. Less than 20 minutes after she passed, Dr. Safran walked into the hospice center unexpectedly, wanting to visit Pat when John met him with the sad news.

"Seeing Dr. Safran that morning—it was just so crystal clear how much he cared about my wife," says John. "He's a good person and a human first, who happens to also be an exceptional doctor."

During her treatment, Pat and John spoke often about wanting to support Dr. Safran's research. And it was in that most difficult moment at hospice when John shared his intention with Dr. Safran, committing \$1 million to his work.

"I told him, 'You gave us May to Christmas; I had my wife back—a lot of people don't make it two months after a stage 4 diagnosis like this,'" he says. "We were married almost 45 years, and I don't think we were ever closer than we were during her treatment."

"Nothing would make me happier than to be alive and hear Dr. Safran tell me that stage 4 pancreatic cancer is no longer a death sentence. I've never had more confidence in someone as I have in him—I truly believe he can figure this out."

GRANT-FUNDED RESEARCH: USING 'MAGIC MUSHROOMS' FOR OCD TREATMENT



Diana Oehrli

If you happened to hike by a psilocybin mushroom emerging from the forest floor, you'd probably barely notice the ordinary-looking gilled brown fungi.

But in fact, these "magic mushrooms" are currently one of the hottest subjects in psychiatric research. Scientists around the world are studying how the psychedelic compound psilocybin affects the brain and mind, as well as how it could be used therapeutically for a wide range of psychiatric disorders, from depression and post-traumatic stress disorder to anorexia.

Soon this cutting-edge research will also be conducted at Rhode Island Hospital.

With a transformational grant of \$450,000 from Diana Oehrli's Gruben Charitable Foundation, Lifespan recently

established the Psilocybin for OCD Research Program at its Norman Prince Neurosciences Institute.

Preparations are currently underway for a five-year pilot study investigating the efficacy of psilocybin for patients with treatment-resistant obsessive-compulsive disorder (OCD). The researchers are also planning to examine the changes induced by psilocybin by measuring brain wave activity using electroencephalogram, or EEG.

The study is being led by Rhode Island Hospital psychiatrist Mohamed Sherif, MD, PhD, who has extensive experience researching the effects of the hallucinogenic ketamine on treatment-resistant depression.

"In depression, psilocybin and ketamine seem to work by triggering brain changes much faster than with current treatment," says Dr. Sherif. "In addition, psilocybin effects seem to be lasting longer. It is encouraging to examine psilocybin's therapeutic potential in OCD as well."

OCD is a natural starting place for his psilocybin research because Rhode Island Hospital and its partners for the project were one of the first to establish the surgical treatment for patients with treatment-refractory OCD. This population accounts for one in ten patients living with OCD.

Dr. Sherif's work is informed by a growing body of research supporting the therapeutic use of psilocybin. For example, he points out the Johns Hopkins University School of Medicine studies that found that psilocybin could help terminally ill patients deal with anxiety about death.

“The [study] volunteers rated the psilocybin experience as having substantial personal meaning and spiritual significance and attributed the experience to sustained positive changes in attitudes and behavior,” researchers wrote.

When Diana learned about Dr. Sherif’s interest in expanding his research to psilocybin, she immediately felt it fit well with her Foundation’s mission to fund programs and research related to mental health, addiction, and spirituality.

“Often, health insurance doesn’t cover holistic or alternative approaches to healing, and that’s where I thought Gruben could come in,” says Diana, who is also a health coach, addiction recovery specialist, and author. “Psilocybin is in a way a medication, but it’s also a natural product.”

Diana established her Foundation, named for a village in the Swiss Alps where she lives part of the year, in 2008 with funds from the Frederick Henry Prince Charitable Trust. She is the great-great granddaughter of Frederick Henry Prince, an entrepreneur who was successful in the investment banking and railroad industries. He and his wife, Abbie, became residents of Newport and lived in the Marble House until his death in 1953.

The Norman Prince Neurosciences Institute itself, which is where the psilocybin study will take place, was established thanks to a very generous gift from the Prince family’s primary trust.

Dr. Sherif says that launching the study is a complex and lengthy task that is further complicated by psilocybin’s classification by the Department of Justice Drug Enforcement Administration (DEA) as a Schedule I substance. This means it currently has no accepted therapeutic use in the United States.

“In depression, psilocybin and ketamine seem to work by triggering brain changes much faster than with current treatment..”

—Dr. Mohamed Sherif

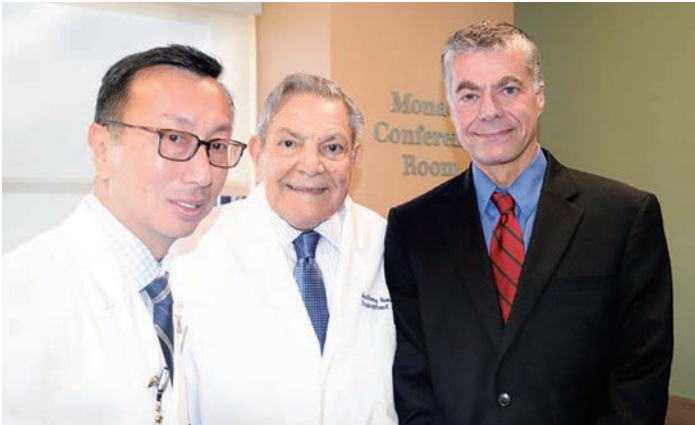
As such, years one and two of the study will focus on regulatory and logistic set up. Years three and four will include the recruitment and treatment of OCD patients who will be closely monitored by therapists and physicians before, during, and after their “trips.”

The research has the potential to change the way psychiatrists treat complex cases of OCD and other mental illnesses.

“From what I’m hearing, the initial research done with psilocybin is showing some amazing results,” Diana says, “and I am looking forward to seeing additional exciting advancements through this study.”



TRANSPLANT CENTER CELEBRATES 25TH ANNIVERSARY



A legacy of care. (Left to right) Doctors Reginald Gohh, Anthony Monaco, and Paul Morrissey. Dr. Monaco was a founder of Rhode Island Hospital's transplant services program, along with Kirby Bland, MD, Chief of Surgery, and Lance Dworkin, MD, Division Chief of Nephrology.

The Transplant Center at Rhode Island Hospital has been delivering the gift of life since 1997. Celebrating its 25th anniversary this year, the center—which focuses exclusively on kidney donations and transplants—is still the only facility of its kind in Rhode Island, and its success rate and standard of patient care consistently ranks among the very best in New England.

Paul Morrissey, MD, has been director of the center since 2002, and says achieving this impressive milestone is first and foremost a testament to staff. "We have one of the most skilled, experienced, and patient-centered teams of transplant surgeons, nephrologists, specialists, and support staff in the nation," he says. Advancements in science, technology, and health care, he adds, have also contributed to improved outcomes for kidney transplant patients.

One of those patients is Keith Smith, the center's very first patient, who is alive and well today thanks to the exceptional and compassionate care he's received at the center. Donated kidneys have a finite lifespan—between eight and 20 years—and Keith, who experienced end-stage renal failure, has received three successful kidney transplants at the center, in 1997, 2007, and 2020.

These days, Keith has follow-up visits every three to six months, maintains a regimen of immunosuppressant or anti-rejection medications, and undergoes periodic blood testing to ensure his health and well-being. "As long as I take my meds and eat right, I can do all of the things I enjoy most," he says, which usually means long walks and frequent visits to New Hampshire to go rock climbing.

Although Keith's journey was unique to him, the hyper-individualized approach to care he received at the center was not. "We tend to be more personalized in our care and hold on to our patients for life—which is not the norm at other centers and part of what makes us special," notes Reginald Gohh, MD, Medical Director, Division of Organ Transplantation, Rhode Island Hospital. "By keeping our clinical focus on long-term outcomes, we are improving quality of life in the most meaningful ways possible."

The center was one of the first in the world to implement a program of altruistic or "Good Samaritan" living kidney donation, which increased organ access and availability, and remains on the forefront of groundbreaking research. So, with a history of success to build on, the next 25 years looks even brighter!

BY THE NUMBERS



1498

Total transplants perform at the center (as of June 1, 2022)



294

Number of patients on the waiting list (as of June 1, 2022)



3 to 5

Average Number of years a patient is on the waiting list.



4 and 80

Ages of the youngest and oldest patients to receive a transplant.

NEW GROUP OFFERS HOPE AND HELP TO CANCER PATIENTS AND CAREGIVERS

Kathy Ricci spent 35 years delivering care to patients as a nurse. For nearly 20 of those years, she worked in the Ambulatory Patient Center (APC) at Rhode Island Hospital, alongside Charles McDonald, MD, an internationally recognized dermatologist/oncologist.

Two years ago, Kathy was back at the APC Building. But this time, as a patient.

On July 20, 2020, Kathy was demonstrating a level of confusion and forgetfulness, which was concerning to her husband, Hugo. “She couldn’t remember her social security number and then where she was,” he says. So, Kathy was taken to her local hospital for evaluation. Initially, it was thought that she may be experiencing transient ischemic attacks or mini strokes. But tests were inconclusive, and she was transferred to Rhode Island Hospital for further assessment. There, imaging scans revealed a tumor and Kathy was diagnosed with glioblastoma, a rare and fast-growing type of brain cancer with an average life expectancy of 12 to 15 months.

“We were absolutely devastated,” Hugo recalls.

On July 27, 2020, Kathy had surgery to remove the tumor and shortly after underwent six weeks of chemotherapy and radiation. What followed was months of periodic MRIs and scans to monitor Kathy’s cancer, as well as physical, occupational, and speech therapy, and a targeted regimen of anti-angiogenic inhibitor drugs.

Unfortunately, despite this thorough course of treatment, Kathy’s cancer continues to take a significant toll on her health. “It’s been a long, difficult road and Kathy is basically in home hospice now,” Hugo explains. “But we’re people of faith and we believe in miracles.”

Hugo also believes in helping others who find themselves fighting the same awful battle. The retired Workers’ Compensation Court Judge donated \$100,000 to create a dedicated support group at Rhode Island Hospital to assist those impacted by glioblastoma.

“I wanted to recognize my wife’s plight and her valiant effort to fight this insidious disease and to establish a forum for patients and caregiver families to connect, find out what to expect, learn from each other, and bring peace and comfort during this most challenging time,” he explains. Clinical counseling, social and emotional peer-to-peer support, and providing information and education will be components of the new program.

“I looked into going to New York or Boston for Kathy’s care, but she said ‘no,’ she wanted to stay right here,” Hugo says. “The research I conducted confirmed the high standard of neuro-oncology care at Rhode Island Hospital, which gave me peace of mind that she was in the right place.”

The support group Hugo funded will also be the “right place” for those seeking a measure of calm in the storm that is glioblastoma.



Kathleen “Kathy” and Honorable Hugo Ricci, Jr.

ALZHEIMER'S: IMPROVING TODAY'S CARE, PURSUING TOMORROW'S CURE

Bill Humphrey spends much of his time these days caring for his wife, Marilyn, who has Alzheimer's disease. "There are good days and bad days," he admits, "but there's nothing I'd rather be doing at this point of life than spending time with Mal."

The couple has been married 63 years, and their love for each other is apparent—even during the tough times. "Mal can get angry and become aggressive," Bill explains, "but you just have to be patient and understand that it's not her. It's this terrible disease."

Terrible, indeed.

Discovered by German physician Alois Alzheimer, MD, in 1906, the disease we know today that bears his name still has no cure and continues to strip people of their very essence—leaving them with profound memory loss and damaging brain function.

Chuang-Kuo Wu, MD, Director of the Alzheimer's Disease and Memory Disorders Center at Rhode Island Hospital, has been treating Marilyn the past two years. Bill found his way to Dr. Wu after learning that a dear friend's wife, who also had Alzheimer's, was in a clinical trial at the nationally recognized center. "Bill came to me to see if Marilyn could be in a similar study," Dr. Wu says, "but unfortunately her case was different, and she was not an appropriate candidate."

Still, he was able to help her.

After a comprehensive evaluation, which included a careful review of Marilyn's medical history, a neurological examination, and a brain CT scan, Dr. Wu determined her stage of Alzheimer's had been misdiagnosed by another facility and she required changes to her care plan. "She had progressed to a moderate to severe stage



Marilyn and Bill Humphrey photographed in St. Croix, U.S. Virgin Islands, 2015

and needed different drugs to stabilize her cognitive condition and to minimize her behavioral symptoms."

Bill noticed the difference in Mal and was very appreciative of the care she received. So much so, that he sent a heartfelt letter to Dr. Wu and pledged a \$100,000 gift to help advance his groundbreaking work.

"I was moved beyond words by Bill's gesture," Dr. Wu says. "He knows firsthand what we are up against and saw how his friend's wife struggled as well. That experience motivated him to help—and his generosity will make a meaningful difference."

Specifically, supporting clinical services and research on leading-edge new therapies aimed to treat, delay, and ultimately prevent the symptoms of Alzheimer's and improve quality of life.

"I'd do anything to help stop this awful disease," Bill concludes.

INTERNATIONALLY RECOGNIZED EXPERT AIMS TO ELEVATE LIFESPAN'S THORACIC CARE



Dr. Abbas El-Sayed Abbas

In July 2021, Abbas El-Sayed Abbas, MD, MS, FACS, was appointed Chief of Thoracic Surgery, Lifespan, and Chief of Thoracic Oncology, Lifespan Cancer Institute. Here, the internationally recognized expert—who is renowned for his robotic surgical skills and clinical research in oncology—shares his thoughts on the position, meeting patient needs, growing the program, and the power of philanthropy.

Can you give us an overview of your role?

Broadly speaking, my role consists of providing care to all patients with thoracic cancers and for leading the team that delivers this care across Lifespan. Additionally, my responsibilities include education of our trainees and students, collaborating with Brown University investigators on research, and outreach to the community to expand understanding around the threats of lung cancer and the importance of screening and early detection.

How would you assess the current state of the program?

We are in a strong position today and ahead of the curve, in many respects. At Rhode Island Hospital, thanks to our extensive experience, we are providing minimally invasive robotic surgery for complex procedures that are routinely done in an open, invasive fashion elsewhere—even at neighboring academic centers. This approach offers the advantage of reduced pain and faster recovery. And we are launching a first-of-its-kind Lung Cancer Screening and Nodule Program at The Miriam Hospital to help the population of Rhode Island. So, we have a lot to be proud of. That said, the patient need here in Rhode Island is very real. To be honest, Rhode Island doesn't compare well in terms of incidence of cancer or smoking or preventive screenings. Lifespan is doing a great job, but there's still more to be done.

What is your vision for the future and what role does philanthropy play?

My goal is to create a world-class thoracic surgery and oncology program that not only provides treatment for patients with lung, esophageal, and other thoracic cancers and diseases, but also serves as a hub for groundbreaking research. It would also be amazing to build the operating room of the future right here at Rhode Island Hospital. One that would include the most advanced technology and equipment, which would greatly enhance our early-detection and treatment capabilities. Achieving this goal, of course, requires investment. So, philanthropic support is critical. Quite frankly, we could not realize this vision without it.

WITH *Gratitude*

A GRATEFUL PATIENT GETS WELL—AND GIVES BACK

Mike Foncellino says he was always a healthy guy. So, you can imagine his shock when his doctor's office called him—while he was out on a bike ride, no less—to tell him he had to get to an emergency room immediately. "The blood test I took the day before indicated that one of my kidneys was failing," he says, "I was stunned."

It was July 2020, and Mike remembers he "wasn't feeling great" and hadn't urinated in a day or so. But he thought that he might be coming down with the flu, something his wife Ann recently had. It was his children, Michael Jr. and Michele, who noticed his ankles were swollen and suggested he see his doctor in the first place.

Shortly after the call from his physician, Mike was at Rhode Island Hospital, where stents were inserted to help drain urine from his kidney. Once stabilized and admitted, he underwent an ultrasound imaging test, which detected a tumor. A biopsy confirmed it was stage 4 lymphoma. "I didn't know how severe it was at the time," Mike recalls, "Fortunately, I met Dr. O and his team."

"Dr. O" is Adam Olszewski, MD, hematologist–oncologist and researcher with the Lifespan Cancer Institute. Mike initially met with Dr. O in collaboration with Oncology Fellow Kathryn DeCarli, MD, who explained his condition and outlined an aggressive course of treatment to combat the cancer. "They said I needed six months of chemotherapy in cycles that ran 24/7 for five days followed by three weeks off," Mike explains. "They hit the nail on the head. It worked and I'm cancer-free!" Mike also credits his son-in-law, Jonathan Cornwell, a nurse anesthetist at Rhode Island Hospital, with being with him every step of the journey. "He was my wingman and my son, Mike, Jr, was always there for me on weekends at the Infusion Center."

A Brooklyn native, Mike still engages in the old-school New York habit of tipping people for a job well done—and even tried the practice with hospital staff. "I was told 'That's just not done here,'" he jokes. "But we found another way to show our appreciation. Me and Ann decided to make monthly donations to the LCI Malloy Strong Fund . . . That's our tip."



Left to right: Mike Foncellino, Jr.; Nurse Karen Niez; Mike Foncellino; Ann Foncellino; Dr. Olszewski; and Jonathan Cornwell.

A LASTING LEGACY TO A LIFE WELL LIVED



Nancy Kimball Beals and Kimberly Beals

“**T**he only thing she was missing was the halo and the wings.” That is how Kimberly Beals describes her Aunt Nancy, a best friend and now her guardian angel, who passed away last year at the age of 95.

Nancy Kimball Beals had a vibrant life that was intersected with tragedy and triumph. In her early 20s, she became the first person in the US to undergo successful limb re-attachment surgery after losing both her legs in a car accident in Providence. The groundbreaking operation was performed at Rhode Island Hospital’s Jane Brown Building. After her more than seven-month inpatient stay, despite this upheaval for Nancy and her family, she returned to living her best life possible.

Rising to every challenge with grit and determination, Nancy—who also became a 40-year breast cancer survivor—always maintained a joyful, can-do spirit. “Aunt Nancy was extremely abled bodied despite the accident,” Kim says, “and she wouldn’t have it any other way. She was an inspiration to many and was always generous with her time and encouragement to amputees or those challenged by life’s hard knocks.”

An avid golfer and champion skier, Nancy loved traveling, food, fashion, shopping, and maintaining close social ties with her many friends. She was also active in the community and charitable by nature, supporting several nonprofits, including Rhode Island Hospital.

‘Out of grace and gratitude’

Nancy’s father, Albert Chester Beals, founded the A.C. Beals Company in the 1930s, a respected contracting and masonry company where she worked as secretary and treasurer until retirement. Rhode Island Hospital was among A.C. Beals’ long list of clients. But for Chester, it was the exceptional, compassionate care his wife, Gladys, received at the hospital over the years for a variety of cardiopulmonary issues, coupled with the dedicated extended care his daughter received there, that inspired him to give back.

“My grandfather included the hospital as a beneficiary in the trust he established out of grace and gratitude for the care our family received,” Kim explains. “He also strongly believed that, if you were able, you should support your local hospital—because of the good it provides the community. My Aunt Nancy continued that charitable commitment for the same reasons.”

Planned giving

Thanks to this thoughtful bequest, Rhode Island Hospital is receiving approximately \$300,000. Planned gifts, which include donations like this, enable the hospital to continue its focus on excellent patient care, pioneering research, medical education, and technology. To learn more about how you can support the hospital with a planned gift, please visit us at lifespan.org/RIHLegacy or call us at **(401) 444-6412**.

FUND HONORS LATE CHIEF'S LEGACY, SUPPORTS GROUNDBREAKING WORK

Ten years ago, Richard Browning, MD, lost his courageous battle with pancreatic cancer. But his legacy lives on thanks to the committed individuals and generous donors who share his dream of a world free from cancer and are taking steps to make it a reality. "Rick never wanted to give up and we don't either," says his wife, Lisa, who is one of many vowing to preserve his memory and continue the fight against a devastating disease that has touched so many lives.

Dr. Browning was Chief of Anesthesia at Rhode Island and Hasbro Children's hospitals for over two decades. In 2013, the Browning Cancer Research Fund was established in his honor to support investigators conducting advanced research in pediatric and adult cancers. The fund also helps to pay for sophisticated equipment and the recruitment of top-notch staff.



Dr. Richard Browning

To date, more than \$420,000 has been raised through the fund and invested in efforts intended to better understand and treat cancer and, hopefully, to one day cure it.

Of that total, the majority has been contributed by Golf Fights Cancer (GFC), a nonprofit that taps into the passion and generosity of golfers and sports enthusiasts to raise funds for cancer-related organizations and families living with the disease. More specifically, Ted Fischer, a close friend of Rick's, has raised most of that amount through GFC by running the Boston Marathon 10 straight years; his last was in 2021.

"Running the marathon in Rick's name was my way of keeping him alive and with me," Ted says. "He was such a great guy and so committed to his patients. I still miss him."

The annual Browning Trivia Night, held at Rhode Island Country Club and organized by Andy Triebwasser, MD, along with gifts from the CVS Health Charity Classic Golf Tournament, and contributions from Lisa Browning, including the sale of her artwork, make up the remainder of the fund.

The Proteomics Core Laboratory on the Rhode Island Hospital Campus is one critical area being aided by the fund. "Thanks, in part, to contributions from the Browning Cancer Research Fund, we now have extremely high-tech tools in the lab that can study cancer at the single-cell level," explains Howard Safran, MD, Chief of Hematology/Oncology. "Among many other things, these tools help us understand how cancer cells signal and communicate and inform how we can interrupt their growth."

Promising news like that would be music to Rick's ears, Lisa says. "His love for this hospital was immense and he'd be so proud that we're keeping this program going and supporting the great work that's being done here."



Lisa Browning and Ted Fischer

NEW SPINE CENTER EXPANDS RHODE ISLAND HOSPITAL'S ALREADY INDUSTRY-LEADING CARE

Outside the common cold, back pain is the leading reason people visit their primary care physician. Fortunately, for patients across the Ocean State and beyond, the most comprehensive spine care in the region can be found right here, at the Norman Prince Spine Institute at Rhode Island Hospital.

Even better, is the expansion of those capabilities—paired with groundbreaking research—made possible with the recent opening of a new, state-of-the-art spine center on Eddy Street in Providence.

“What we have, you really can’t find anywhere else,” says Ziya Gokaslan, MD, who leads the Norman Prince Spine Institute and is Chief of Neurosurgery at Rhode Island and The Miriam hospitals. “Our program is fully integrated, meaning whatever specialty or service a patient needs can be found in one place.”

A vision becomes reality.

Recruited to Rhode Island in 2015 from Johns Hopkins, Dr. Gokaslan has long been considered one of the nation’s top neurosurgeons, having transformed the surgical treatment of primary and metastatic spinal tumors. From the moment he arrived on campus, he’s been thinking about this very moment. But Dr. Gokaslan is quick to deflect credit.

“This has been an incredible team effort,” he says. “We have built a neurosciences program that is very unique and that makes an incredible difference in our ability to recruit the best minds in the field to come work here.”

Home to world experts in everything from complex, rare diseases of the spine to the more common degenerative issues seen most often, the spine center has brought patients from as many as 20 different

countries to Rhode Island to seek care. Patients, however, are not all it attracts. With a highly competitive spinal surgery fellowship program that accepts two or three applicants per year, Dr. Gokaslan and his team are training the next generation of neurosurgeons. “They’re coming here as a result of the recognition our faculty have received,” he says, “and more importantly, they want to stay and practice and research here.”

Patricia Leigh Zadnik Sullivan, MD, an expert in spine tumor and chordoma research, joined the team earlier this year after completing the complex spinal surgery fellowship. And soon, Athar Malik, MD, PhD, a renowned neurosurgeon out of Boston, will join the faculty after a successful national search.

“It is amazing what we’re able to do to better the lives of our patients... We have all the elements in place to be the leading institution in North America.”

— Dr. Ziya Gokaslan

This recruitment, combined with the collaborative Center for Innovative Neurotechnology for Neural Repair (CINNR) laboratory, is helping to place Rhode Island Hospital’s spine program in a league all its own and with global ramifications. The CINNR is a partnership that also includes Brown University and commercial and government partners and seeks to develop technology for patients with spinal cord injury for the restoration of lower extremity use and bladder function.



Currently, the CINNR is in phase one of a multi-million-dollar Intelligent Spinal Interface study funded by the U.S. DARPA (Defense Advanced Research Projects Agency). For the study, two sets of electrodes are surgically implanted in the participant's spine—one above and one below the site of the injury. Through a set of wires, the electrodes transmit data to a computer and are later removed.

"This is groundbreaking, world-class stuff," says Dr. Gokaslan. "We're competing with the leading academic medical institutions in the country and we are succeeding. It has validated that we are on the right path."

The future is now.

In a field as constantly evolving as the neurosciences, there's no time to rest on your laurels, no matter how impressive the accolades. And it's a relentless pursuit to solve the unknown and realize the future today that drives Dr. Gokaslan and the entire neurosciences team.

This past summer, Rhode Island Hospital added two GPS-guided robotic surgical systems, making it the first site in New England to use the cutting-edge technology for cranial and spinal applications. The device, considered the next generation of surgical capabilities, enables surgeons to target circuits in the brain or in the spinal column for placement of spinal hardware to a level of precision within a millimeter or two.

What this allows for is the ability to alter the brain function to obtain a specific treatment for a specific disease. This means an ability to treat the tremors associated with Parkinson's disease, epilepsy, and even debilitating psychiatric problems like intractable obsessive-compulsive disorder.

"It is amazing what we're able to do to better the lives of our patients," finishes Dr. Gokaslan. "At the same time, we're just scratching the surface of what can happen in the neurosciences. We have all the elements in place to be the leading institution in North America."

Day OF Giving

10  WJAR



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DAY OF GIVING RAISES \$318,000

On Thursday, April 7, Rhode Island Hospital held its second annual Day of Giving telethon in partnership with NBC 10 WJAR. The event was an opportunity to celebrate our local health care heroes and their commitment to patient-centered care, while raising critical funds in support of the hospital's lifesaving mission. In total, more than \$318,000 was raised, with day of proceeds benefitting Rhode Island Hospital's Emergency Medicine Support Fund—which helps to advance initiatives aimed at improving the patient, family, and caregiver experience.

Throughout the day, viewers across the region tuned in to hear from grateful patients and hospital staff, who shared powerful and inspiring stories of courage and hope in the face of life-threatening health issues. Some viewers, including Amy Bergeron, were so touched by their own Rhode Island Hospital experience, it motivated them to give.

Amy's story

Amy was battling complications of thyroid eye disease (TED)—a rare condition where the immune system mistakenly attacks the muscle and fat tissue behind the eyes causing progressive inflammation and damage to eye muscles, eyelids, and tear glands and leading to the formation of scar tissue. Following her Rhode Island Hospital doctors' recommendation as her best course of action to remedy the vision issues she'd been having, Amy decided to move forward with the surgery to remove the thyroid gland.

As fate would have it, her surgery was scheduled at Rhode Island Hospital the same day as the telethon. Amy says all her experiences with Rhode Island Hospital and its staff have been positive and that the care she's received has been delivered expertly and with great compassion. So, when a communication about supporting the event found its way to the Bergeron's inbox, they knew what to do.

"The morning of the surgery, my husband and I received an email about the Day of Giving and felt like it was a sign," says Amy, who received the email because she's supported other hospital efforts in the past. "We were very right! The surgery process was scary for me, but the doctors, nurses, and all of staff really alleviated my fears and made the day one where I felt blessed and lucky. Without a doubt, the kindness, caring, and attention that I received from everyone confirmed that my husband and I were so right to donate during the Day of Giving."

To learn more about the amazing and inspiration stories shared as part of the Day of Giving, visit giving.lifespan.org/RIH/2022-DoG-Videos



Amy Bergeron with her family

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PATIENT DONOR PAYS IT FORWARD

Over a million total hip and knee replacements are performed in the US each year, with numbers projected to continue to grow.

Although these are highly successful operations, replacements, unfortunately, don't last forever.

Rhode Island Hospital stands out at the forefront of joint replacement surgery, providing state-of-the-art treatments with enhanced surgical techniques, and leading-edge technologies. And recent gifts from longtime supporters will only help to push the hospital's already stellar reputation to a higher level.

Kay Cooper has had the unique experience of having her hips replaced, and then years later revised, at Rhode Island Hospital. "The care I've received each time has been exceptional," she says, "and the hospital's commitment to research and development ensures its outcomes will only continue to get better in the future."

The opportunity to be a part of that future and help Rhode Island Hospital expand its capabilities is what motivated Kay and her husband, Leon, to make several donations to establish the *Innovative Orthopedics Research Fund*. "Leon is a scientist," she adds, "so I understand the importance of supporting the type of groundbreaking work the hospital is doing." Dr. Cooper is a Nobel laureate and was professor of physics at Brown University for more than five decades.

"The care I've received each time has been exceptional..."

— Kay Cooper

Derek Jenkins, MD, is an orthopedic surgeon with an engineering background, and performed both of Kay's complex revision surgeries. He says the Coopers' gifts are invaluable. "Their incredible generosity is enabling us to push the program forward in very tangible and meaningful ways," he says.

As the fund continues to grow, Dr. Jenkins' goal is to advance the field of hip and knee surgery through research aimed at improving success of reconstructing failed replacements and making first-time surgeries last longer and perform better. "In my career, I have had the privilege to work with and learn from some of the pioneers and masters in joint replacement surgery. The idea of the innovative research fund is to allow us to do our part in the current generation to move forward the art and technology of hip and knee arthroplasty that next step to benefit future generations of patients, as those that came before us did for us."

Hip and knee replacements are surgeries that many of us will benefit from in our lifetimes, Dr. Jenkins adds. So, making outcomes better could potentially impact a sizable proportion of the population. "The work we do transforms lives in very personal ways," he says, "and sharing that transformation with patients—that's the best part of the job."

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