our mission, our support

Howie Surgery Research Endowment Fund



Philanthropy has played a critical role in the development of the Department's research agenda and the "Howie" endowment has been foundational in this work, impacting every division across the department.

Named for Ruth and Raymond Howie, the Howie Surgery Research Endowment Fund was established in 1981 with a \$1.5M gift after Mrs. Howie underwent surgery at University Hospital, now UW Medical Center, where she met Dr. K. Alvin Merendino (pictured left). Dr. Merendino was a pioneer-

ing open-heart surgeon who led the team that performed the Northwest's first open-heart surgery in 1956 at Harborview Medical Center, and was Chair of the Department of Surgery (DOS) from 1964 until 1972. Dr. Merendino was passionate about research and innovation, and the Howies' gift and resulting dividends continue to be a tremendous boon to the department's research mission on multiple fronts.

Perhaps one of the most impactful uses of the Howie endowment has been in providing critical startup funding to new recruits who are interested in building a career grounded in research, thus helping to create new and innovative directions for research in the Department. This startup funding helps to defray the costs of protected research time and provides the necessary resources to hire lab staff, purchase necessary supplies, services and materials, and begin developing pilot data, methodologies and techniques that will help faculty researchers launch their careers and ultimately build grant-funded and sustainable research programs. The Howie endowment has supported many success stories: Dr. Farhood Farjah, Associate Professor in the Division of Cardiothoracic Surgery, and holder of the Endowed Chair in Lung Cancer Research, received support from the Howie Endowment. He is now an independently funded investigator who has gone on to receive an R01 grant from the National Cancer Institute. His research focuses on improving healthcare delivery and outcomes for individuals at risk for and/ or diagnosed with lung cancer. Dr. Venu Pillarisetty, an Associate Professor in the Division of General Surgery, is performing cutting-edge research to develop novel immunotherapy strategies for pancreatic and colorectal carcinoma. After receiving support from the Howie Endowment to fund his early work, he has gone on to receive two grants from the Department of Defense, numerous highly competitive grants from within the UW-FHCRC Cancer Consortium, and multiple grants from industry collaborators. More

"Why I Give"

Ronald V. Maier, MD, FACS, FRCS Ed (Hon), FCSHK (Hon), FCCS (Hon)
Jane and Donald D. Trunkey Professor and Vice Chair of Surgery
University of Washington School of Medicine
Surgeon-in-Chief
Harborview Medical Center

ve now spent nearly 39 years, essentially my entire surgical and academic career, at the University of Washington Harborview Medical Center. Why have I stayed and why do I contribute?

I have always found that the environment at Harborview Medical Center and at the University of Washington Department of Surgery has been



excellent for my personal maturation, clinical activities and research endeavors. I have had outstanding leadership, primarily with Dr. **Pelligrini**, and now with Dr. **Wood**, and have had numerous outstanding mentors both in and outside the Department of Surgery. The entire academic community at the University of Washington is full of colleagues and collaborators that are always willing to assist, support, and stimulate an academic milieu for promotion and success. In addition, I have had the wonderful opportunity to have had a clinical practice filled with challenging and fantastic patients, who have both tested me and helped me develop into an outstanding technical and caregiving physician. In addition, and potentially most importantly, I have always had the opportunity of being surrounded by extremely intelligent, challenging, and thus constantly stimulating trainees, including students, residents and fellows.

When one evaluates and considers the enormous benefits that have been given to me during my career in the Department of Surgery at the University of Washington and Harborview Medical Center, it becomes obvious that it is my obligation to not only return my efforts in the clinical arena, my intellect in research endeavors, and my commitment to my mentees throughout the years, but also to support and develop and enhance the infrastructure to allow for even further development of my colleagues and to generate a structure of support that will optimize the training and resilience for the next generation of clinicians, scientists, and caregivers. I give because there is a constant and chronic need for additional funds to support and create the additional components of the academic structure. I give because I owe to so many in my own career, that I wish to ensure the success and creativity for the subsequent generations. I have benefitted enormously from training and working in the UW Department of Surgery and I am so pleased to be able to return in some small part the great gifts I have received.

our mission, our support (cont.)

Howie Surgery Research Endowment Fund (cont.)

recent recipients of funding from the Howie Endowment have diverse research interests, ranging from global emergency care systems, palliative care, breast cancer surgery outcomes, to the development of novel biomaterials for use in pancreatic surgery.

Another important role of the Howie Endowment is to provide bridge funding to support ongoing research programs. The endowment has provided support for investigators who find themselves facing temporary gaps in external funding, to make for critical hires to support their lab or program, or to help advance an existing area of research into a new, cutting-edge direction.

The Howie Endowment is a critical resource in supporting the Department's research mission, helping launch clinician-researchers, providing pilot funding that will result in future grant funding, and helping to sustain their work or establish new areas of work when grant funding is not immediately available. A research portfolio as robust as ours depends on grateful patients, alumni, and friends of the Department who see the value in the innovative work we do, and we're incredibly grateful for their support. These gifts live on long after they given and make a truly meaningful impact on healthcare.



The John A. and Helen R. Schilling Traveling Surgical Fellowship

he multi-dimensional foundation on which young surgeon-scientists will build their research careers begins during their surgical residency. This period of immersion into learning about surgical diseases and developing clinical skills has the singular goal of developing safe and competent surgeons. However, this is also an ideal time to ignite an interest in research and provide the environment to obtain the skills and experience needed to embark on a career as a surgical investigator. The optimal environment includes a group of experienced surgeon-scientists as mentors, a departmental plan for integrating research training with clinical training, a culture that embraces evidence-based medicine in the care of our patients, and the financial resources needed to create a supportive research environment for our residents. The role of generous and ongoing philanthropy in this four-part foundation is critical.

Established in 1986, the John A. and Helen R. Schilling Travelling Surgical Fellowship sought to provide funding for residents to travel to other institutions for their research development and experience. It was also used for research development for potential faculty, a need Dr. John Schilling observed during his years as a distinguished member of our faculty. In 1996, the endowment was amended to reflect the robust research environment at UW and allowed funding for research experiences at UW laboratories. The Schilling Fellowship exists distinctly yet inseparable from the Helen and John Schilling Endowed Lectureship and Research Symposium in Surgery. Together, these gifts reflect Helen and John Schilling's devotion to the science and art of surgery and honor that tradition. Together, they provide the foundation of philanthropy in our department's mission to train future surgical scientists.



Support from the Schilling Fellowship has been used in a number of ways since it was established and has impacted the research education and training of dozens of our residents. The endowment has provided resident salary support either as a supplement to other funding, or in whole when other funding is unavailable but an excellent research opportunity presents itself. When our Department's T32 training program in trauma research lost funding from the National Institutes of Health for two years, interim salary support allowed us to continue resident research training and facilitated a successful application for renewed federal funding. This example is one of many, sometimes unanticipated, ways that endowment support can breathe new life into our training programs and even restore peerreviewed funding to our department.

our mission, our support (cont.)

The John A. and Helen R. Schilling Traveling Surgical Fellowship (cont.)

The endowment supports additional expenses and educational experiences that are critical to a well-rounded resident research experience. In years past, formal training in research skills was limited. The resident trainee would design experiments, analyze data and learn about the ethics of research, oftentimes on their own. The Schillings knew that a supportive environment was perhaps the most critical aspect of research training; maintaining and growing that environment is our collective goal. Research training must happen in a community rather than in isolation, and surgeon-scientists seek a much broader and sophisticated skill set than in past decades. Endowment support has enable the Department to increase the breadth and depth of the research experience of our trainees. Trainees now want to study the epidemiology of surgical conditions in a global context, they want to design clinical trials of surgical interventions, they want to learn how to lead teams that develop systems of surgical care, and they want to study the molecular biology of surgical diseases. The Schilling Fellowship has facilitated this aspect of research training by providing tuition support for advanced degrees. Philanthropic support is central to the continued growth of this robust environment that will foster research training experiences and improve the care of our patients.

The lesser-known stories behind the facts are just as interesting and often more compelling. This story has many plots but one reflects an important and perhaps unexpected consequence of the Schillings' vision and generosity: following Dr. Schilling's death, the endowment was again amended with an additional gift of \$1.8 million in July 2000. This gift was made possible by the sale of the Schillings' property on Lake Washington, which was sold to the City of Bellevue. Their expressed wish was that the City use this property to develop a waterfront park. This wish is now a reality and the park, located on Meydenbauer Bay, was recently completed and is open for all. This gesture of returning land to the community at large and using the proceeds from that sale for future public good through surgical research training serves as a reminder of the many benefits of giving back.

We are thankful for the vision of Mrs. Helen and Dr. John Schilling and for their ongoing support of resident research in our department. We look forward to building on their generosity by growing our foundation of philanthropic support in parallel with the continued growth of our cadre of mentors and the expansion of our research training programs.



"Why I Donate"

Jorge D. Reyes, MD Roger K. Giesecke Distinguished Chair Professor and Chief Division of Transplant Surgery University of Washington School of Medicine



We sometimes perceive our professional lives as being a somewhat narrow, albeit highly focused, aspect of the whole—separate from our personal lives, our families, and who we are outside of work. However, professional success does not happen in isolation. In order to be successful at work, one must balance a professional existence with family, friends, other interests, and general well-being. This balance, as opposed to a narrow focus, allows us to see more deeply into all aspects of our-

selves, to see what otherwise may go unperceived, and to see that which can be invested in all that we do. I understand this today as I write this, celebrating my 65th birthday.

I started donating to transplant-related causes more than 30 years ago, early in my career, with one of the first recipients being the Starzl Endowed Chair.

Not long after, I discovered Camp Chiopi, a summer camp for children ages 7-15 who have received liver and/or intestine transplants. The camp provides a non-clinical setting where campers can re-build self-esteem and interact with others with similar medical backgrounds. I was so touched by their mission that I designated them another recipient of my ongoing financial contributions.

My journey at the University of Washington has demonstrated to me the amazing work that has been done and continues to be done in the Department of Surgery, as well as my deep connection with this Department. Since I've started working here at the UW, I've expanded my philanthropy beyond transplant, with funds being funneled towards increasing diversity of our trainees and other educational initiatives. I am fortunate enough to be in a position to give back, to express my appreciation for all that I've been given. Giving begins with a thought, a donation, however small - and that gift grows as the work that it supports comes to fruition, benefitting our field, our patients, and each other.

I am so grateful for all that I have received in my professional life, for the privilege of having cared for our patients, and to be able to work with such wonderful women and men in our field and to see their growth as surgeons, healers, and scientists. I will always carry a sincere love for this department, the city, and the University of Washington, and I am so honored to be able to give back to them. Why do I give? In a nutshell, I give because of love.

our mission, our support (cont.)

"The Joy of Giving"

Dr. Nicholas B. Vedder
Professor of Surgery & Orthopaedics
Jamie Hunter Endowed Chair
Chief of Plastic Surgery; Vice Chair, Surgery
University of Washington School of Medicine



All of us faculty in DOS have come to learn the reality that many elements critical to career development in academic surgery and creating the future of the specialty (and subspecialties) of Surgery, rely on funding that doesn't exist in the traditional clinical funds flow of the Department or the University. They rely on endowments – monies that come from donations, not from clinical income. Only endowments allow us to develop and support our programs in ways no other funding source can, such as:

- faculty development including advanced education and degrees such as master's programs in research, education, and communication;
- providing critical startup research support that allows faculty and trainees to gather preliminary data necessary for application for independent research funding;
- educational opportunities for our residents and trainees;
- and, in all of these ways, allowing us to develop clinical programs to serve our community and provide the kind of "life rebuilding" care that is at the core of our life mission as surgeons.

Creating these endowments is not easy, though. Donations don't just fall from the sky; they require vision, dedicated relationship building, nurturing, but mostly – giving. When I joined the Surgery faculty in 1990, after having been a Surgery resident and Trauma Research Fellow in the '80's, my Chief and mentor, Dr. Loren Engrav, Professor Emeritus in the Division of Plastic Surgery, shared a key principle with me: the most effective way to raise money is to show how important it is to you by leading with giving yourself. That principle has been in my heart ever since.

Fifteen years ago, I had the good fortune to be able to help rebuild the body and life of a young woman who was nearly killed when a falling boulder crushed her on Mt. Adams. Her grateful family honored me by creating the Jamie Hunter Endowed Professorship in Reconstructive Plastic Surgery at Harborview, an endowed Professorship that I have held since. I have been fortunate to be able to use that endowment for all the critical areas I describe above, helping our program in Plastic Surgery more than double in faculty, residents, and clinical programs during that period.

In creating that endowed Professorship, Dr. **Carlos Pellegrini**, the most important leadership and "life mentor" in my life, demonstrated the power of Dr. Engrav's principle when he called to tell me that he and Kelly had just donated \$50K to the creation of the Hunter Professorship. I thanked him, hung up, and said to my wife, wow, we need to give \$50K, too. And that was the beginning of my passion for philanthropy.

Last year my wife, Susan Heckbert, MD, PhD, and I were able to realize a life goal of ours in becoming UW "Laureate" donors, with lifetime giving of \$1 million. This allowed us to double the size of the Hunter Endowment and make it an Endowed Chair, and to create an endowed Fellowship in Epidemiology in Susan's name. In addition to the incredible sense of gratification in becoming a UW Laureate donor, it comes with some nice perks, like free parking (the ONLY way you get free parking at the UW!); invitation to dinner with President Cauce, my hero, and her spouse at the President's home, Hill-Crest; our names on the wall of

Suzallo Library, and the annual major donor dinner in the Suzallo, greeted outside by UW mascot "Dubs." But, most importantly, giving comes with a tremendous sense of personal joy in knowing that you have helped create something that will ensure the future growth and development of what you have worked to build over your career. Creating the future.

But helping to create the future does not require a gift of \$1M. ANY gift to something that holds personal significance or meaning to you can help create the future. Several of our graduates have created endowment funds to support areas important to them. Vishal Kapoor created the "Vishal Kapoor, MD Endowed Fund for UW Residents in Plastic Surgery" to support educational opportunities and professional development for our plastic surgery residents. Emilia Ploplys created the "Emilia Ploplys, MD UW Plastic Surgery World Travel Endowed Fund" to support UW plastic surgery residents' participation in global surgery mission work. And, many of our faculty and alumni have contributed to these funds. In Plastic Surgery, I am proud to say that we have 100% faculty participation in UW giving every year. Whatever future is important to you, I urge you to give to it. In life, the more you give, the more you will receive in the end.



Dr. Nicholas Vedder and his wife Susan outside Suzallo Library with "Dubs." The Vedder's are Huskies for life!

our mission, our support (cont.)

"Not Forgotten"



Novelett Cotter and Christoph McKenzie

ovelett Cotter knew something was wrong with her son, Christoph McKenzie. The chest pain. Stretch marks that came and went. Extreme double-jointedness. In 2008, at 24, he was diagnosed: Marfan's syndrome, a genetic disorder that affects connective tissue and the aorta. Then came surgery — his weakened aorta was replaced with a mechanical valve. He took blood thinners and avoided exertion.

Two years later, the chest pains began again. Awaiting cardiac surgery at Harborview Medical Center, McKenzie started to convulse. As doctors rushed to revive him, his mother bolted from the room to call her sister, but when she tried to return, a young woman gently stopped her. Pulling Cotter aside, she explained that McKenzie was suffering from heavy internal bleeding and might not survive. Unfortunately, she was right.

In life, McKenzie was outgoing and affectionate, training to become a pharmacy technician. In death, he inspired the lives of two women: his mother and the young woman — **Sherene Shalhub**, MD, MPH, then a general surgery resident — who'd broken the news in the hospital hallway.

Shalhub never forgot about McKenzie. "He was so young, and it was so devastating for his mother and his family," she says. "It made me feel very helpless. I decided I wanted to learn as much as possible about Marfan's and try to help people have better quality of life and better outcomes."

In the meantime, Cotter grieved. The death was so sudden and unexpected. "We thought that he would be around for a long time," says Cotter." There would be health challenges, but we were prepared for that." Another source of grief: she thought that people would simply forget her son.

Years passed. Then, in early 2018, Cotter went to a nail salon for a manicure. While waiting her turn, she kept sneaking glances at a familiar-looking man who was sitting nearby with his daughter, trying to place him. Finally, she asked him if he was a doctor, and he said he was. A surgeon? Yes, he said, a vascular surgeon.

"I said, 'I'm Christoph McKenzie's mother,' and he jumped out of the chair and hugged me!" Cotter says.



Novelett Cotter and Dr. Sherene Shalhub

It turned out that this surgeon — **Ben Starnes**, MD, FACS, chief of UW Medicine's vascular surgery division and the Alexander White-hill Clowes, MD, Endowed Chair in Vascular Surgery — and Shalhub had both overseen McKenzie's care at Harborview. It also turned out that they had not forgotten the young man. Far from it. In fact, they wanted to create a memorial fund in McKenzie's name.

Starnes also told Cotter that Shalhub had dedicated her career to researching genetically triggered diseases of the arteries and aorta. "Suddenly, I remembered that lady who met me at the door," says Cotter.

Soon after, Starnes, Shalhub and Cotter met in person for an emotional reunion — and to plan the creation of the Christoph McKenzie Memorial Fund for Aortic Dissection Research.

"I wanted his family to know that because of their son, we're doing all this work," says Shalhub. "It's a way for people to support the research, helping to bring the resources together and advance science."

The first project supported by the new research fund is a risk calculator that will help assess a patient's genetic profile, family history and other factors to predict the likelihood of an aortic rupture like McKenzie's — and to enable doctors to offer earlier interventions to high-risk patients. With early diagnosis and a comprehensive care plan, Shalhub says, patients with Marfan's can have a better life expectancy.

For her part, Cotter is overjoyed that the research fund is one way her son can help others. And she's ready to help it succeed.

"If Christoph can make an impact on others who have Marfan's, then his death might not be in vain," his mother says. "On his behalf, I'll be working. I'll spend the rest of my days helping however I can."

Published in 2019 on **AccelerateMed.org**,

UW Medicine Advancement