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ANNUAL REPORT 2012

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## Thoracic Surgery Foundation for Research and Education



#### PRESIDENT'S MESSAGE

Dear Colleagues, Patients, and Friends:

As of February 1, 2012, The Society of Thoracic Surgeons (STS) assumed management of The Thoracic Surgery Foundation for Research and Education (TSFRE). This is an exciting opportunity and a fresh beginning for the Foundation. TSFRE's future is bright.

Since TSFRE's inception, funding cutting-edge research has been the hallmark of our mission. TSFRE has striven to foster the

development of surgeon scientists and aimed to increase the knowledge within our field. Through our own painstaking efforts and through your generosity, TSFRE resources have raised approximately \$11 million. TSFRE has supported over 135 thoracic research and fellowship projects and has awarded over 240 Alley-Sheridan Scholarships. While this is an incredible and lasting footprint and contribution, more work lies ahead. The need to help fund important research and education is as important today as it was 24 years ago, when TSFRE was first incorporated.

The pages of this report contain the names of hundreds of surgeons, corporate supporters, patients, and friends who have invested in the future of cardiothoracic surgery by supporting TSFRE. On behalf of those surgeons who have benefited from TSFRE's research and educational programs and the multitude of patients who will ultimately benefit from these programs, I would like to say thank you for your generous support.

On a personal note, I urge each of you who have not given to the Foundation in the past to do so now, and if you have given generously in the past, I ask that you consider another gift at this time. Making a donation is easier and faster than ever. You can click here or anywhere on this document's footer to be taken directly to the online portal, or flip to page 16 to complete and mail the TSFRE Donation Form. Such generosity will help us insure a bright future for young surgical scientists and excellent care for our patients.

Thank you for your support.

D. aluxanda Patterson MX

G. Alexander Patterson, MD President



American Association for Thoracic Surgery



The Society of Thoracic Surgeons



The Southern Thoracic Surgical Association



Western Thoracic Surgical Association

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1998-2000 **Robert B. Wallace, MD** 

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## Thoracic Surgery Foundation for Research and Education

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"Contributing to the TSFRE is an investment in the future of our specialty. Young, bright individuals are often attracted to a specialty by research opportunities. This experience might be the catalyst to a promising academic career."

– Douglas J. Mathisen, MD

## Thoracic Surgery Foundation for Research and Education

### **HISTORY AND PHILOSOPHY OF TSFRE**

The Thoracic Surgery Foundation for Research and Education (TSFRE) was established in 1988 as a 501(c)(3) not-for-profit charitable organization. Representatives from the four leading thoracic surgery societies - the American Association for Thoracic Surgery (AATS), the Society of Thoracic Surgeons (STS), the Southern Thoracic Surgical Association (STSA), and the Western Thoracic Surgical Association (WTSA) serve on the TSFRE Board of Directors, and each organization provides financial support to TSFRE. The Foundation represents all of thoracic surgery in the United States and its research and educational initiatives support the broad spectrum of thoracic surgery.

The mission of TSFRE is to foster the development of surgeon scientists in cardiothoracic surgery; increasing knowledge and innovation to benefit patient care. TSFRE is committed to increasing resources by enlisting the participation of all thoracic surgeons and others who support its purpose. TSFRE is also committed to developing future leaders and standard bearers of our discipline. To this end, the Board of Directors believes that all available income from donations should be put to use immediately so that awards may increase as donations increase.

TSFRE supports research and education initiatives to:

- Expand the specialty's knowledge about cardiothoracic surgical treatment options
- Enhance the care of patients with cardiothoracic diseases
- Develop the skills of cardiothoracic surgeons, both as surgeon-scientists and as health policy leaders

### Nina Starr Braunwald Awards



Nina Starr Braunwald (1928-1992) was the first Braunwald, MD and his family, friends, and colleagues have established the TSFRE Nina Starr Braunwald Research Grant and Fellowship Awards in memory of his wife. The Nina Starr Braunwald Fund is dedicated exclusively for research fellowship awards and research project grants for young women in academic

#### **2012 TSFRE AWARDS PROGRAM**

Since its inception, TSFRE has awarded and administered almost \$11 million in research grants, fellowships, and career development awards for thoracic surgeons. Awards are made after a rigorous examination of applications by the TSFRE Research and Education Committees, composed of outstanding research scientists.

Please visit the TSFRE Awards Page at www.tsfre.org for detailed information and applicant guidelines.

#### • **TSFRE Research Grant**

Operational support of original research efforts by cardiothoracic surgeons who have completed their formal training, and who are seeking initial support and recognition for their research. Awards of up to \$40,000 per year for up to two years are granted to support the work of early-career cardiothoracic surgeons (within five years of first faculty appointment).

#### TSFRE Research Fellowship

Support of up to \$30,000 per year for up to two years for surgical residents who have not yet completed cardiothoracic surgical training.

#### • TSFRE/NCI Jointly Sponsored Mentored Clinical Scientist Development Award (K08)

Support to outstanding clinician research scientists who are committed to a career in cardiothoracic surgery research and have the potential to develop into independent investigators. The award is up to \$150,000 in total additional matching funding over the five-year NCI award period.

#### TSFRE Alley-Sheridan/Leadership Program in Health Policy and Management Scholarships

TSFRE offers up to ten partial scholarships of \$2,500 to attend the Leadership Program in Health Policy and Management at the Heller School of Public Policy and Management at Brandeis University.

#### • **TSFRE Simulation Grant**

Support of a demonstration study for the application of simulation in thoracic surgery education.

Please visit www.tsfre.org to view TSFRE Awards offered in 2013.

#### **TSFRE RESEARCH COMMITTEE**

John S. Ikonomidis, MD - Chair Medical University of South Carolina Charleston, SC

James S. Allan, MD Frederick Y. Chen, MD Marc R. Moon, MD Richard G. Ohye, MD Thomas K. Waddell, MD Y. Joseph Woo, MD

#### **TSFRE EDUCATION COMMITTEE**

**Thoralf M. Sundt, MD – Chair** Massachusetts General Hospital Boston, MA

Duke E. Cameron, MD James I. Fann, MD Raj B. Lal, MD M. Blair Marshall, MD

#### 2012 RESEARCH AND EDUCATION AWARD RECIPIENTS\*

#### Stephanie H. Chang, MD

Washington University TSFRE Research Fellowship Immunoregulation of Lung Cancer by Natural Killer Cells

#### James M. Donahue, MD

University of Maryland TSFRE Research Grant Increasing Chemo Sensitivity to Esophageal Cancer Cells

#### Michael H. Kwon, MD

Brigham & Women's Hospital TSFRE Research Fellowship Isolated Left Ventricular Restraint Therapy for Heart Failure

#### Dilip S. Nath, MD

TSFRE Simulation Grant Children's National Medical Center Creation of a Novel Simulation Based Educational Paradiagm in Congenital Cardiac Surgery

#### Mark J. Russo, MD

University of Chicago TSFRE Research Grant *The Effect of Broader Geographic Organ Sharing on Survivals for Lung Transplant Candidates* 

#### Sai Yendamuri, MD

Roswell Park Cancer Institute TSFRE/NCI Mentored Clinical Scientist Award (K08) *MicroRNA Profiling to Predict Recurrence after Resection of Early Lung Cancer* 

\*Special thanks to the The Graham Foundation and its support of the TSFRE 2012 Awards.

### **TSFRE** Research and Education Award Funding (1993-2012)



### SCHOLARSHIP RECIPIENTS

Michael S. Kent, MD Kemt H. Kernstine, MD Sirish V. Parvathaneni, MD Cary S. Passik, MD Syed M. Quadri, MD **Justin T. Sambol, MD** Sai Yendamuri, MD

Total Alley-Sheridan Funding (1995-2012)\$920,655\* (242 Recipients)

> \*Amount reflected is in addition to TSFRE Research and Education Award Funding

## Thoracic Surgery Foundation for Research and Education

#### THE POWER OF FRIENDSHIP – THE ALLEY-SHERIDAN FUND



Inside a red barn in rural New York in 1955, David S. Sheridan developed the bubble principle that revolutionized how catheters, cannulae, and tubes are used in operative procedures and patient care. While the bubble principle was one of Sheridan's most significant inventions, it was not his only one. In fact, Sheridan held or shared more than 50 patents for innovation that greatly improved medical care. Sheridan might seem an unlikely source for inventiveness. He was born in 1908 to Russian immigrants. Sheridan worked for this father's parquetry flooring business from an early age, leaving school for good by 13.

David S. Sheridan, Inventor

The young man managed to save \$35,000, and in 1939 invested in an acquaintance's catheter manufacturing business. Although that relationship dissolved in 1945, Sheridan learned the intricacies of the manufacturing process. Armed with that knowledge and an inventor's inner drive, Sheridan began a lifelong career in manufacturing that brought countless innovations to the industry. Of course, Sheridan collaborated with others throughout his life. Dr. Ralph D. Alley, former head of the Division of Thoracic Surgery at Albany Medical Center, was one of them.



Ralph D. Alley, MD Former STS President

**Dr. Ralph D. Alley** was born in Bulson, India to missionary parents. He was a graduate of Yale Medical School and an Intern in Surgery at Yale-New Haven Hospital. Immediately following his six months as a surgical intern, he was called to active duty in the U.S. Navy, and 5 months later he found himself on a landing ship tank, receiving casualties a few hundred yards off the coast of Normandy on D-Day, June 5, 1944. After the war, he traveled to New Haven to be a Winchester resident in thoracic surgery. He moved to Albany in 1952, where he spent his entire professional career. Dr. Alley was a Founder Member of The Society of Thoracic Surgeons, and served as its Secretary from 1969-1974. He served on the American Board of Thoracic

Surgery, was a Regent of the American College of Surgeons, and served as STS President from 1975-1976. He was known as a spell-binding story teller, and he was a friend of thoracic surgeons and thoracic surgery.

Moved by his collaborator and friend's commitment to thoracic surgery, Sheridan donated \$1 million to TSFRE to establish the Alley-Sheridan Fund. The fund supported the development of an intensive course in management and health care policy at Harvard University's Kennedy School of Government. Currently the scholarship fund supports partial scholarships to attend the Leadership Program in Health Policy and Management at the Heller School of Public Policy and Management at Brandeis University. Since 1995, the Alley-Sheridan Fund has provided 242 scholarships to education training programs.

Through his generosity, Sheridan secured continued innovation in a field that greatly benefited from his inventiveness. Though both Mr. Sheridan and Dr. Alley are no longer with us, their legacies live on.

## Thoracic Surgery Foundation IIIII

### for Research and Education

#### WHY SUPPORT RESEARCH?

Research has made it possible for cardiothoracic surgeons to treat many of the defects and diseases that were not treatable 40 years ago. For the past four decades, the financial resources for this research came primarily from larger private, community, and federal agencies.

A great deal of research in cardiothoracic surgery was funded by revenues from clinical work. Fierce market pressures and health care reform measures now threaten these traditional sources of research funding. This poses a particular challenge to younger surgeon-scientists interested in cardiothoracic surgery. With current cutbacks in support of biomedical research, training opportunities heretofore available to surgeons have been curtailed or, as in some cases, even eliminated.

Why is research so important? **Today's research is the practice of tomorrow.** It's the starting point for all scientific advances. New forms of surgery, technologically advanced devices and lifesaving drugs could not have been developed without thousands of hours and millions of dollars first spent in basic biomedical research.

It is estimated that approximately 80 million Americans have one or more forms of cardiovascular disease. Coronary heart disease remains the leading cause of death among Americans. Total costs of cardiovascular disease in the United States are estimated at more than \$444.2 billion annually. Cardiovascular disease remains one of the most serious challenges facing modern medicine, and lung cancer is the most lethal of all the cancers.

The results of cardiothoracic research ultimately reduce the toll of cardiothoracic diseases and defects. Given the pervasiveness of cardiovascular diseases and lung cancer, today's research has the potential to improve millions of lives tomorrow.

Funding basic biomedical research to expand our understanding of thoracic surgery is vitally important. Still, it's only half the battle. The results of such research must be successfully transferred to patient care. Recent changes in the medical environment have meant that, increasingly, control over medical decisions has been wrested away from doctors.

There remains little doubt that a physician must understand health care policy in order to advocate on behalf of his or her patients and the profession.

There is a compelling need to continue developing the skills of cardiothoracic surgeons as scientists and as health policy leaders. TSFRE is an organization that is having a steering effect on cardiothoracic surgery through the sponsorship of cardiothoracic surgical research and the education of surgeons in health care policy.

#### TSFRE Funds at Work



Marc R. Moon, MD Joseph C. Bancroft Professor of Surgery Washington University 2001 TSFRE Research Grant *Pathophysiology and Treatment of Chronic Pulmonary Hypertension* 

"The TSFRE grant I received to support my research efforts during the formative years of my career were critical. It provided the support necessary to get my laboratory off the ground and provided essential peer-validation of my work during the NIH review process. If I could, I would like to personally thank each and every individual who played a role in my career development through their generous donations to the TSFRE over the years."

Making a donation is easier than you think-click here. TSRFE Annual Report 2012 | 9

# Thoracic Surgery Foundation **IIIII**

### for Research and Education

#### **GIVING OPPORTUNITIES**

Because TSFRE is a charitable organization with IRS 501 (c)(3) classification, your gift to TSFRE qualifies as a tax-deductible charitable contribution to the fullest extent provided by law. For some, an outright gift of cash, securities or other property is the best means of contributing. Other giving options are outlined as follows:

#### **GIFTS OF CASH**

A gift of cash is the simplest method of giving. It is tax-deductible as noted above and is not subject to gift or estate taxes. It is also fast and easy to donate online by visiting www.tsfre.org or by clicking here.

#### **GIFTS OF SECURITIES OR REAL ESTATE**

A tax-wise gift of stock or real estate can provide generous support for TSFRE. Almost any type of real property – a personal residence, a farm, a vacation home, a commercial building, or a parcel of land – can constitute a gift. Gifts of securities or real estate are tax-deductible and free of capital gains tax.

#### **LIFE INCOME GIFTS**

Perhaps you would like to make a significant gift to TSFRE right now but believe that you cannot because you need the income your assets earn. If so, you may want to consider a "life income gift". A life income gift allows you to donate, yet retain life income for yourself and another, if you wish. These gifts frequently increase your income, save income tax, capital gains, and estate tax and also benefit the Foundation.

#### **BEQUESTS**

You may wish to make a gift to TSFRE by utilizing one of the easiest, most frequently used methods – a bequest in your will. Tax laws favor bequests, and consequently, they are an excellent way to provide support. If you would like to make a pledge or receive more information about giving to TSFRE, please contact Priscilla Page, TSFRE Executive Director, by phone at 312-202-5868 or by e-mail at **ppage@tsfre.org**.

#### **TSFRE HERITAGE SOCIETY**

The TSFRE Heritage Society includes individuals and families who have provided for estate gifts to TSFRE. The 11 members listed below exemplify extraordinary commitment to TSFRE, and belief in the value of the work of the researchers that TSFRE supports.



John R. Benfield, MD Eugene Braunwald, MD Richard E. Clark, MD Vincent R. Conti, MD David A. Fullerton, MD Dr. & Mrs. Martin F. McKnea

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"My wife, Chris, and I contributed to TSFRE because we believe that it is important for our specialty to invest in its future. It is therefore important that Thoracic Surgery provide a mechanism to assist young investigators in launching an academic career. We have seen first-hand the tremendous impact that TSFRE has had upon the specialty of Thoracic Surgery. The research funded by TSFRE has not only advanced the state of knowledge in Thoracic Surgery, but it has provided for the success of young investigators across the country. They are the future of the specialty." <u>– David A. Fullerton, MD</u>

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#### **TSFRE 2012 Annual Donor Honor Roll TSFRE is extremely grateful to all its annual donors who** have given gifts of any amount in the 2012 Fiscal Year (July 1, 2011 – June 30, 2012)

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"Charity begins at home and TSFRE is our research and educational home for cardiothoracic surgeons."

– Lawrence H. Cohn, MD

### TSFRE Funds at Work



Christine L. Lau, MD Associate Professor of Surgery University of Virginia 2009 K08 TSFRE/NHLBI Grant Awardee Adenosine 2A Receptor Signaling in Lung Transplant Injury and Rejection

"The matching TSFRE/K08 award has been absolutely critical in allowing me to continue my research efforts. Together with the American College of Surgeons, the TSFRE generously provided matching funds for my NIH grant for five years. Without the TSFRE funds none of this would have been possible. I have had the opportunity to interact with top scientists in my field because of the freedom these funds have provided me. I am indebted greatly to the TSFRE and the ACS and hope to make them proud to have supported me."

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