

Healthy Futures in Sight

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are helping women actively
navigate their own
road to wellness

THE FUTURE OF FAMILY PLANNING

Broader choices and better
safety give new power to
women and families

WHOLE LIFE HEALTH

Helping women live their
very best lives through
patient-focused care

NAVIGATING SHIFTING RISKS

New research reveals how
pregnant moms are impacted
by the COVID-19 vaccine



MAGEE

MAGEE magazine is published two times a year for supporters of Magee-Womens Research Institute & Foundation.

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UPMC HIGHLIGHTS

By Niki Kapsambelis

Staying Ahead of Shifting Risks

UPMC COVID-19 vaccine study puts pregnant patients at the center of the conversation

IN THE ROUGHLY TWO YEARS

since COVID-19 wrought havoc on the world's population, science has learned a great deal about the virus rapidly changing treatment protocols and recommendations.

Moving forward, investigators at UPMC Magee-Womens Hospital and Magee-Womens Research Institute are working to bring pregnant people and their newborns into the conversation.

"We know that the vaccine is safe for pregnant and breastfeeding people. That was a big question a year plus ago," noted Katherine Bunge, MD, who is the hospital's site principal investigator in a national study of vaccinated pregnant and postpartum patients. "When the vaccine was first introduced, there was a lot of hesitancy due to safety concerns. In addition, people felt like they could reasonably avoid the virus if they stayed home. Fast forward to today, when we know the vaccine is safe, and the delta variant so much more transmissible that the risk-benefit assessment has completely shifted."

Dubbed MOMI-VAX, the study is designed to evaluate the development and durability of COVID-19 antibodies in people who were vaccinated while pregnant or during the first two months postpartum. The study also will assess vaccine safety and the transfer of antibodies to infants across the placenta and through breast milk.

UPMC Magee-Womens Hospital currently is one of 10 sites around the country that are participating in the study, which is led by the National Institute of Allergy and Infectious Diseases. Overall, the goal is to enroll 1,000 participants; locally, the hospital is enrolling 120.

"Magee is perfect because we have a central place where a lot of women deliver, and we have a lot of expertise," Dr. Bunge said. "The study itself takes quite a bit of coordination, and we have a great working relationship between clinical and research arms."

For example, umbilical cord blood provides an important sample for the study, and labor and delivery nurses are dedicated to collecting it, even if the delivery happens at 2 a.m., Dr. Bunge said.

Researchers are hoping to provide early findings in the first half of 2022, said Richard Beigi, MD, president of UPMC Magee and the study's national protocol co-chair. He explained that the study underscores an important goal for the clinicians and researchers at both the hospital and research institute.

"We have a culture that really wants to put women first and focus on areas that we feel have been underserved. Research during pregnancy is clearly an area that has been relatively underdone, and is incomplete," he said,



**Katherine Bunge, MD,
UPMC Magee-Womens Hospital**

"We have a culture that really wants to put women first and focus on areas that we feel have been underserved. Research during pregnancy is clearly an area that has been relatively underdone, and is incomplete."

noting that national development of the COVID-19 vaccine did not include pregnant people, leading to confusion about its safety and effectiveness.

UPMC Magee was a vocal advocate for changing national recommendations to encourage COVID vaccines in expectant mothers.

"We are confident that the vaccines are safe and effective for them, and we're dedicated to finding out more information for them," Dr. Beigi said. "We'd like to get to a point where, going forward, pregnant people are not an afterthought — they're front and center."

Inspiring Progress to Share

I hope this issue of MAGEE MAGAZINE finds the beginning of 2022 off to a healthy, happy start for you. At Magee-Womens Research Institute & Foundation (MWRIF), we are welcoming the new year with a fresh look for our magazine — a design that modernizes our publication while still embracing the scientific research, clinical care, philanthropic and patient stories you've come to expect.

Over the last two years, the COVID-19 pandemic has shown us how science can serve as a beacon of hope throughout the world. We have relied on scientific research to navigate the virus as it emerged, and we'll continue to depend on it as we address new variants. The speed with which vaccines were developed inspired us — now we need to work to get these vaccines to people who need them most, here at home and around the globe. Science is hope, but at MWRIF we know that translating scientific discovery into tangible, improved outcomes for women and their families is paramount.

We understand, for instance, that while vaccines have allowed us to return to many parts of our lives,

the pandemic's particular impact on women remains. From job loss caused because of economic instability to leaving the workforce to serve as caregivers for children or parents, women weathered significant financial burdens over the last two years. In this issue, we explore the importance quality of life plays for women and their families, and the research and clinical initiatives happening at Magee dedicated to this concern. We also take a look at clinical research focusing on developing and advancing better, safer contraception methods, including those that help prevent the spread of sexually transmitted diseases.

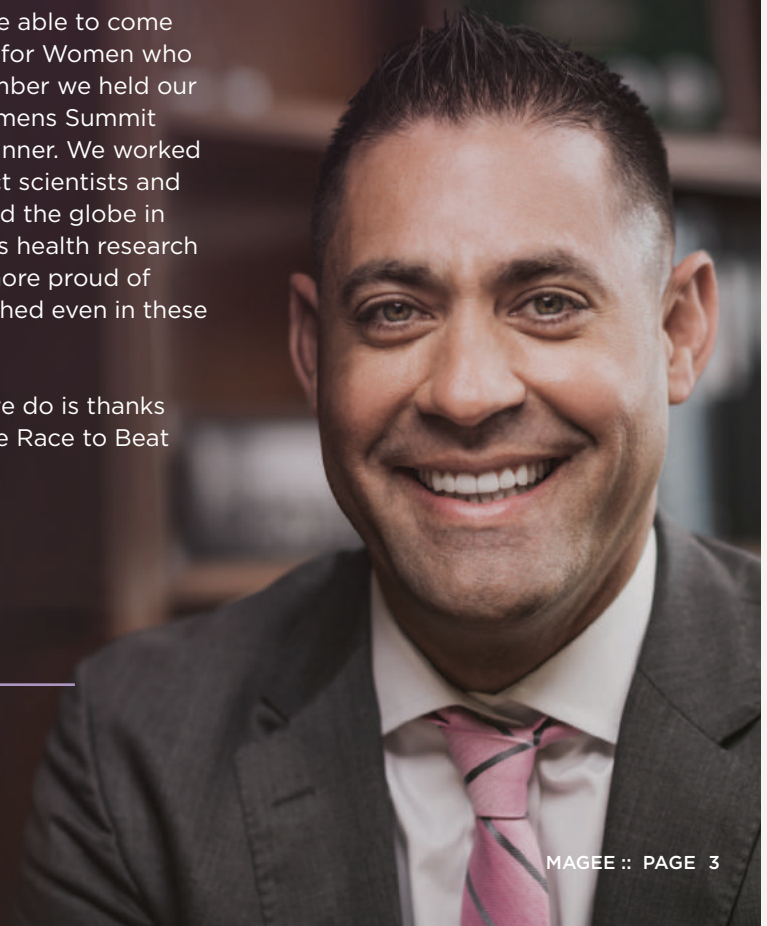
This issue is also a celebration. From our inaugural Race to Beat Women's Cancers, which raised over \$175,000 for breast and gynecologic cancer research and patient care initiatives to our signature fundraiser, Savor Pittsburgh, which is 15 years strong, the creativity and innovation from our partners has never been better. In October, we were able to come together in person for Women who Rock, and in November we held our second Magee-Womens Summit and Magee Prize Dinner. We worked together to connect scientists and communities around the globe in support of women's health research and I couldn't be more proud of what we accomplished even in these challenging times.

So much of what we do is thanks to our partners. The Race to Beat

Women's Cancers began as part of Diana Napper's determination to find affordable ways for people to engage in philanthropy, and it's just one small piece of her long-term dedication to women — particularly younger women with breast cancer. In this issue you can read more about her work, and the work of her organization, A Glimmer of Hope Foundation. We also feature the president and CEO of Coffee Tree Roasters, Jean Swoope. Through specialty roasted coffee beans and lattes, Coffee Tree Roasters' ongoing support of MWRIF, especially through the pandemic, has been invaluable.

Thank you for your continued dedication to women's health research. We truly believe that through improving women's health, we improve the health of families, neighborhoods and communities.

Michael J. Annichine
CEO



DONOR PROFILE

By Courtney McCrimmon

Determined to Make a Difference

A Glimmer of Hope Seed Funding Leads to \$3 Million Grant for Breast Cancer Research

“ONLY RESEARCH WILL CURE BREAST CANCER. I have great hope in research,” said Diana Napper. As the founder and president of A Glimmer of Hope Foundation (GOH), Napper has dedicated the last 25 years to fighting breast cancer. Her organization has raised money to support cancer research, patient support programs and research studies in premenopausal breast cancer throughout Western Pennsylvania.

Napper began her mission in 1994 to honor the wishes of her best friend, Carol Jo Weiss Friedman, who passed away from breast cancer in 1990. Originally a promise to fund a hospice in Carol Jo’s name, Napper realized her mission was bigger than she initially realized — she wanted to support breast cancer patients and their families as well as contribute to scientific research.

“Women with breast cancer are under extreme stress. They have to manage their diagnosis in addition to working and caring for their families. At A Glimmer of Hope Foundation, we acknowledge how much anxiety is tied up in a breast cancer diagnosis. We are committed

to funding initiatives that provide immediate comfort and support, while also supporting longer-term research projects,” said Napper.

GOH has funded integrative health services for breast cancer patients, including yoga, massage therapy sessions, acupuncture, transportation solutions and childcare. These initiatives align with Napper’s commitment to providing patients with support and comfort in real time, while through funding laboratory research, she embraces longer-term progress.

Recently, GOH’s support of liquid biopsy research at Magee-Womens Research Institute and UPMC Hillman Cancer Center led to a \$3 million grant from the National Institutes of Health for Adrian Lee, PhD, professor of Pharmacology and Chemical Biology, University of Pittsburgh; The Pittsburgh Foundation Chair in Precision Medicine; director of the Institute of Precision Medicine, and Steffi Oesterreich, PhD, Professor of professor of pharmacology and chemical biology, University of Pittsburgh; The Shear Family Foundation of Breast Cancer



Research; co-director of Women's Cancer Research Center, a collaboration between MWRI and UPMC Hillman Cancer Center; and co-leader of Cancer Biology Program at UPMC HCC.

"A Glimmer of Hope Foundation supported an observational study that allowed us to collect blood from women with breast cancer every time their disease advanced," explained Dr. Lee. "Essentially, we are establishing a blood bank to help us understand the mechanisms that cause breast cancer to spread. Our goal is twofold: we want to sequence the blood draws we've collected, and our collection to become a resource for researchers throughout the country."

According to Dr. Lee, the initial investment from GOH allowed researchers to build a unique resource that appealed to the NIH as well as other organizations.

"It's an investment that we believe is ultimately going to lead to a transformative understanding of our breast cancer knowledge," said Lee. "You can't overestimate the critical importance of seed grant funding like this."

"Research doesn't move quickly most of the time, but I don't find that discouraging," said Napper. "Collectively, we can all work together to make a difference, and I don't think there's ever been more hope than there is now."



"Only research will cure breast cancer. I have great hope in research."

Diana Napper

New Territory for Cognitive Decline Study

Research exploring the connection between pelvic floor surgery and cognitive decline extends to MWRI in Erie

OVER THE LAST THREE YEARS, MARY ACKENBOM, MD, A clinical investigator with Magee-Womens Research Institute (MWRI), has studied whether or not a link exists between pelvic floor surgeries and cognitive decline in older patients. Her research stems from clinical cases in which family members reported patients were not as mentally sharp since their surgeries. Last year, she was able to extend this research study to MWRI in Erie, an exciting development for recruitment and a new opportunity for patients in the area.

“The ability to recruit patients in Erie and its surrounding areas is fantastic,” said Dr. Ackenbom. “Anytime you can tap into a different geography, you are increasing representation, and that is always a good thing.”

In March of 2020, MWRI in Erie opened the doors to its Clinical Translation Research Center (CTRC), a state-of-the-art tele-research room that enables local research staff and trial participants to engage in study visits with Pittsburgh-based investigators. The tele-research room addresses the digital, transportation and financial barriers that have previously limited Erie-area women from access to novel studies aimed at improving scientific understanding of women’s health.

The CTRC allowed Marie Phillips to participate in Dr. Ackenbom’s post-surgical cognition study. A former licensed practical nurse with UPMC Hamot, she turned to the urogynecological team at Magee-Womens, UPMC Hamot when she began struggling with a prolapsed bladder.

“In my early 80s, my bladder began dropping,” Phillips said. “It led to a few complications, including recurrent bladder infections. My daughter encouraged me to have it corrected surgically, and I’m glad I took her advice. The entire team was wonderful, especially my surgeon, Dr. Sarah Napoe.”

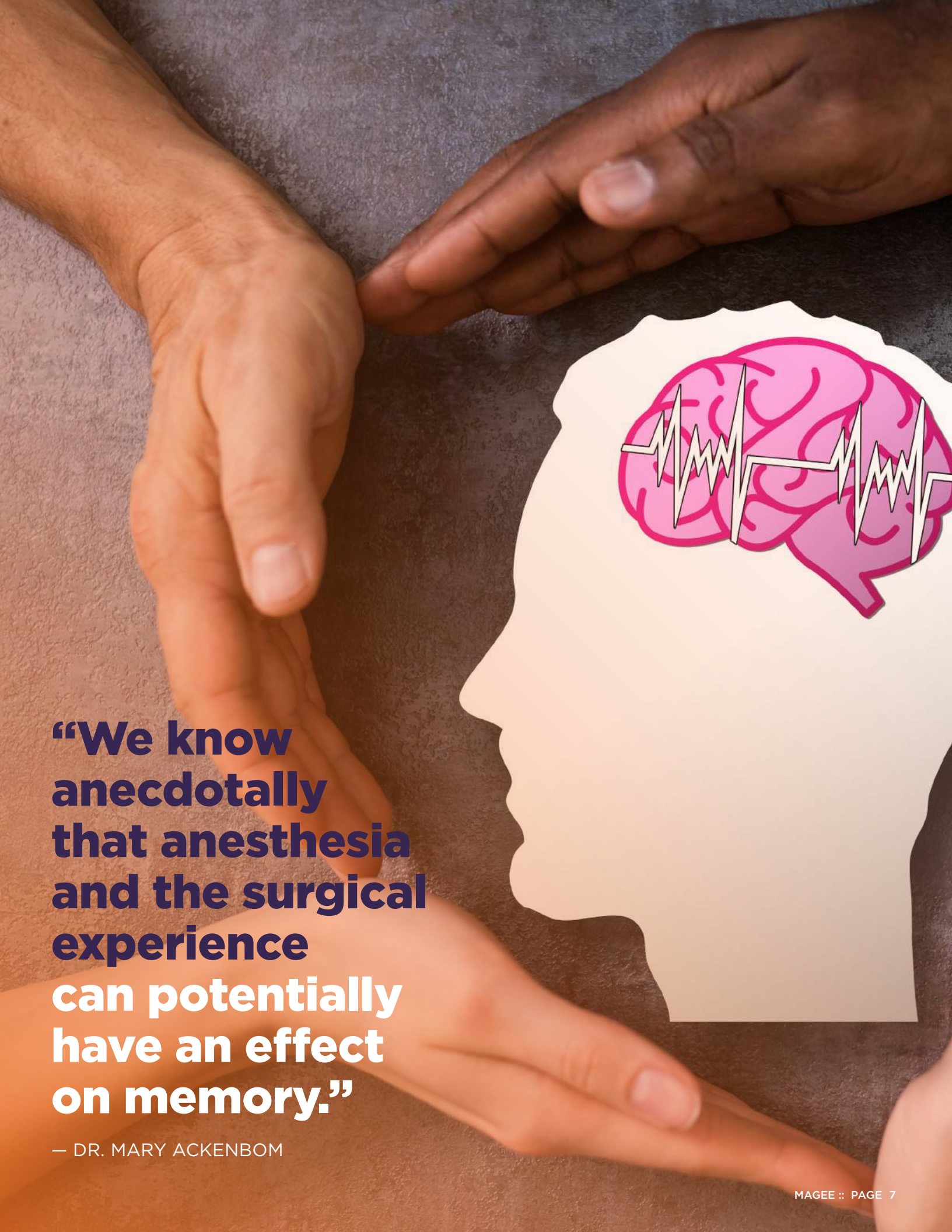
When the team presented the opportunity for the cognition study, Phillips eagerly agreed. “I live alone, and it can be challenging to remember at my age. The study really prodded my memory and I like knowing I helped with clinical research,” she said.

Dr. Ackenbom’s study explores a variety of physical and cognition functions, including walking speed, hand grip strength, pelvic prolapse symptoms, exhaustion levels and how well participants handle tasks like grocery shopping, paying bills and medication management. The assessments happen multiple times after the surgery, following women between two and three years, depending on the study in which they are enrolled.

“We want to understand what’s happening to women over time, and what role surgery plays versus what role the anesthesia contributes,” said Dr. Ackenbom. “We are also studying the role inflammation might play — both in the blood and in the brain. We think inflammation might be associated with other sorts of cognitive decline, and we want to know everything we can about what’s happening to these women post-surgery.”

Recently, Dr. Ackenbom received funding from the Tamara L. Harris Foundation to expand her study and look at impact of minor urogynecologic surgeries on cognition and everyday functioning. “We are curious to learn how minor surgeries may impact cognition and independence given that so many different factors can contribute to change in cognitive and physical abilities in the postoperative setting,” said Dr. Ackenbom.

“We know that anesthesia and the surgical experience can potentially have an effect on memory,” Dr. Ackenbom said. “Ultimately, our patients are undergoing elective surgeries, so it’s really important that we understand what could happen postoperatively, counsel our patients about this possible outcome, and learn how we can best intervene.”



**“We know
anecdotally
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— DR. MARY ACKENBOM

A 40-YEAR *Journey*



Seeking Solutions for Broader Choices and Better Safety, the Center for Family Planning Research Focuses on Contraception and Disease Prevention

WHEN IT COMES TO DECIDING WHEN and whether to get pregnant, women face a long journey: typically, close to 40 years of their lives.

Respecting this, it stands to reason that finding better, safer and more functional contraception to shape that journey is an important endeavor impacting millions of people.

Enter Magee-Womens Research Institute's Center for Family Planning Research, located in UPMC Magee-Womens Hospital. Established in 1994, the center focuses on developing and advancing contraceptive methods, including those that help prevent the spread of sexually transmitted diseases — particularly HIV, the virus that causes AIDS.

"What I like to tell people is that a woman's reproductive lifespan is wide," noted Beatrice Chen, MD, MPH, who is the center's clinical lead as well as the hospital's director of family planning.

She explains that, on average, an American couple wants two children, spends five years trying to become pregnant and 30 years trying to avoid pregnancy. "So, this is a very big part of a woman's life."

The Study to Support Progress

The center is home to several clinical research trials funded through govern-

ment, industry and foundation sources. Participants help test the efficacy of different birth control methods, reporting back not only on results, but also what it was like to use them.

Rachel Brickner began one study nearly 10 years ago, when she was in her mid-20s and dealing with a limited income while she attended graduate school.

"I wanted to be safe. I was not interested in getting pregnant, and I felt like I had very few options," she recalled.

She found an ad looking for clinical trial participants to test an intrauterine device (IUD), and she immediately joined.

"It was a miracle that I found it," Brickner said. "Not only could I get free birth control, which I desperately needed, I (also) was able to get consistent health care during a time when I was either uninsured or underinsured."

Moreover, she was glad to contribute to research that made birth control better for other people. She kept journals as part of her study requirements, answering questions about whether she used any other forms of protection, bleeding patterns, medical conditions, other medications she might be taking and any vitamins or dietary supplements she used.

When the study ended, Brickner stayed with the same form of IUD because she liked it so much. "Finding the right method for each individual



person is an important part of what the center studies,” Dr. Chen said.

“Birth control is not a one-size-fits-all type of product,” she added. “We need to have multiple types of contraception so people have options, so they can figure out what fits their needs at that specific time in their life.”

Greater Safety in Focus

While many hormonal products are currently available, other products might offer additional benefits, such as preventing HIV infection, or to treat crampy periods or heavy bleeding. The center’s investigators also want to make current methods safer, with fewer side effects, since side effects are a common reason people give for discontinuing birth control.

Seun Orikogbo, MD, joined a clinical trial at the center while she was still in medical school two years ago. The study tested whether an IUD that was already approved for use as contraception could also treat heavy menstrual bleeding, something Dr. Orikogbo had experienced for years.

“Being in medicine myself, I realized that a lot of the things we do come from people participating in research studies,” she said. “It took me years to realize that what I was experiencing was abnormal and there was something I could do about it. It was life-changing. People don’t talk about periods. They don’t talk about sex.”

Now a second-year resident in urology, Dr. Orikogbo went through an extensive screening process — including a transvaginal ultrasound, endometrial biopsy, pregnancy and other tests, and an extensive family and medical history — before she was accepted into the study. But the results were worth it. Prior to the trial, she bled through tampons and pads and

became anemic; after getting the IUD, she could get by with pantyliners.

“It was absolutely amazing,” she said. “Especially for me, being a surgical resident, there are times when my cases are so long, I’d be concerned when I was on my period that I’d bleed through my scrubs.”

Once the study ended, Dr. Orikogbo opted to stay on the IUD, and she was happy not only to have found relief for her symptoms, but also to have assisted in building knowledge for other women.

Women Helping Women

“It’s really important to help the people who come after you,” she said. “I felt very safe, I knew exactly what was going on, and any time I had a question, I could ask someone about it.”

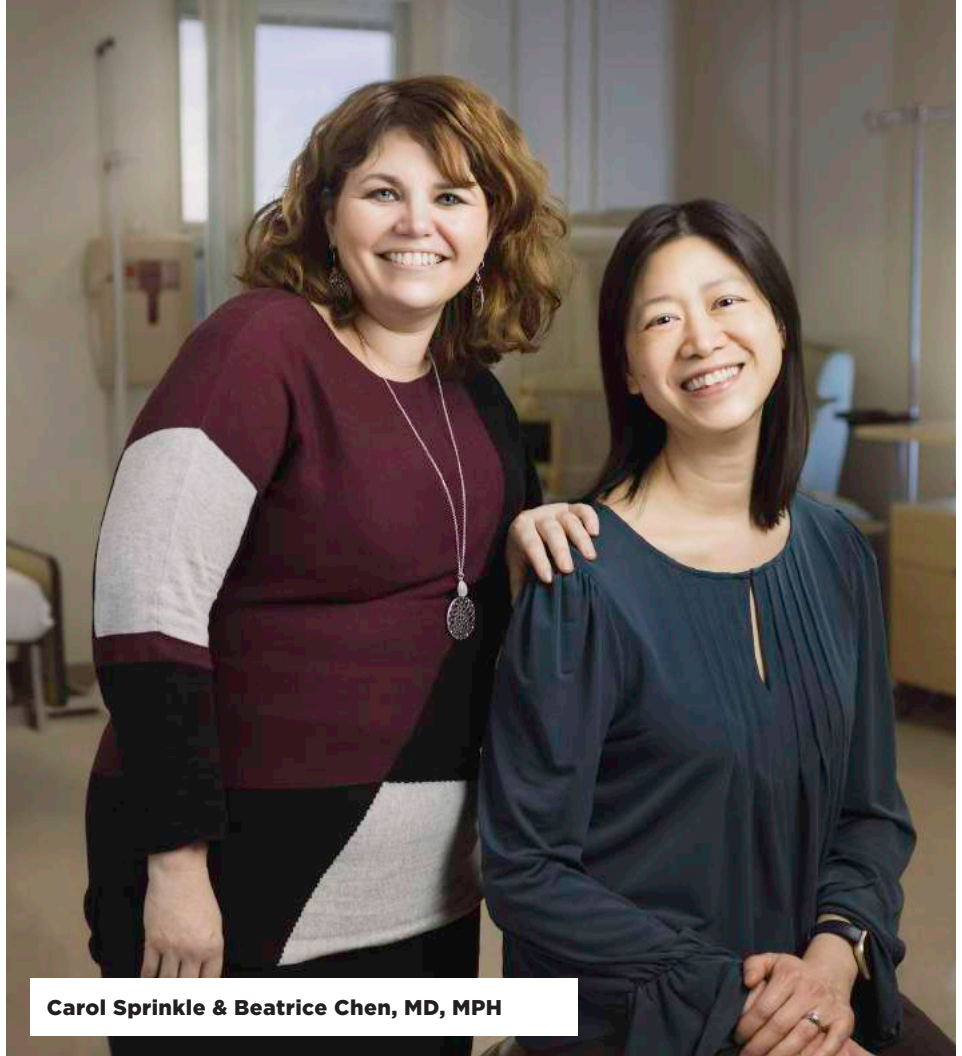
That’s the goal of Carol Sprinkle, the center’s research operations coordinator, who has been in her current role since 2007. “It starts with the very first communication or interaction with the participant and letting them know that questions are welcome,” she said. She also makes a point to discuss any procedures that happen as part of the trial.

Sprinkle is particularly proud of the fact that so many participants decide to repeat the experience in another trial: “I think that’s fantastic, and demonstrative of their experience here and their commitment to the research.”

Among the many completed and ongoing studies at the center are a test of the Dapivirine ring, which is a slow-release silicone ring inserted in the vagina that is designed to protect users against HIV infection while reducing potential side effects. Another study that Dr. Chen is anticipating involves creating a model of the female reproductive tract to better understand drug delivery within the uterus.

“It took me years to realize that what I was experiencing was abnormal and there was something I could do about it. It was life changing. People don’t talk about periods. They don’t talk about sex.”

— DR. SEUN ORIKOGBO



Carol Sprinkle & Beatrice Chen, MD, MPH

PHOTO CREDIT: Gregory Neiser

The Dapivirine ring has received pre-qualification from the World Health Organization and is under review by the FDA for approval. An upcoming study will combine the Dapivirine ring with a common contraceptive hormone, levonorgestrel, in hopes of developing a multipurpose product that can work for both HIV and pregnancy prevention. Another study that Dr. Chen anticipates involves creating a model of the female reproductive tract to better understand drug delivery within the uterus, in conjunction with collaborators at MWRI and State University of New York at Buffalo.

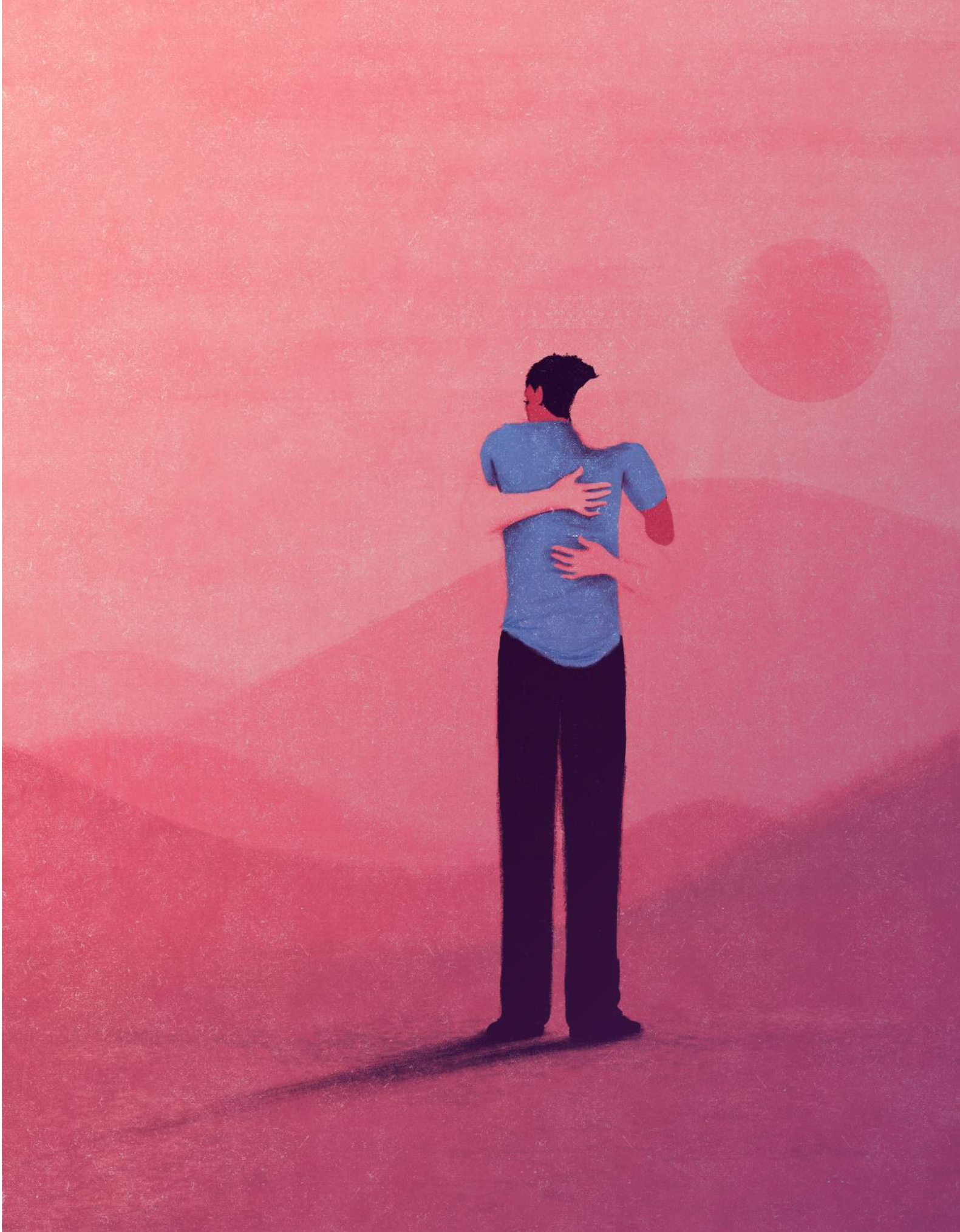
From Discovery to Practice

Since starting at the center as a fellow training in family planning in 2006, Dr. Chen has seen several products move from clinical trials into the hands of people who can actually use them. That journey from discovery to prac-

tice is one of the aspects of her work that she finds most exciting.

But she is also focused on ensuring that participants understand and can speak up when they are concerned or have questions, so they know they can trust the research: “Trying to ensure that we listen to people’s voices for what they’re looking for, what they trust, what’s important to them: that’s also important in development of [contraception] methods,” she said.

For her part, Rachel Brickner said she always felt heard. “I felt so safe with them,” she said of the center’s team. “They were so willing to slow down and answer any questions I had, not only about the study, but my overall health, too ... they learn really personal things about you. It’s a really interesting and special relationship to have. Being part of something that I personally think is so important was really meaningful to me.”



GETTING OUR ARMS AROUND WELLNESS

How Patient-Focused
Care Empowers Women
to Live Their Best Life

From unrelenting knee pain to debilitating bleeding, from surprise incontinence to the frustration of weight management, chronic health issues can be exhausting and, at their worst, rob women of living to the best of their ability.

01.

Quality (of Life) Control

At Magee-Womens Research Institute (MWRI) and UPMC Magee-Womens Hospital, clinical researchers are studying communication methods and treatment protocols that explore improving quality of life for women with a variety of conditions that, while not life-threatening, can very much threaten quality of life. It's a concept Nicole Donnellan, MD, director of the Chronic Pelvic Pain and Endometriosis Center at Magee and MWRI researcher, uses often.

"At our center, we see patients with bleeding and pain so debilitating they can't get out of bed some days," said Dr. Donnellan. "They also sometimes experience endometriosis-related infertility. They have pain with relieving themselves, pain during sex. Pelvic pain and endometriosis can affect all facets of their lives. The surgery I do isn't necessarily life-saving, but what does your life look like without treatment?"

The difficulties in diagnosing pelvic pain and endometriosis, combined with the all-too-common treatment delays women experience, propelled Dr. Donnellan to spearhead the creation of the center, which seeks to improve early diagnosis and treatment of pelvic pain disorders and advance research progress for the condition. The clinic embraces a unified team approach to patient care, providing patients with the opportunity to meet with

gynecologists, psychiatrists, physical therapists and surgeons during the same visit.

"There are so many elements that contribute to pelvic pain conditions," said Dr. Donnellan. "Many women have been told for years their pain is all in their head, others have undergone unnecessary treatments or had poor pain management. Others have been completely dismissed. The opportunity to meet with a comprehensive team of pelvic pain experts, who work together in developing a diagnosis and treatment plan, is a huge relief to these women."

An extension of the center is the Chronic Pelvic and Bladder Pain Clinic at the UPMC Lemieux Sports Complex in Cranberry, Pennsylvania. The clinic, which opened at the beginning of April 2021, already is outgrowing its capacity. It offers medical intervention, including physical therapy as well as cognitive and behavioral health services.

Patient feedback about the clinic has been overwhelmingly positive, according to Pamela Moalli, MD, PhD, director of the Division of Urogynecology & Pelvic Reconstructive Surgery. And that, in turn, has been gratifying for the clinic's staff.

Another of the division's key initiatives is the new MOMMA Postpartum Healing Clinic, which opened in November 2020 and offers focused consultation for women with injuries related to childbirth. (The name comes from Streamlining and OptiMizing Maternal pelvic floor health after childbirth.)

Because pelvic floor prolapse and stress urinary incontinence are so closely linked to maternal birth injury, Dr. Moalli's hope is that the clinic's

more proactive approach will have a positive impact on patients later in life.

“To me, understanding the pathophysiology so we can implement preventive measures is really the key to the puzzle,” she said. “That, we believe, will put Magee at the forefront in reducing maternal birth injury and, as a result, future pelvic floor disorders.”

02.

Raising the Bar

According to Anthony DiGioia, MD, coordinator of the new Center for Bone and Joint Health (CBJH) at UPMC Magee-Womens Hospital, there is now a much higher expectation from patients to actively live longer and better. To support these patient goals, the new collaborative center leverages the interdisciplinary community of practice at Magee, which includes the Midlife Health Center, Osteoporosis Care, Bariatrics and Nutritional Support, Pain Management, and Western Wellness Mental Health Services.

The CBJH rooted its mission and goals in themes directly derived from patient feedback and research in musculoskeletal care. The Center seeks to identify and address health disparities with a focus on early evaluations and ‘personalized care’, which is developed by co-designing with patients and communities to better address their needs.

But personalized care alone is not enough. Patients, providers, and community members must also be educated about the importance of caring for your bone and joint health in living an active lifestyle longer, as well as disparities and risk factors correlated with gender, race socioeconomic status, and others.

“Education is a key component of our mission. Education of the community, patients, and providers, especially when it comes to gender-specific health disparities.”

— DR. ANTHONY DIGIOIA

Clinical staff agree that listening to their patients is a key element in improving a patient’s health condition and her overall wellness.

Dr. DiGioia and the Magee collaborators use a listening tool called “What Matters To You?” (WMTY) to understand each patient’s priorities and set treatment goals based on those indicated priorities.

“We have to understand our patients’ needs – what a good quality of life looks like to them,” said Dr. DiGioia. “Do they want to be able to play on the floor with their grandchildren or run a marathon? Those are very different needs and could require different treatment plans.”

According to Dr. DiGioia, there are a wide variety of factors that come into play when it comes to caring for women. Women tend to postpone evaluations because they put other family members ahead of themselves. They handle and process pain differently, and even certain muscle groups behave differently in women than in men.

Dr. DiGioia and the members of his team encourage patients to consider their health and wellness beyond what’s happening with their condition, be it arthritis, osteoporosis or something else. The program process begins with multiple phone calls, incorporating “What Matters to You?” and motivational interviewing, which invite patients to consider their readiness to change and address any barriers that might affect progress. From the goals patients indicate, a personalized treatment plan is created.

Guided by the patients’ priorities in the treatment plan, the CBJH connects other services and support that address the at-times complex and overlapping health needs. For example, patients with arthritis may require nutritional support to improve their dietary health as well as screening for osteoporosis with

a bone density scan. Throughout the process, patients check in with the CBJH coordinator, who provides accountability and support as patients move toward meeting their goals.

“Co-morbidities affect pain. Smoking, your body-mass index, depression, anxiety — these are all known factors we now work to address in advance of any surgery. We embrace a whole person health approach, which puts patients in the driver’s seat and surrounds them with services and support to influence improved health outcomes,” said Dr. DiGioia.

03.

Thinking Outside the Clinic

John Harris, MD, a principal investigator with Magee-Womens Research Institute (MWRI) and director of the Center for Women with Disabilities at UPMC Magee-Womens Hospital, has witnessed first-hand how obesity impacts the care women receive over the course of their lifetimes.

“There is this idea that weight is completely under your control, and it’s simply not true,” said Dr. Harris. “For women with obesity, I believe we should ensure we are providing the very best possible care on every other front of healthcare. Let’s make sure we do everything else extraordinarily well.”

Like the centers led by Drs. Donnellan and DiGioia, the Center for Women with Disabilities takes a holistic approach to caring for patients. Whether they are facing physical or intellectual disabilities, or a combination, patients who visit the clinic are guaranteed their woman-specific care will be the priority.

“As a physician, I want to know my patients are living their best lives, so I encourage them to try eating healthier and being more active. The truth is people really struggle to lose weight — we need to find other ways to help them,” said Dr. Harris.

For patients and clinicians, the commitment needed to improve chronic conditions can often be challenging and results can feel incremental.

“Physicians are very solution-oriented,” said Dr. Harris. “We want to help people, to solve problems. But not every patient can be fixed with a procedure or medication. Chronic care requires a special dedication, and patients grow frustrated. It requires humility from providers and from patients.”

The centers’ treatment approaches are informed by research designed to improve physician-patient communication and treatment outcomes. “Cures — completely solving a medical problem — are fairly rare,” said Dr. Harris. “Learning to ask better questions, to really hear the patient and what matters to them, makes a longer-lasting, day-to-day impact than almost anything else. Quality of life is a spectrum. A small shift or a large shift toward a better quality of life is an improvement that changes people’s lives every day.”

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— DR. JOHN HARRIS

RESEARCH ON

By Niki Kapsambelis

Celebrating

Positive

Outcomes

Diagnosis, Teamwork Play Key Roles in Potentially Life-Threatening Birth

TO SEE TINA OWENS-SCHMIDT JOGGING

just a couple of months after delivering her second baby, you might never know she faced a serious complication beginning in her second trimester. In fact, had she delivered 10 years ago, her condition might have resulted in a drastically different outcome.

But thanks to advances in diagnostics and careful planning on the part of her obstetrical team, both she and her baby are healthy — a credit to the research that preceded her pregnancy, as well as the clinical care it informs.



After a complicated pregnancy and extensive team effort, Tina and her healthy daughter enjoy a moment of rest and celebration of life.

A Watchful Eye

At her 20-week ultrasound appointment, Tina was diagnosed with placenta previa, meaning the placenta was lying very low in her uterus, covering all or part of the cervix. The condition is relatively common, occurring in about one in 200 pregnancies. During a follow-up ultrasound eight weeks later, the previa persisted; at 34 weeks, her team noticed not only the previa, but also lacunae, or lakes, in the placenta — a possible indicator for a more serious condition known as placenta accreta.

Occurring in about one in every 1,000 - 2,000 pregnancies, placenta accreta occurs when the placenta grows too deeply into the wall of the uterus. Instead of separating from the uterus after birth, the placenta becomes a source of uncontrolled bleeding. In some cases, it can be fatal.

“It’s a big deal. It’s life-threatening,” said Stephen Emery, MD, who works both as a clinician at UPMC Magee-Womens Hospital and a researcher with Magee-Womens Research Institute. “The right diagnosis really matters — because if you overcall it, you do an unnecessary hysterectomy. And if you undercall it, the patient can lose a lot of blood fast.”

To prevent such severe blood loss, which can be life threatening, the clinical team may plan to deliver the baby via cesarean section and then perform a hysterectomy to remove the mother’s uterus.

In Tina’s case, at 35 weeks, she met with her Maternal-Fetal Medicine team at the hospital to discuss plans for her delivery. Though her diagnosis was not definitive, the team prepared as though she did have accreta, planning to deliver her by cesarean section and remove her uterus if necessary.

At 46, Tina was not planning additional pregnancies, so she agreed that a hysterectomy was the best option. “Obviously, my health is very important, making sure I’m there for my kids,” she said. “The team was really informative, and I felt O.K. with it. I felt that preparedness is key in these cases.”

A Team Approach

Such deliveries require a lot of multidisciplinary planning, including clinicians from a variety of disciplines and operating room staff, notes Arun Jeyabalan, MD, who adds that UPMC Magee-Womens Hospital is a referral center for accreta cases. “One of the most important aspects in the scenario of some degree of uncertainty is to be prepared,” she said.

Dr. Jeyabalan said the team is always trying to improve its procedures, coordination and planning; Dr. Emery notes that additional research could improve both procedures and diagnosis, which is crucial.

Magee-Womens Research Institute collects data and specimens from placenta accreta spectrum disorders through the Steve N. Caritis Magee Obstetric Maternal & Infant Database and Biobank, which is available to researchers who are interested in the topic.

A Happy Outcome

On June 21, 2021, Tina went in for her scheduled delivery. “I remember lying on the table when they were prepping me for the C-section,” she said. Her obstetrician, Sarah Rogan, MD, explained the procedure again; Tina’s husband, Eric, came in for the Cesarean delivery of their daughter, Elaina Jane.

The team saw the accreta and immediately put Tina under general anesthesia, at which point Madeleine Courtney Brooks, MD, performed the hysterectomy as planned. Both procedures were a success.

Tina lost slightly more blood — 1.5 liters — than a normal cesarean, but because the team had planned so carefully, she got a half liter of her own blood and did not require any other transfusions.

By that evening, Tina was up and walking, and eight weeks after delivery, she was making plans for additional exercise. “I feel very positive about my experience. I don’t think the outcome could have been better,” she said. “I needed the people who were prepared to be in that room, so their plan worked.”

Early Detection Personalized Treatment

New Investigators Seek
Innovative Solutions for
Women's Health Through
Better Understanding

TWO NEW INVESTIGATORS AT MAGEE-WOMENS RESEARCH INSTITUTE (MWRI) SET OUT TO PROVE THAT WHEN IT COMES TO DISORDERS AND DISEASES OF THE FEMALE BODY, BETTER UNDERSTANDING YIELDS BETTER APPROACHES.

Katrina Knight :: PhD

Building on her graduate and post-doctoral work with Steven Abramowitch, PhD and MWRI's Pamela Moalli, MD, PhD, Dr. Knight is developing new products for use in pelvic organ prolapse repair. Complications from the use of polypropylene mesh to hold pelvic organs in place after they've prolapsed — or begun to bulge into the vagina — have created a dilemma for doctors and their patients that Dr. Knight would like to solve.

"Right now, the options in terms of treatment are limited, especially since they removed transvaginal meshes off the market," said Dr. Knight. "We need to have better treatment options. We need to understand what is causing the complications with synthetic mesh and find a better solution so that women can have a better quality of life."

As a bioengineer, Dr. Knight has her sights set on developing a novel device that would shift mesh composition from polypropylene, which she describes as a very stiff netting, to something more tissue-like. Her strategy for avoiding common mesh complications — such as pain, erosion and even organ perforation — is to use computational models and 3D printing to develop a product tailored specifically for use with female pelvic organs.

"We're kind of designing a mesh from the ground up because [earlier devices] were based on hernia products," said Dr. Knight. Over time it has become apparent that one mesh does not fit all, which is why customizing materials for women's bodies is optimal. "Women are the mothers of the world," she explained. "We give birth to everyone. [And] vaginal



Katrina Knight, PhD



T. Rinda Soong, MD, PhD, MPH

birth is one of the highest risk factors for prolapse.” She’d like to provide women a product that was developed and tested with their bodies in mind.

Dr. Knight is the newest scholar in the Building Interdisciplinary Research Careers in Women’s Health (BIRCWH) Program, which pairs junior members with senior faculty mentors who share similar women’s health research interests. Dr. Knight is also a mentor herself, having co-founded a community program that provides promising inner-city youth with supplements to classroom education. With her scientific background, she’s eager to bring STEAM (Science, Technology, Engineering, Arts and Mathematics) education into the program in hopes of cultivating interest in these fields at a young age.

“I love to mentor,” Dr. Knight said. “I believe you always have to pay it forward and mold the next generation.”

T. Rinda Soong :: MD, PhD, MPH

Pathologist and epidemiologist Dr. Soong has made crucial discoveries in the quest for early detection and prevention of high-grade serous carcinoma (HGSC). HGSC is the most common type of ovarian cancer and also has the highest mortality rate, which is why

understanding its development carries such high stakes.

“Most women already have high-stage disease when they are diagnosed with HGSC,” said Dr. Soong. “That’s why focusing on the prevention and early detection of this cancer is really important.” However, she added, “current efforts have been limited by our incomplete understanding of its natural history. We may be missing precursors for these tumors.”

While ovarian HGSC is believed to originate in the fallopian tubes, Dr. Soong and colleagues are investigating the subset of cases in which precursors, or early indicators for the disease, are in fact not readily identified in the fallopian tubes. Her studies have yielded a concept called “precursor escape,” in which precancerous cells may migrate from the fallopian tubes to the peritoneal cavity before developing further.

Discovering the path that these cells take in becoming tumors could have implications for tumor prevention as well as detection. Current risk-reducing interventions typically include the removal of both fallopian tubes as well as the ovaries — with resulting side effects. A better understanding of the origin and development of HGSC can

help clarify whether this is the best surgical intervention. Dr. Soong is hopeful that her research will lead to finding “a way to optimize preventative strategies that would have minimal impact on quality of life.”

Dr. Soong currently collaborates with several of her MWRI colleagues, including Ron Buckanovich, MD, PhD; Anda Vlad, MD, PhD; Lan Coffman, MD, PhD; Sarah Taylor, MD, and Francesmary Modugno, MS, PhD, MPH.

“All of us are working toward reducing mortality in women suffering from this disease and improving its early detection among women with genetic risk of developing HGSC,” Dr. Soong said. “I hope that I can join hands with other researchers in creating a better world for women who have HGSC and those who are at increased risk for developing ovarian cancer.”

Dr. Soong has also teamed with Steffi Oesterreich, PhD and Adrian Lee, PhD, to analyze breast lesions in invasive lobular carcinoma, which accounts for about one in 10 invasive breast cancers. Her aim is to better understand the development of particularly aggressive variants of the disease to aid in the development of more targeted therapies.

Providing Support to Change the Way the **World Treats Women**



There are many ways to support Magee-Womens Research Institute & Foundation. The most common, and immediately impactful, is to make a gift of cash. However, planned gifts are often made with assets such as securities, real estate, artwork, retirement plan assets, donor advised funds, and insurance policies. Many of these gifts come with unique tax benefits. You can make a gift from just about any type of asset you own.

Ways to Make a Gift:

**Bequests and Beneficiaries • IRA Charitable Rollovers • Appreciated Stocks
Life Insurance • Real Estate and Other Property**

Magee-Womens Research Institute & Foundation may be designated as the beneficiary of Charitable Remainder Trusts, Charitable Lead Trusts, and Charitable Gift Annuities but will not serve as Trustee.



For Magee-Womens Research Institute & Foundation and its partners, 2021 hosted two inspirational fundraising events: the in-person return of Savor Pittsburgh, celebrating its 15th anniversary, and the Race to Beat Women’s Cancers, with a knock-out inaugural outing.

Special events help to raise critical support and awareness of women’s health research.

Savor Pittsburgh



Savor Pittsburgh said “Cheers to 15 Years” on September 2, with 300 guests enjoying an epicurean menu prepared by seven award-winning Pittsburgh chefs. Set under the stars at Nova Place, guests experienced a night of music, silent and live auctions, and a luxurious seven-course wine dinner presented by UPMC Health Plan and Coast & Main Seafood & Chophouse.

Guests were greeted by a champagne wall, then mingled and perused an array of luxury items and experiences to be auctioned off throughout the evening all generously donated by sponsors, including Coyote Outdoor Living.

Joan Ellenbogen, who attends the event annually, “loved the new format,” adding that “it allowed guests to relax

and truly take in the experience. I also think everyone learned so much about the cause we were there to support.”

Speakers highlighted the impact research and funding have on patient care. Stephen Emery, MD, was surprised by 2-year-old Emery Greene Mullen, a patient named for him and the team of surgeons who successfully performed Pittsburgh’s first in-utero spina bifida corrective surgery on her in 2019.

“Witnessing this beautiful moment captured so perfectly what we all believe: that supporting research can change lives,” said Christina Dickerson, founder and president of Dickerson Creative Communications, who orchestrated the event.

The Race to Beat Women’s Cancers

Over one thousand people participated, both virtually and in person, in the inaugural Race to Beat Women’s Cancers 5K Run/Walk, held September 5 at North Park. Hosted in collaboration with A Glimmer of Hope, UPMC Magee-Womens Hospital and Foundation and UPMC Hillman Cancer Center, this celebration of survivors raised over 179,000 in support of women’s cancer research and patient care.

Runners warmed up to inspiring rock anthems spun by the Women Who Rock crew before emcee Mike Clark of WTAE-TV introduced a series of speakers, including Glimmer of Hope Founder

Diana Napper, UPMC Health Plan’s Ellen Beckjord, PhD, MPH and MWRIF Chief Executive Officer Michael Annichine.

Special guest Dr. Mehmet Oz then took the stage to offer words of inspiration. “I’m more optimistic about women’s cancer [now] than in my entire career,” said Dr. Oz, adding that early detection and advancements in precision medicine have made us “a nation of survivors.”

When the goal is to erase women’s cancers, Adrian Lee, PhD, sees a clear path to the finish line: “Research is the means to the end.”

The following grants awarded are funding invaluable, groundbreaking work to improve women's health on a global scale. This research acts as the foundation of progress on topics that are aimed to ensure improved health, survival and quality of life for all women, mothers, and children.



Mary Ackenbom, MD, received a 3-year, \$507,000 K23 grant from the National Institute on Aging entitled "Evaluating the Association between Surgery and Subsequent Cognitive Function, Everyday Functioning, and Independence."



Ron Buckanovich, MD, PhD and Anda Vlad, MD, PhD, received a 1-year, \$406,000 R41 SBIR grant from the National Cancer Institute entitled "Development of a Therapeutic Monoclonal Antibody Against EGFL6, a Mediator of Tumor Growth and Metastasis."



Judy Chang, MD, MPH, received a 5-year, \$2.9 Million R01 grant from the National Cancer Institute entitled "Testing a Clinician and Patient Intervention to Promote Smoking Cessation Among Pregnant Women."



Stephen Emery, MD, received a \$180,000 competitive grant from UPMC's Beckwith Institute entitled "Fetal Aqueductal Stenosis Ventriculoamniotic Shunting."



Alisse Hauspurg, MD, received a 3-year, \$465,000 R21 grant from the National Institute of Biomedical Imaging and Bioengineering entitled "Development of a Smartphone-based Device to Detect Fluid Overload Among Postpartum Women with Hypertensive Disorders of Pregnancy."



Sharon Hillier, PhD, received a \$125,000 5-year collaborative agreement with the US Agency for International Development entitled "Microbicide R&D to Advance HIV."



Adrian Lee, PhD and Steffi Oesterreich, PhD, received a 5-year, \$2.93M R01 grant entitled, “Estrogen Receptor Fusions Genes as Drivers of Endocrine Resistance in Breast Cancer.”



Jerry Schatten, PhD, received a 5-year, \$1.9 Million R25 grant from the National Institute on Aging entitled “Advancing Native American Diversity in Aging Research through Undergraduate Education (Native American ADAR).”



Pam Moalli, MD, received a 5-year, \$2.9 Million R01 grant from the National Institute of Child Health and Human Development entitled “Mesh Complications: The Role of Local Mechanical Stresses on Tissue Remodeling Following Mesh Implantation.”

Jerry Schatten, PhD, received a 5-year, \$1.7 million R25 grant from the National Institute of Allergy and Infectious Diseases entitled “Frontiers in Emerging, Reemerging and Zoonotic Diseases and Diversity.”



Steffi Oesterreich, PhD, and Adrian Lee, PhD, received a 5-year, \$2.86M R01 grant entitled, “Credentialing Models of Invasive Lobular Breast Cancer for Translational Research.”



Anda Vlad, MD, PhD and Ron Buckanovich, MD, PhD, received a \$60,000 Diversity Supplement grant from National Cancer Institute, supporting their trainee, Julia Knight, for her work on their current R01 entitled, “ALDH Inhibition as Modulator of Tumor Immunobiology.”



Dave Peters, PhD, received a 4-year, \$2.53M R01 grant from the National Institutes of Diabetes and Digestive Kidney Diseases entitled “Non-invasive Analysis of Methylated Cell-Free DNA in Necrotizing Enterocolitis.”



Judith Yanowitz, PhD, received a \$497,000 S10 grant from the National Institutes of Health entitled “Leica STELLARIS Confocal to Power Women’s Health Research.”



Yoel Sadovsky, with co-PI Tony Huang (Duke University) received a 5-year, \$2.6M R01 grant from NIH/NICHD entitled, “Acoustofluidic Separation of Placental Nanovesicle Subpopulations in Obstetrical Diseases.”



Halina Zyczynski, MD, received a 1-year, \$251,000 award from the National Institute of Child Health and Human Development as an administrative supplement to her “Pittsburgh Pelvic Floor Research Program” network grant.

Yoel Sadovsky, MD, received a 5-year, \$2.6M R01 grant from the National Institute of Child Health and Human Development entitled “Acoustofluidic Separation of Placental Nanovesicle Subpopulations in Obstetrical Diseases.”

HAPPENINGS

Due to the international COVID-19 pandemic, some of these dates are subject to change. Please visit www.mageewomens.org/events for the most current event schedule.

mar. 19

WOMEN'S HEALTH SYMPOSIUM

WHERE: RITZ CARLTON, NAPLES, FL

Don't miss this unique opportunity to interact with world-class scientists as they discuss the latest medical breakthroughs in women's health research and how these breakthroughs might impact you.

► For details, go to www.mageewomens.org/events. To RSVP, call 412-641-8950 or email csdemail@upmc.edu. Space will be limited so please register early.

may 2-4

ONCOFERTILITY CONSORTIUM CONFERENCE

WHERE: THE WYNDHAM GRAND HOTEL, PITTSBURGH, PA

The Oncofertility Consortium explores the reproductive future of cancer survivors. The Consortium will bring together academics, healthcare providers and community leaders from across the country to expand current knowledge, clinical practice and training for a wide spectrum of issues in oncofertility.

► For details, go to www.oncofertility.msu.edu/annual-oncofertility-consortium-conference-2022.

may 14

19TH ANNUAL BID FOR HOPE (HOSTED BY A GLIMMER OF HOPE FOUNDATION)

WHERE: EDDIE MERLOT'S, PITTSBURGH, PA

This event, which supports breast cancer research, will feature NFL Hall of Famer Alan Faneca, who played 13 seasons with the Pittsburgh Steelers, New York Jets and Arizona Cardinals. Join us for an evening including heavy hors d'oeuvres, cocktails and an auction. Mix, meet and mingle with former and current Steelers greats.

► For tickets and details, go to www.symbolofthecure.com/bid-for-hope-xviii.

june 12

33RD ANNUAL LIVEWELL SURVIVORSHIP CELEBRATION

WHERE: THE PRIORY, PITTSBURGH, PA

Join us for an inspiring morning of education, conversation and celebration. You will hear from specialists to guide you through your journey. The event also features a keynote speaker, raffle and our powerful candle-lighting ceremony to celebrate survivorship.

► For sponsorship opportunities, call Denise Wickline at 412-641-8911 or wickdc@mwri.magee.edu. RSVP by June 1 by calling 412-641-8950 or emailing csdemail@upmc.edu. For details, go to www.mageewomen.org/events.

june 26

19TH ANNUAL KIDS & CRITTERS NICU REUNION

WHERE: PITTSBURGH ZOO & PPG AQUARIUM, PITTSBURGH, PA

All Magee and Children's Hospital NICU graduates and their families are invited to attend. Proceeds benefit the NICU family initiatives at Magee.

► For sponsorship opportunities, contact Denise Wickline at 412-641-8911 or wickdc@mwri.magee.edu. For details, go to www.mageewomens.org/2022NICUReunion

june 26-27

15TH ANNUAL NOAH ANGELICI MEMORIAL GOLF EVENT

WHERE: SHEPHERD'S ROCK GOLF COURSE AT NEMACOLIN WOODLANDS RESORT, FARMINGTON, PA

Join us for a full day of golf at the beautiful Shepherd's Rock Golf Course. Proceeds benefit the Center for Advanced Fetal Intervention at Magee.

► For sponsorship opportunities, contact Jane Klimchak at 724-350-2940. For details, go to www.noahshouseofhope.com.

Our events are designed for you to celebrate, enjoy, learn and grow with us as we work to improve the health of women worldwide. We hope to see you at a future function where funds raised go directly to work in our labs and to ongoing patient research programs.

july 25

5TH ANNUAL PARS FOR POSTPARTUM DEPRESSION GOLF OUTING

WHERE: EDGEWOOD COUNTRY CLUB, PITTSBURGH PA

Full day of fun and golf to benefit postpartum depression program at Magee.

► *For sponsorships, details and registration, contact Nicole Dimanov at 412-641-8950, dimanovnm2@mwri.magee.edu or go to www.mageewomens.org/PARS.*

aug. 18-19

4TH ANNUAL PITTSBURGH PENGUINS ALUMNI ASSOCIATION "CAST FOR A CURE"

WHERE: HOMEWATERS CLUB, SPRUCE CREEK, PA

Enjoy two days of relaxing fly fishing with Pittsburgh Penguins alumni. Proceeds benefit the Nicole Meloche Memorial Breast Cancer Fund at Magee-Womens Research Institute, established to fund metastatic breast cancer research.

► *For sponsorship and team opportunities, contact Denise Wickline at 412-641-8911 or wickdc@mwri.magee.edu. For details, go to www.mageewomens.org/events.*

sept. 8-9

10TH ANNUAL WCRC FLY FISHING CLASSIC

WHERE: HOMEWATERS CLUB, SPRUCE CREEK, PA

Enjoy two days of fly fishing competition at the beautiful HomeWaters Club. Proceeds benefit the Women's Cancer Research Center's efforts to reduce the incidence and death from women's cancers.

► *For sponsorship opportunities, contact Denise Wickline at 412-641-8911 or wickdc@mwri.magee.edu. For details, go to www.mageewomens.org/events.*

What's Happening **Highlights**



sept. 4

RACE TO BEAT WOMEN'S CANCERS 5K RUN/WALK

WHERE: NORTH PARK BOATHOUSE, PITTSBURGH, PA

Join us for our 2nd annual 5K as we honor those affected by breast, ovarian, cervical and endometrial cancers. Whether you run or walk, your participation and fundraising efforts will play a major role in the efforts to advance women's cancer research and patient care.

► *For sponsorship opportunities, contact Janice Devine at 412-641-8973 or devineja@mwri.magee.edu. For details go to www.mageewomens.org/5K.*

oct. 15

5TH ANNUAL WOMEN WHO ROCK CONCERT

WHERE: STAGE AE, PITTSBURGH, PA

Women Who Rock connects all women through the power of music and helps to educate, support, and fund women-centric health research and music endeavors. We "Rock the Future of Women's Health" and shine a spotlight on women in music. Proceeds benefit women's health research.

► *For sponsorship opportunities, contact Melinda Colaizzi at 412-576-7776 or melinda@pitchconsult.com. For details, go to www.womenwhorock.info.*

GENEROSITY IN ACTION

By Courtney McCrimmon

From Customer to CEO

Coffee Tree Roasters' Jean Swoope Embraces Philanthropic Support for Magee



THE GREEK PHILOSOPHER

Heraclitus once said that the only constant in life is change. For Jean Swoope, the phrase is a serious understatement. Over the last 2 1/2 years, she's moved from a successful career in medical sales to assuming the president and chief executive officer positions with Coffee Tree Roasters, all while raising her two teenage children. The change in direction came after her husband passed away in the spring of 2018.

"Bill was incredibly passionate about his work," said Swoope. "He loved coffee, and coffee shops, and he enjoyed sharing his knowledge of coffee roasting with others."

Bill Swoope, along with his father, founded the Pittsburgh-based coffee business. In fact, Jean and Bill met at his Squirrel Hill location. In 1993, the newly-opened Coffee Tree Roasters featured specialty coffee drinks and roasted beans. Jean, then a nurse, would stop in on her way to work. "We talked every morning, and eventually worked our way to a date," laughed Swoope.

The couple shared a love of coffee, travel and family, and looked forward to starting their own. When they found it difficult to get pregnant, they turned to the Center for Fertility and Reproductive Endocrinology at UPMC Magee-Womens Hospital.

"We both wanted kids so much — it was a very big deal to us. And we were

lucky — in vitro fertilization worked really well. We underwent the process two times, and we had two wonderfully healthy kids," said Swoope.

For the Swoopes, the next several years were dedicated to raising their children and growing their careers. Jean moved from nursing to working in medical sales and Bill continued to develop the Coffee Tree franchise, adding locations and lines of business. It wasn't until after Bill passed away unexpectedly and Jean began leading Coffee Tree Roasters that a new relationship with Magee began.

UPMC Magee-Womens Hospital was looking for a coffee provider for its cafeteria and Garden View Café. They approached Swoope about the possibility of Coffee Tree Roasters filling this void, and she recognized an exciting business opportunity, as well as the chance to work with the hospital that made her a mom in the first place.

"I wouldn't celebrate Mother's Day if it weren't for Magee," said Swoope. "I'm so grateful to my team there."

Over the course of establishing a Coffee Tree Roasters location within UPMC Magee-Womens, Swoope met Magee-Womens Research Institute & Foundation (MWRIF) partners and fundraisers. Through these introductions, she began discussing opportunities to give back to the hospital for which she feels so passionately.

"I wouldn't celebrate Mother's Day if it weren't for Magee, I'm so grateful to my team there."

— JEAN SWOOPE

"I had the opportunity to meet with Christina Dickerson, who does so much for MWRIF through Savor Pittsburgh. Between conversations with her and members of the Foundation, we developed a variety of initiatives where a proceed of our coffee sales benefit women's health research," said Swoope.

In October, Coffee Tree Roasters created a pink latte in recognition of breast cancer awareness month, with 25 cents from every drink sold donated to MWRIF. And in May of 2021, when in-person fundraising events were still on hold, they introduced two new coffee blends — Maui Mama and Mellow Mama, and all the sale's proceeds were donated to MWRIF.

"Partners like Coffee Tree Roasters who supported us through the pandemic with flexible, creative fundraisers made such a difference," said Janice Devine, executive director of development for MWRIF. "They've helped us re-define fundraising, and we are so grateful for their support in a time of such uncertainty."

Thank You

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