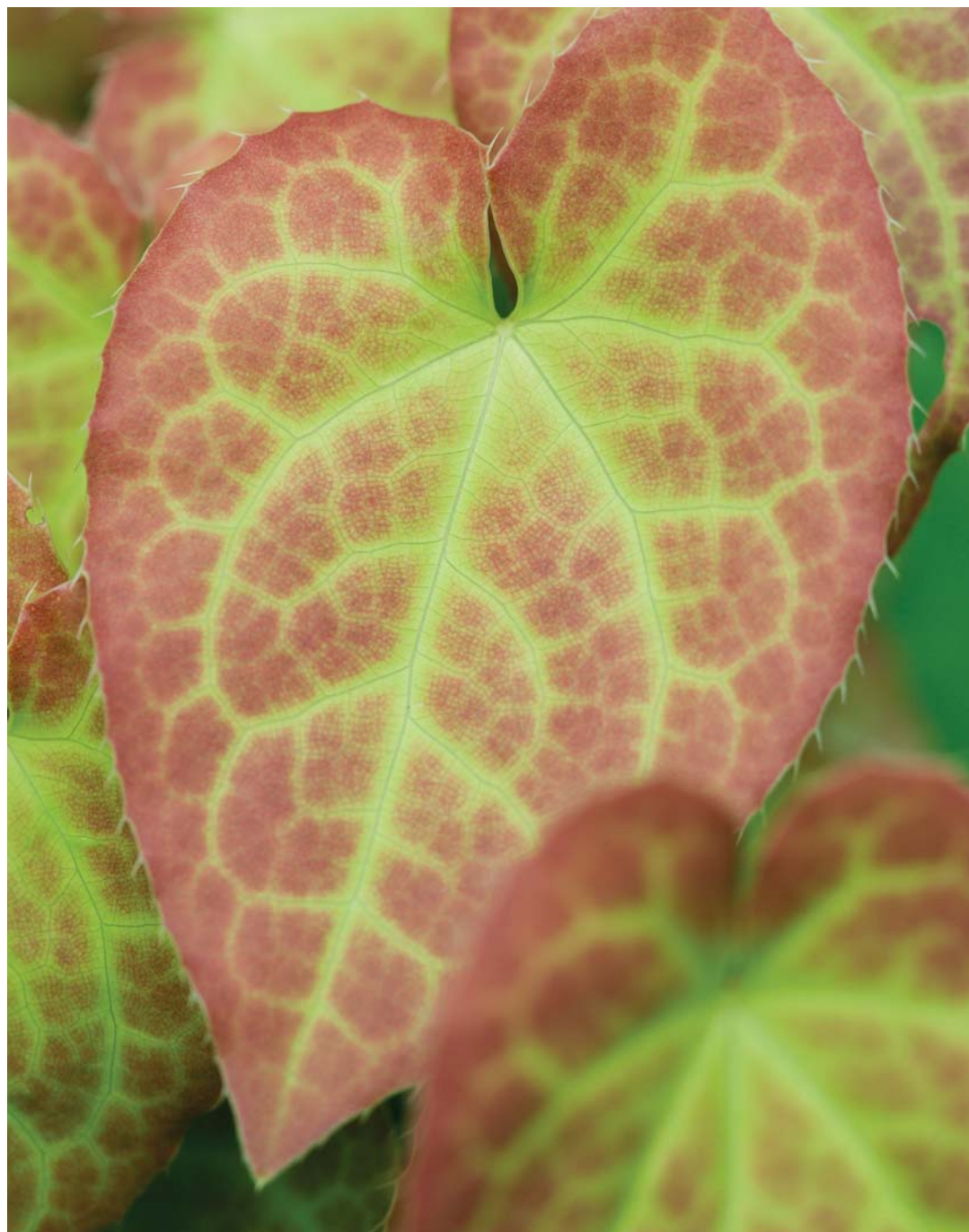


Beyond Extraordinary



Giving Opportunities

<i>Name</i>	<i>Gift</i>
Center for Regenerative Medicine	\$5 million
<i>Leukemia Center of Excellence</i>	<i>\$2 million</i>
<i>Lymphoma Center of Excellence</i>	<i>\$2 million</i>
<i>Multiple Myeloma Center of Excellence</i>	<i>\$2 million</i>
<i>The Infusion Treatment Center</i>	<i>\$2 million</i>
<i>Conference Suite (14 seats)</i>	<i>\$1 million</i>
<i>Concourse/Waiting Area</i>	<i>\$1 million</i>
<i>Patient Exam Center</i> <i>(28 Exam Rooms)</i>	<i>\$1 million</i> <i>\$250,000 each</i>
<i>Waiting Area/Infusion Treatment Center</i>	<i>\$500,000</i>
<i>Physicians Office Suite</i>	<i>\$500,000</i>
<i>Medical Records</i>	<i>\$250,000</i>
<i>Shared Office</i>	<i>\$250,000</i>
<i>Staff Lounge</i>	<i>\$250,000</i>
<i>Nurses Stations (2)</i>	<i>\$250,000 each</i>
<i>Nurses Station – Apheresis/Photopheresis</i> <i>Plasmapheresis</i>	<i>\$250,000</i>

Center for Regenerative Medicine

The Center for Regenerative Medicine at Hackensack University Medical Center's new John Theurer Cancer Center will be devoted to the treatment of leukemia, lymphoma, and melanoma, and to the practice of blood and bone marrow stem cell transplantation used to treat these and other diseases.

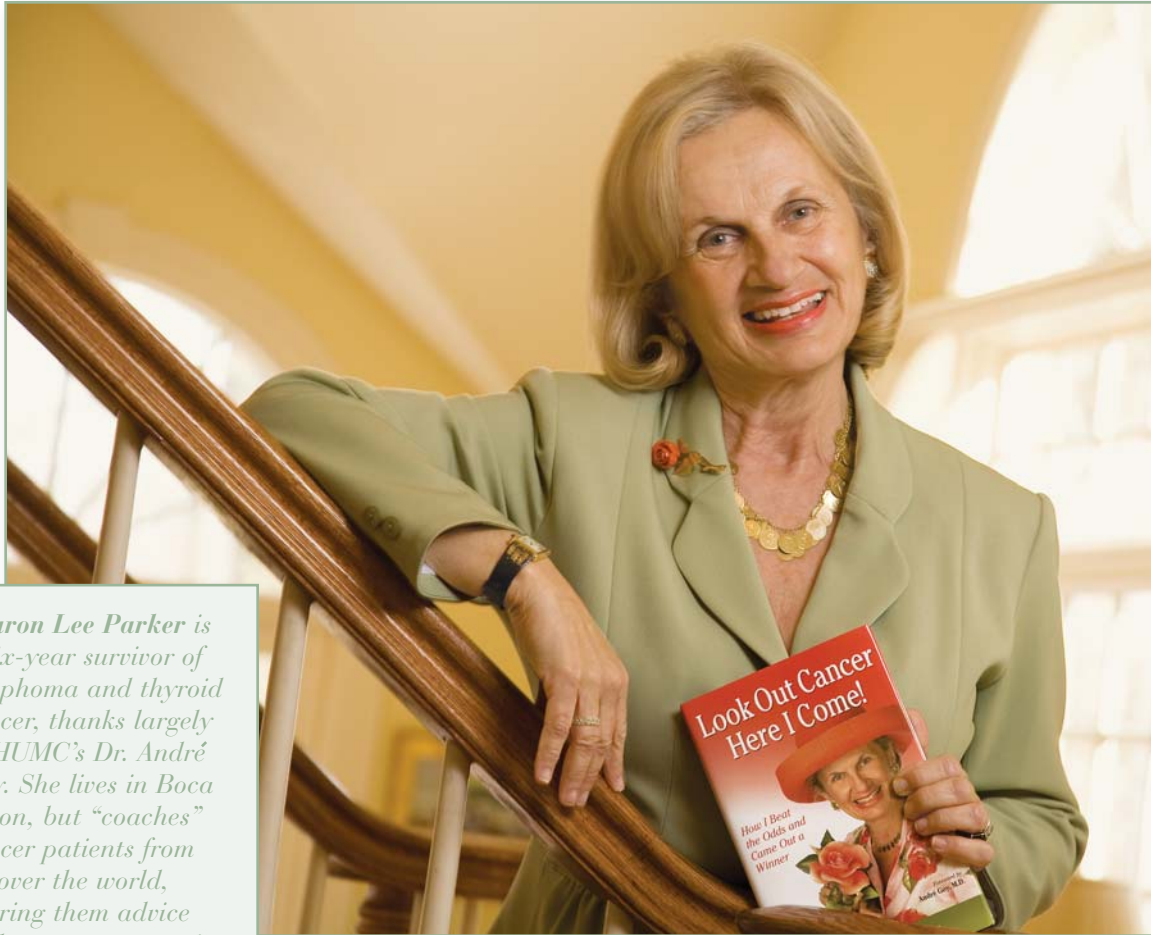
For the first time, all the physicians and other medical professionals who specialize in the treatment of these cancers will be brought together on one floor, where their collective knowledge and skill will inform each patient's diagnosis and treatment plan. In a single visit, patients will be able to consult with all their doctors, get their tests, and receive their therapy—often without traveling farther than the length of a hallway.

Each doctor, now just down that same hallway from his or her colleagues, will benefit from the more spontaneous and informal give-and-take encouraged by this kind of proximity—interchanges that often generate new ideas and discoveries. The more intimate grouping of physicians in related “liquid” disciplines will also enable the center's world-renowned experts in stem cell transplantation to keep in closer contact with their patients throughout the course of their treatment.

The clinicians and researchers on this floor will be continuing the exciting work that has enhanced, extended, and saved the lives of so many patients while bringing honors and awards to the hospital and its staff. A few examples are highlighted above.

Breakthrough Advances

- *The development of a tumor bank that will enable researchers to study cancer at the molecular level, identify the abnormalities that lead to disease, and determine how and why these “mistakes” occur. In a given tumor sample, up to 30,000 genes can be studied at once.*
- *Studies showing that the injectable drug Velcade and the oral drug Revimid slow and halt the progression of multiple myeloma.*
- *Mini stem cell transplants for elderly or very sick patients who cannot tolerate large doses of chemotherapy.*
- *Gene expression profiling, which examines the way genes behave in lymphoma tissue for purposes of accurate diagnosis and tailored treatment.*
- *Clinical trials integral to the approval of the development of Gleevec and Sprycel, targeted therapies that treat chronic myeloid leukemia by zeroing in on and destroying cancer cells without harming normal ones.*
- *The use of ultraviolet light therapy to treat patients suffering from graft-versus-host disease, a common side effect of a stem cell transplant that occurs when the patient's immune system attacks the donated cells.*
- *Vaccines that use a patient's own cancerous lymphoma cells to boost their immune systems to fight off the lymphoma.*



Sharon Lee Parker is a six-year survivor of lymphoma and thyroid cancer, thanks largely to HUMC's Dr. André Goy. She lives in Boca Raton, but "coaches" cancer patients from all over the world, offering them advice and encouragement in her book, Look Out Cancer...Here I Come!

*“**D**r. Goy is the reason I came to Hackensack. I put my life in his hands, and if necessary I would follow him to China. It’s a privilege to know him. He’s put his mark on the world stage of cancer care and research, and he’s also one of the most compassionate human beings you could meet. He is driven to make his patients well.*

The spirit I try to infuse in people was brought out in me by Dr. Goy. We need to give him and his colleagues the tools they need. They have remarkable talent, but you can’t attract and keep talent without funding. With the right support, we can make the new cancer center the destination it can be—a place that’s full of life and hope.”

André Goy, M.D., M.S.

Deputy Director of the John Theurer Cancer Center; Chief, Division of Lymphoma Oncology; and Director of Cancer Research



“The main goal of the new center will be to bring under one roof our multidisciplinary approach to cancer and improve our patients’ outcomes. With the progress of technology and the development of human genome sequencing, as well as the number of new drug therapies being tested today, this unique combination—successfully integrated—can lead to rational therapeutics and a more definitive step towards personalized anticancer medicine.”

Dr. Goy specializes in lymphoma, whose incidence has increased 80 percent over the last 30 years. Renowned for treating all types of the disease, Dr. Goy has published extensively and is invited to speak and teach all over the world. He is working to develop biomarkers that point to the most effective therapies for each patient and is helping to conduct the national lymphomacare study of outcomes and prognoses in patients with follicular non-Hodgkin’s lymphoma.

Dr. Goy is also testing novel targeted therapies that attack cancer cells—but spare healthy tissue—and technology that helps detect early chemoresistance in lymphoma patients. In the new cancer center, he will continue his work on the Tumor Bank, where samples of patients’ blood, serum, and tissue are stored, enabling study of lymphoma at a molecular level.

Tatyana Feldman, M.D.

Attending, Division of Lymphoma Oncology



Dr. Feldman, a hematologist and oncologist, specializes in the treatment of lymphoma. She works with Dr. Goy and the rest of the division staff to gain a better understanding of the disease, leading to earlier detection and superior outcomes.

Among Dr. Feldman's major research interests is a vaccine for follicular lymphoma. It contains a protein that provokes an immune reaction in the patient to fight off the disease and has been shown to induce remission in many cases. She is studying this and other new therapeutic approaches that will extend the lives of lymphoma patients.

“I’m especially interested in hematology and the challenges posed by liquid malignancies. Fifty years of research and a lot of new data have finally put us on the verge of some important scientific advances, enabling us to help patients and cure them. Dr. Goy has a vision for the lymphoma division, and in the new cancer center we hope to bring together all our expertise and build a large scientific program with lots of research. It will also give us better patient flow, shorter waiting times, and smoother delivery of care.”

David Siegel, M.D., Ph.D.
Chief, Division of Multiple Myeloma



“What we in the cancer center do has become very specialized. Having said that, we still need to have very close interactions with our colleagues. Right now we are physically separated. That is very inconvenient for the patients and deprives the medical staff of the expertise of our peers. The new cancer center will allow us to have much more intimate interactions, something that is critical for continuity of care and for developing and refining new technologies and strategies.”

Dr. Siegel is one of the nation’s foremost authorities on multiple myeloma, a usually fatal blood disorder in which the blood’s antibody-producing plasma cells grow out of control and overrun the bone marrow.

He is one of 11 nationwide investigators who conducted the clinical trials leading to the approval of the injectable drug Velcade, which can slow and halt the progression of multiple myeloma.

Dr. Siegel specializes in another treatment for multiple myeloma: stem cell transplantation, a procedure he hopes to make more effective. He has also pioneered the use of transplants for elderly patients who cannot tolerate high doses of chemotherapy—crucial because most multiple myeloma patients are over the age of 70.

Scott Rowley, M.D.

Chief, Blood and Marrow Stem Cell Transplantation Program



Dr. Rowley, a leading authority on blood and marrow stem cell transplantation, heads one of the largest such programs in the United States. At HUMC's Benito and Carmen Lopez Stem Cell Transplant Center, Dr. Rowley and his colleagues perform nearly 300 transplants each year on patients with cancer and other serious blood disorders. With the cooperation of major drug and biologic companies, Dr. Rowley and his team are conducting more than 50 clinical trials.

Many of the most widely employed advances in stem cell transplantation have been developed under Dr. Rowley's leadership, including "mini" transplants for elderly or very sick patients, ways to purge marrow of cancer cells and expand the NIH collaboration quantity of cells for transplantation, and prevention of graft-versus-host disease by curbing the donor cells' aggressive response to the patient's 'foreign' tissue.

“The whole field of oncology requires a fair amount of collaboration, so that’s the biggest benefit of putting us all in one building. The more collaborative brainpower you have and the easier the interaction, the better your research ideas and treatments will be. It’s not just about doctors, but nurses, nutritionists, social workers, insurance coordinators, etc. By comparing notes on what works and what doesn’t, we’ll be more productive.”

Transplantation has a big impact on our patients’ lives. They’re out of work for months. They don’t want to spend a lot of time here. But right now we’re physically isolated from the other doctors they need to see. In the new center, we’ll all be together. The smoother the patient flow, the higher the quality of medical care.”

Michele Donato, M.D.

Associate Director, Blood and Marrow Transplantation Program



“You can’t do this type of research without the necessary infrastructure. You need research nurses, data managers, other doctors—if they’re all in one building, it’s easier to manage. And we’re not just researchers, we’re clinicians. Our transplant patients don’t see a different doctor every day; they see either me or Dr. Rowley all the time. We know our patients very well.”

Dr. Donato is an award-winning clinician and researcher in stem cell transplantation, specializing in lymphoma, leukemia, melanoma, and ovarian cancer, the fourth most deadly among women. She has performed more than 200 stem cell transplants for ovarian cancer and is researching a vaccine (a fusion of some of the patient’s cancer and immune cells) that may provoke the patient’s antibodies to shrink the tumor.

Dr. Donato has done extensive research in photopheresis, a process in which she uses ultraviolet light to engineer disease-fighting T-cells to combat autoimmune disorders—among them, graft-versus-host disease, a common and potentially fatal side effect of transplantation that occurs when donor cells view the patient’s tissue and organs as ‘foreign’ and attack them.

Stuart Goldberg, M.D.
Chief, Division of Leukemia



“Ten years ago my young patients with CML underwent difficult bone marrow transplants and my older patients had few options. Today we can achieve excellent outcomes, in all age groups, with simple, safe pills. The new tyrosine kinase inhibitors (Gleevec, Sprycel, and Tasigna) underwent their clinical testing here at HUMC. Our patients were among the first in the world to receive these drugs, which revolutionized the treatment of this disease.”

To advance the treatment of leukemia and improve outcomes, Dr. Goldberg and his team encourage their patients to participate in clinical trials. In recent years, HUMC’s focused effort on Chronic Myelogenous Leukemia (CML) has aided in the approval of new targeted therapies that stop cancer cells while sparing healthy blood cells. Gleevec, a revolutionary oral medication that successfully maintains remissions in most CML patients, underwent important early testing here. The Leukemia Division’s CML clinical trials recently led to the approval of two new medications, Sprycel (2006) and Tasigna (2007), which offer additional treatment options. Ongoing clinical studies continue to test new concepts with these medications and will yield the next breakthroughs in leukemia therapy.



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