A Report on Your Investment in Hope

Cause for Hope

The Children’s Hospital of Philadelphia®
DIVISION OF GASTROENTEROLOGY, HEPATOLOGY & NUTRITION

Gift of Childhood.org
Nicolette, 10, treated for Alagille syndrome, with Gastroenterology, Hepatology and Nutrition Chief David A. Piccoli, M.D.
A message from
David A. Piccoli, M.D.

Dear Friends,

I am pleased and excited to present this inaugural report on the Division of Gastroenterology, Hepatology and Nutrition, which it has been my honor to lead for the past 14 years. My colleagues are doing so much incredible work: providing care that is unrivaled anywhere in the world and conducting research that is reshaping what we know and how we think about disorders of the liver and digestive system. Having this opportunity to share their remarkable efforts with you, the donors who have made that work possible, is a joy.

This division has always been at the forefront of pediatric healthcare. Ten years ago, thanks to the visionary commitment of Fred and Suzanne Biesecker and the Biesecker Foundation, the Division created the Fred and Suzanne Biesecker Pediatric Liver Center, which has made significant strides in understanding and treating biliary atresia and other liver diseases. The vital work their generosity initiated continues today, stronger than ever, and will help untold numbers of children.

When The Children’s Hospital of Philadelphia opened its Nutrition Center in 1985, it was one of the first academic institutions in the U.S. to address the lack of pediatric nutrition training in medical schools and hospitals. Today, under the leadership of Virginia Stallings, M.D., director of the Nutrition Center, it is still one of only a few centers in the country to offer a pediatric nutrition fellowship, which offers fellows experience in both clinical and laboratory settings.

You will also read in this report about the Division’s productive work on two diseases currently frustrating many patients and physicians alike: eosinophilic esophagitis (EoE) and celiac disease. Children’s Hospital has always been a place where doctors and researchers meet new challenges, poorly understood and emerging conditions, and most of all, families in need of answers with scientific inquiry, family-centered care and compassion. I have no doubt that, in time, not only will our treatments for inflammatory bowel disease or biliary atresia continue to improve, but our talented physician-scientists will be among those who unlock the secrets of EoE and celiac disease, improving the lives of children here and throughout the world.

I hope you enjoy the stories within this report and take pride in knowing that your contributions help provide the Division with the resources it needs to accomplish so much. On behalf of our staff and all the patients and families who benefit from your generosity, thank you.

Sincerely,

David A. Piccoli, M.D.
Chief, Division of Gastroenterology, Hepatology and Nutrition
Director, Fred and Suzanne Biesecker Pediatric Liver Center
Fred and Suzanne Biesecker Endowed Chair in Pediatric Liver Disease

To learn more about the Division of Gastroenterology, Hepatology and Nutrition visit www.chop.edu/gastroenterology
Eating Better,
Living Better

The Center for Pediatric Eosinophilic Disorders
It can be hard to coax children into taking bad-tasting medicine, but what if that medicine is all they can eat? Six years ago, Dean and Cole Harris bravely held their breath and drank it down, several times a day, every day. While their friends could eat anything and everything from ice cream to hot dogs, the brothers got their nutrition from “elemental formula,” a cocktail of amino acids that smells and tastes so horrible, it’s often administered through a feeding tube. They would have preferred to eat broccoli.

Today they can, thanks to the Center for Pediatric Eosinophilic Disorders at CHOP, one of the largest programs in the country dedicated to researching and treating eosinophilic esophagitis (EoE), a relatively new and rare food allergy in which the body’s own white blood cells attack the esophagus in response to certain foods.

A Challenging Disease

EoE causes inflammation of the esophagus, nausea, abdominal pain and difficulty swallowing, among other symptoms. It can be diagnosed only by an esophageal biopsy collected by endoscopic examination. The allergy-causing foods have to be identified by an elimination diet. There is no known cure other than food avoidance.

The Center’s experience with EoE prompted Suzanne and Steven Harris to uproot their lives in Atlanta and relocate to Philadelphia when their sons Dean and Cole were diagnosed with EoE. The move paid off.

Doctors at the Center have slowly introduced new foods to the boys, with careful monitoring for bad reactions. Dean, now 9 years old, has the most varied diet; he can eat all fruits and vegetables, chicken, beef, pork, potatoes and rice. Cole, 8, has not been as lucky, but a promising drug trial allows him to eat at least some fruits and vegetables, pork and potatoes, rather than rely solely on elemental formula.

“EoE is still a mystery. There’s still a lot of work. I know the Center’s doing everything that’s cutting edge, but it’s frustrating — I wish there were more money for research,” Suzanne says.

Families Take on EoE

She and Steven hosted a 5K run/walk last year that raised $17,000 for research and patient and family programs at the Center. In May, during National Eosinophil Awareness Week, they organized another race, “FOOD PHIGHT 5K,” to celebrate the heroism of kids with EoE and support the efforts of Center researchers Chris Liacouras, M.D., and Jonathan Spergel, M.D., Ph.D., who have identified a genetic risk factor for EoE, uncovered the role of food and pollen allergies in EoE and created allergy testing for the condition. This year’s event collected nearly $60,000 for the Center.

Many other EoE families are joining them in the fight, raising awareness and donations in the community. In 2011, Michael and Robyn Conn raised nearly $30,000 through their own fundraising page at www.giftofchildhood.org in honor of their children, and they contributed this year’s funds from close family and friends to FOOD PHIGHT. Miles Conn, 7, currently has to avoid corn, peaches, turkey and some dairy, while his 5-year-old sister, Devon, has only six safe foods.

“The most important thing is their future. We want them to have as normal a life as possible in their teenage years,” Robyn says. “We’re very lucky to be so close to CHOP, and I love that my children see Dr. Liacouras and Dr. Spergel. Hopefully if we keep fundraising, they’ll find a cure.”
A decade in, the Biesecker family’s personal quest to help their little girl has given life to an entire field of medicine

Her Grandparents’ Gift

It started very simply: Fred and Suzanne’s granddaughter, Mya Longacre, was sick. Just weeks old, she had a cyst blocking the flow of bile from her liver—or so the doctors thought. Sending a newborn into surgery is always a scary prospect for a family, but further testing revealed an even scarier diagnosis: biliary atresia, a blockage or absence of bile ducts for which there is no known cause or cure. She would need immediate surgery called a Kasai procedure and even if it were successful — one-half are not — she would eventually need a liver transplant.

The family immediately started doing research, only to come to a dismaying conclusion: not only was biliary atresia poorly understood, but nobody in the United States was even studying the disease in a serious way. Researchers saw it as a career killer; there simply wasn’t anyone interested in funding the work. That is, until the Bieseckers came along.

Ten years later, what the Fred and Suzanne Biesecker Liver Center has accomplished is nothing short of amazing. In 2001, there were four principal investigators doing liver research at CHOP; today there are 17. CHOP now has more hepatologists than any other pediatric liver center in the world and is making incredible progress in understanding and treating some of the most difficult liver diseases.

Thanks not only to continued annual support from the Biesecker family, but also to their contribution of the drive and leadership that made them successful in business, CHOP is now hands-down the nation’s leading center for the study and treatment of biliary atresia.

What began as a monthly gathering of four or five researchers sharing their work has now grown to as many as 50 or 60. Fred and his daughter (and Mya’s mother), Lissa Longacre, attended every single meeting for 10 years.

“The meetings have definitely stimulated a lot of conversation among the Center scientists,” says Liz Rand, M.D., medical director of the Liver Transplant Program, who has been a key figure in the Center since its inception. “It creates an environment of cross-pollination for ideas that ultimately speeds up research.”
From the Biesecker family’s first significant gift to CHOP, supplemented by additional gifts from family members, friends and Drug Plastics and Glass’ employees and customers, Center researchers produced research that has now earned an additional in $45 million in NIH funds.

What causes biliary atresia? Is it genetics? Is it a virus? Is it something else? Biesecker Center researchers are closing in on the cause from every angle, with the hope of then finding a cure.

The Center has also invited many guests to share its expertise, hosting three symposia on biliary atresia for researchers in the field and holding eight biliary atresia education days for families living with the disease. Mya, who is now 13, and her mother have both spoken at biliary atresia day.

“It’s important for the mothers and fathers who come to biliary atresia day to see the hope, to see kids with biliary atresia growing up and to know there’s an entire support system at Children’s Hospital,” says Lissa. “Liver disease is a tragic thing, but it’s also an okay thing when you’re at Children’s Hospital.”

While Mya has an enlarged spleen and she can’t play any contact sports, she knows how fortunate she has been. To look at a photo of Mya, you would only see a beautiful young woman. While she still has bad days, she has so many good days.

Helping CHOP doctors make the medical advances that have improved Mya’s life, and the lives of so many others, has been one of the most satisfying undertakings of Fred Biesecker’s life.

“When you have someone you love that hurts and you can help them, you feel good like you can’t believe,” says Fred. “Building the Liver Center has been one of the greatest experiences I’ve ever had.”

*Mya (left) and her sister, Ava.*
Diagnose, Educate, Heal
The Center for Celiac Disease

Joyce, 4, CHOP GI patient
The Center for Celiac Disease at CHOP is one of the largest and most comprehensive of its kind in the United States, yet it is run by only a handful of dedicated doctors, nurses and dietitians at the Hospital.

The Center provides diagnosis, education, counseling and clinical care and support for celiac disease to more than 900 children — and their families.

“It’s not just for the patient,” says Ritu Verma, M.D., section chief of clinical gastroenterology in the Division of Gastroenterology, Hepatology and Nutrition and the founder of the Center for Celiac Disease. “We bring in any caretakers who are going to participate in the child’s care, including parents and grandparents, and then we teach them together.”

Caring for the entire family is what sets the Center apart from many other celiac clinics; because there’s a genetic predisposition to celiac disease — and many who have it may not even display symptoms — experts at the Center encourage everyone in the family to get screened.

Unraveling a Mystery

Celiac disease is a condition in which the body’s immune system reacts against the protein gluten, which is common in wheat and many other grains and found in foods such as bread and pasta. Symptoms can range in severity and include abdominal pain, weight loss, chronic fatigue and poor growth — or there may be atypical symptoms or no symptoms at all, which presents many challenges in diagnosis.

Nearly 1 in every 133 Americans has celiac disease. It is often misdiagnosed as irritable bowel syndrome or lactose intolerance and on average, it is reported that patients with celiac disease suffer symptoms for 11 years before they are diagnosed correctly. Delay in diagnosis can cause long-term, life-threatening damage to the intestine and other organs.

The first step in diagnosing celiac disease is a panel of blood tests to check for the presence of certain antibodies. If a patient tests positive for celiac disease, an intestinal biopsy is recommended to confirm the diagnosis.

“Endoscopy is still the gold standard for diagnosing celiac disease,” says Patricia Bierly, M.S.N., C.R.N.P., a nurse practitioner who manages the Center with Verma. “We can also look for genetic markers for celiac disease, but just because you have a predisposition for the condition doesn’t mean you will develop it.”

Learning Curve

Newly-diagnosed patients at the Center attend an education class with their families and caretakers to learn about celiac disease and nutrition. The only treatment for celiac disease is avoiding foods with gluten, so the clinical staff works closely with them to develop a gluten-free diet.

“Contamination is a big issue here. You have to make sure that your sandwich does not touch another sandwich that has gluten in it. We spend a lot of time discussing that,” Verma says.

Verma and Bierly give follow-up consultations and have even set up email addresses and online support groups to answer questions for families at the Center, the general public and outside physicians. Every year, they also host an education day about celiac disease for CHOP families which features a range of gluten-free foods and child activities. And they travel to educate other physicians and kitchen staffs at schools about celiac disease.

“I don’t think there’s any other center like this in the country for clinical care,” Verma says.
Giving CHOP Her All

Catharine, now 22, Center for Pediatric Inflammatory Bowel Disease patient, with senior nurse practitioner Susan Peck, M.S.N., C.R.N.P.
Susan Peck, M.S.N., C.R.N.P., has dedicated her career to helping families with gastrointestinal disorders. In her more than 30 years in the Division of Gastroenterology, Hepatology and Nutrition at The Children’s Hospital of Philadelphia, she has helped many children through difficult times.

“It’s rewarding to be a part of families’ lives for years,” Peck says. “It’s eye-opening when you’ve been here as long as I have, to realize you’re old enough to see your former patients’ children.”

Peck began in the Division as a clinical specialist for inpatients and nurse practitioner for outpatients. Today, she is a senior nurse practitioner and the advanced practice nurse manager, responsible for supervising nurse practitioners in the Division and helping to oversee the gastroenterology services in the CHOP Care Network — making sure families have access to the same educational materials and resources wherever they are seen.

**Family First**

Family is the focus of Peck’s work and what drives the Division’s healthcare model. Families may have a team participating in their care, including an attending physician and a fellow or nurse practitioner. A physician diagnoses the illness and develops a treatment plan, then a nurse practitioner works closely with the family in follow-up. Nurse practitioners also handle onsite procedures and teach parents how to manage feeding tubes for their children at home.

Education is a key component of health management at the Division. Ten outpatient nurses support family care by telephone all day long: giving information, outlining treatment plans, advising on health issues, arranging prescription refills and scheduling appointments. For more than 20 years, the Division also has been hosting annual inflammatory bowel disease education days, which update families on current research, therapies and resources. This is just one of the ways the Division continues to support families even when a child is too old to be seen at CHOP.

**Growing Up with IBD**

“The kids who have been here since birth, or from a very young age, are a very tough group to move out,” Peck says. The Division has been working for many years to seamlessly transition adolescent patients to adult care, matching them with adult gastroenterologists and sharing their medical histories to provide continuity of treatment.

Thanks to generous funding from Suzi and Scott Lustgarten, longtime CHOP supporters, the Division has developed a joint transition program with the Hospital of the University of Pennsylvania. Another Children’s Hospital nurse practitioner, Anne Grant, M.S.N., C.R.N.P., helps to select physicians for teenage patients. Grant even sits with them through their first visits. But, Peck adds, “They can still call us; they can still email.”

Peck’s commitment to her Division and the families it cares for goes beyond her work. She is a member of the 1855 Society, a giving society that recognizes those who donate to CHOP for 10 or more consecutive fiscal years.

“I think giving back to a worthwhile cause is important. I was raised that you always give back,” Peck says. “You can give back your time, your money — whatever you can give, you should give.”

The 1855 Society honors donors who have given to CHOP for 10 or more consecutive fiscal years.
Inflammatory bowel disease (IBD) has a profound effect on a child’s life. The pain, discomfort and unpredictability of Crohn’s disease and ulcerative colitis lead to limitations and stress for an entire family. Because Children’s Hospital recognizes the breadth of care needed by people with IBD — and because it has been providing the very best care in every related discipline for 30 years — the Center for Pediatric IBD at CHOP, led by Robert Baldassano, M.D., has more than 1,500 patients who come to Philadelphia from across the country.

Brian Brooks was 16 years old when doctors near his home in South Florida gave him devastating news: His IBD was going to require surgical removal of his colon. His parents, Mark and Carol, searched for the best place to get a second opinion, and were advised to see David Piccoli, M.D., at CHOP.

Since the early 1980s, focused specialists at the Center for Pediatric IBD have provided highly individualized, state-of-the-art care for children with IBD. The Brooks family is one of many who come to CHOP every year because its IBD Center has the best physicians and surgeons devoted to treatment of IBD. But once they become patients here, they discover the expertise at CHOP goes beyond medical and surgical care.
Care on All Fronts

There is a psychologist within the Division of Gastroenterology, Hepatology and Nutrition dedicated to caring for children with IBD; a dietitian advising children and their families on the best diet to control their disease; and even a social worker who specializes in families with these disorders. Virtually everyone an IBD family meets at CHOP is familiar with what they are experiencing.

“The team is huge and it is very functional,” Piccoli says of the IBD Center. “We have the depth of experience to handle the most difficult cases.”

Brian and his mother flew to Philadelphia, and the care Brian received at CHOP kept the family coming back for all of his IBD care. Two years later, Brian has avoided the extreme surgery he had been facing and has stayed healthy through a combination of medication and advice from the IBD Center.

“Those were the kindest people in the world. Not only did they take care of my son, they took care of my wife,” Mark says about the staff’s comprehensive, family-centered care approach. “My son hasn’t had surgery. He’s doing wonderfully. He’s on nasty drugs, but that’s the best treatment available today.”

When Brian turned 18, Piccoli was mindful of the need to maintain his treatment consistently in adult care and connected him with a highly regarded physician. Brian’s parents are grateful for the care and attention he has received from Piccoli and the IBD Center, but they continue to hope for better options for future treatment, giving generously to research efforts into IBD at CHOP.

The personal care and expertise of physicians like Baldassano, Piccoli and colleagues and the research that will improve treatments for children with IBD all rely on the support of private philanthropy to provide the margin of excellence that sets Children’s Hospital apart. With the help of Mark and Carol Brooks and other grateful families giving to the Hospital, the care offered at the Center for Pediatric IBD will not only continue, but continue to improve for years to come.

Nola, 15, IBD patient, with her father
When you take a sick child to the pediatrician, you expect to leave with a diagnosis and a prescription or recommendation for treatment. But imagine bringing your child to a doctor and going home with more questions than answers. If your child suffers from a functional digestive problem, it may take years to learn the cause of the illness and find a reliable treatment — and there may be no cure.

Irritable bowel syndrome is one of the most familiar examples of what are commonly called gastrointestinal (GI) motility disorders, a broad group of conditions in which the esophagus, stomach and intestines don’t work together as they should. These conditions may make eating and digesting food uncomfortable or painful and lead to malnutrition or disability.

Although a large number of children in the United States today live with a digestive problem of some kind, efforts to research GI motility are limited, and the disorders often are unknown, ignored or misunderstood. It can be embarrassing for a child to try to explain her illness to teachers, friends or even doctors, and the psychological stress of a GI disorder can be just as damaging as its physical symptoms.

The Power of Philanthropy

Last year, visionary philanthropists Irma and Norman Braman provided CHOP with the means to advance clinical care and research of functional digestive disorders with an extraordinary $5 million gift to launch the Suzi and Scott Lustgarten Center for GI Motility, which also established two endowed chairs and a fellowship training program.

This state-of-the-art center of excellence is named for the Bramans’ daughter, Suzi, and her husband, who also have shown a passionate commitment to the Hospital. Scott Lustgarten is president of the Auto Dealers CARing for Kids Foundation, which

Norman Braman (left) and his family. From left: daughter Debra Wechsler, granddaughter Sarah Lustgarten, daughter Suzi Lustgarten, wife Irma Braman and son-in-law Scott Lustgarten.
hosts a Black Tie Tailgate at the Philadelphia Auto Show each year to benefit CHOP. The 2012 event raised a record breaking $400,000 for the Division of Gastroenterology, Hepatology and Nutrition at CHOP, which includes the Lustgarten Center. The 2013 event on January 18 will benefit the Division as well.

Suzi and Scott’s 15-year-old daughter, Sarah, is also helping to raise awareness of GI motility. Sarah suffers from severe gastroparesis, which restricts her body’s ability to move food out of her stomach. Despite the pain, constant testing, missed school days and daily challenges of her condition, Sarah remains upbeat and optimistic.

“My grandfather told me to always stay positive and to try my hardest to never stop fighting,” Sarah says.

Because so many people have not heard of gastroparesis, Sarah runs a website (being-gutsy.com), where she blogs frankly about life with GI motility disorders, shares other people’s stories, raises funds for GI motility research and encourages everyone with gastroparesis not to give up.

Thanks to three generations of Bramans and Lustgartens, many families living with GI motility disorders will find a healthier future for their children at CHOP.
Healthy Weight, Healthy Child

Brandon, 13, Healthy Weight Program participant
Childhood obesity has become a nationwide epidemic, with more than half of all children 6 to 11 years of age overweight or obese. To counter the alarming rise of childhood obesity in the region, CHOP developed the Healthy Weight Program in 2005. This unique initiative coordinates care from the Nutrition Center in the Division of Gastroenterology, Hepatology and Nutrition and multiple areas of the Hospital to offer comprehensive, personalized treatments for obesity and related health problems. The program is equally focused on educating families about obesity’s potential health risks — which include diabetes, sleep apnea and high blood pressure.

A multi-disciplinary approach using evidence-based strategies is a core component of the Healthy Weight Program. Its goal is to engage the entire family in making changes that contribute to better health and quality of life, says its director, Patricia DeRusso, M.D., M.S. Counseling services from registered dietitians, physical activity specialists and behavioral psychologists provide coordinated care from a diverse team of clinicians are available. The Healthy Weight Program also developed “healthy pathways toolkits” that are customizable to the goals of individual families and encourage better diets and increased physical activity. The kits were so popular they have been presented as a model for other programs.

**An Investment in Health**

Though the benefits of nutrition programs are clear, they receive little government funding and rely heavily on philanthropic support.

In 2009, the Healthy Weight Program and the Diabetes Center were beneficiaries of the Carousel Ball, CHOP’s signature biennial fundraiser. In addition, a $10 million grant last year from the American Beverage Foundation for a Healthy America, a non-profit entity of the American Beverage Association, has enabled the Healthy Weight Program to expand its services.

The grant also funds research into the causes of obesity and studies of best practices for weight management — information that will not only help other programs around the country, but may make a case for insurance reimbursements for obesity prevention and treatment.

CHOP’s partnership with the American Beverage Foundation for a Healthy America represents a major step forward in the ongoing battle against pediatric obesity.
Researchers investigating inflammatory bowel disease (IBD) at The Children’s Hospital of Philadelphia led an international collaboration of researchers to discover multiple gene variants responsible for developing early-onset and adult-onset IBD. And Robert Baldassano, M.D., director of the Hospital’s Center for Pediatric IBD and Colman Family Endowed Chair, says this discovery gives us significant insight into the pathogenic mechanism mediating early-onset IBD.

Figuring out how IBD works, what causes it and, perhaps most crucially to current patients, how to better treat it has proven to be a monumental research project. Baldassano and his team have made significant strides over years of work, all made possible thanks to committed, generous donors who share the vision of better care for children with these debilitating diseases.

As physicians’ understanding of the genetic underpinnings of IBD improves, a more personalized approach to treatment comes closer to reality. Once the underlying genetics are understood, Baldassano says, treatment could be tailored to a patient’s particular variant of IBD, increasing effectiveness and decreasing unnecessary side effects.
A Genetic Puzzle

But as CHOP researchers learn more about genes involved in IBD, they are also beginning to see that the level of complexity in the disease is even greater than first understood. Not only is the sheer volume of relevant gene variants high, it appears some interrelate with other conditions. Researchers at CHOP’s Center for Applied Genomics (CAG) published a study showing four genes are involved in both Crohn’s disease and type 1 diabetes, but with opposite effects, making Crohn’s less likely but type 1 diabetes more so.

“This finding shows the genetic architecture of these diseases is more complex than previously thought,” said study leader Hakon Hakonarson, M.D., Ph.D., director of CAG at CHOP. “We knew that multiple genes that interact with each other and with environmental factors are needed to bring on these complex diseases, and we are still detecting these genes and uncovering those interactions. But we now see that some genes influence more than one disease, and sometimes in the opposite direction.”

While the research has not immediately translated into new treatments, discoveries from genomics and IBD researchers at CHOP are garnering significant attention in the medical field, illustrating their importance in laying a foundation for improved care in the future.

Two studies funded in part by the Stein-Bellet Foundation were presented in October 2011 at the 12th annual International Congress of Human Genetics. One uncovered a genetic variant that promotes inflammation in Crohn’s disease. As more of the mechanisms of the disease are understood, more potential treatment avenues open up.

David Piccoli, M.D., chief of the Division of Gastroenterology, Hepatology and Nutrition, which houses the IBD Center, said that a project which combines research and patient care will have a direct impact on children being treated for IBD in the near future. This national initiative led at CHOP by Andrew Grossman, M.D., tests an approach to improve quality of care by providing clinicians with data-driven reviews of patients’ treatment prior to their appointments, pointing out measurements that vary from best practices so the treating physician can consider whether the discrepancy is thoughtful and beneficial or should be adjusted.

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The Promise of Discovery

“The best care is done by thoughtfully applying what everyone has in a way that’s better,” Piccoli says. “If you can improve quality of care, you may cut costs, cut suffering, improve productivity, and change lives. In the next three years, that’s the single thing that will have the most effect on IBD patients.”

All IBD research at CHOP relies on individual philanthropy to some degree, whether completely funded by gifts or supported by a position paid for by a donor. Some of the most remarkable support to the IBD Center includes the generous and ongoing support of the Colman Family Endowed Chair in Pediatric Inflammatory Bowel Disease, created by the Colman Family in 2008 and held by Baldassano, and the Edmunds Fund, which also supports IBD research and has been funded for more than a decade by Mr. and Mrs. Robert J. Edmunds.

The first of its kind in pediatrics, CHOP’s bio-repository core has the capacity to store more than 2 million DNA samples. The samples are suspended at -20 degrees Celsius, and retrieved by a high-tech robot (below).
Felix, 16, traveled from his home in South America to be treated at CHOP for Gardner syndrome

A Commitment to Children

The Division of Gastroenterology, Hepatology and Nutrition has formed a Board of Visitors to support its mission in the future. Knowing that the comprehensive care and important research underway in the Division are only possible because of private donors, the Board is working to increase philanthropic support by promoting the Division’s work in the community and encouraging others to join them in giving. The Division and Children’s Hospital applaud the efforts of the inaugural members of the Board of Visitors for the Division of Gastroenterology, Hepatology and Nutrition, listed below, and thank for their leadership co-chairs Tamar and Stephen Olitsky, who believe that it is essential we continue to generate awareness and find the resources to discover cures for these insidious diseases.

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Our care, our research, our teaching.
They all rely on gifts from Children’s Hospital supporters, now and in the future.

Many of the most important and enduring gifts to CHOP have been legacy gifts. Including Children’s Hospital in your will, or as a beneficiary of a retirement plan, is one of the easiest ways to invest in the health and well-being of future generations of children. These gifts won’t affect your current cash flow and may even help reduce taxes for loved ones.

If you have already made a planned gift to CHOP, thank you, and please let us know. We can help you designate your gift to a specific Hospital program, and we’ll invite you to join the Lewis Society, a select group of supporters who have included Children’s Hospital in their plans.

Visit us at giftofchildhood.org/plannedgiving to learn more, or contact Tom Yates, director of planned giving, at 267-426-6472 or yatestg@email.chop.edu.
Thank You

The children you see throughout this report are our patients. It is for them, and for the many others in our care, that we relentlessly pursue the next advances in treatment and research into diseases of the liver and digestive system.

Your support is vital to the work of the Division of Gastroenterology, Hepatology and Nutrition. To learn more about how you can help, please contact Rick Breslin, director of development, at 267-426-6506 or breslinr@email.chop.edu.

Gift of Childhood.org
The Children’s Hospital of Philadelphia
Hope lives here.

Founded in 1855, The Children’s Hospital of Philadelphia is the birthplace of pediatric medicine in America. Throughout its history, a passionate spirit of innovation has driven this renowned institution to pursue scientific discovery, establish the highest standards of patient care, train future leaders in pediatrics, and advocate for children’s health. A haven of hope for children and families worldwide, CHOP is a nonprofit charitable organization that relies on the generous support of its donors to continue to set the global standard for pediatric care.

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