Inspired by their love for their son, William, gratitude for his cancer treatment at Johns Hopkins, and religious faith, Donna and Walter Pennington created and hosted the inaugural Faith Hope Love Gala in January 2019 at Columbia Country Club in Chevy Chase, Maryland. Along with their daughter, Charlotte, and the gala committee, their efforts raised nearly $200,000 in what they plan to be the first of many annual galas to support pancreatic cancer research at Johns Hopkins.

William was working toward a doctorate in political science at Cornell University in 2016 when he started experiencing pain and discomfort. This led him home to Chevy Chase, Maryland, to have medical tests done, around which time he developed jaundice. His doctors put a stent in his biliary duct and did a biopsy on a mass on his pancreas, resulting in a diagnosis of pancreatic cancer.

William began chemotherapy to shrink the tumor, and then had to decide where to go for surgery. After meeting with Christopher Wolfgang, director of hepatobiliary and pancreatic surgery at Johns Hopkins, William chose to come to Johns Hopkins. “He had a humility about him that I found extremely inspiring, and behind it was great skill,” says William.

In September 2016, Wolfgang performed a successful Whipple operation to remove the head of the pancreas, the upper part of the small intestine, the gallbladder and the bile duct. However, by 2018, William experienced a cancer recurrence, prompting Wolfgang to do a second, customized surgery to remove lymph nodes and a localized recurrence. While continuing treatment, William maintains his positive outlook and is moving forward with his life. He is now engaged and living in Boston.

William defines his experience at Johns Hopkins as “utterly world class.”

“Dr. Wolfgang and postdoc researcher Ammar Javed not only saved my life on a medical and scientific level, but they very much know how to treat people,” he says. “I could not recommend them highly enough.”

Raising Awareness about Pancreatic Cancer
Donna says she felt a higher calling to put on the gala: “After going through this journey with William, I realized that we needed a way to help our son first and then help the rest of the world with this deadly disease.” She believed the gala would be a way to raise awareness, and she was correct — almost 190 people attended.

“There’s an incredible feeling of helplessness” watching your child being treated for cancer, adds Walter. “We’re doing whatever we can to support William and get him to the right medical people, but...
When I began my career as a surgeon, I was the beneficiary of a professorship that got me started in the field of cardiopulmonary transplantation. It was 1993, at a hospital in the middle of a neighborhood very similar to the one here in Baltimore. Many good people had trouble accessing quality care in a community of mostly underrepresented minorities.

In partnership with a distinguished liver transplant surgeon, I was charged with getting an organ transplant program up and running. The photos of our first transplant patients at that hospital are still on the walls of my office today. Those patients were members of the local community, and institutional commitment and philanthropy made it possible for them to have access to such sophisticated medical care.

Philanthropy supported my first surgical position, and it gave people access to the lifesaving transplants that they needed. Today, that transplant program continues to thrive and makes a huge impact in the local community, as well as regionally and nationally.

Here at Johns Hopkins, I see the same thing happening. Philanthropy supports and enhances the work that surgeons can accomplish, which changes the lives of the people in our community.

Last year, the Department of Surgery was fortunate to receive extraordinary gifts. If you want to help us sustain the existing programs and create new opportunities, I hope you will consider making a donation to a particular research program, clinical area or professorship. From everyone in the Department of Surgery, I want to extend our heartfelt thanks — your efforts may help save us a life!
Innovations in Transplant Medicine

From a first-of-its-kind transplant to a machine to keep donor organs viable for longer, Johns Hopkins’ Department of Surgery is performing pioneering procedures and continuing to push the boundaries of medical science.

Reporting System Could Reduce National Waitlist for Kidney Transplants

Transplant surgeon Jacqueline Garonzik Wang and research mentor Dorsey Segev are developing report cards for transplant centers showing their use of “suboptimal” kidneys, which are older and hepatitis-infected donors and donors after cardiac death. Despite the positive outcomes of transplanting suboptimal kidneys, utilization rates vary widely among transplant centers nationwide.

The concept is that when surgeons are offered a suboptimal kidney from their local organ procurement organization, information about the organ would be paired with data from the National Waitlist for Kidney Transplants. The data would show outcomes associated with transplants using organs of similar quality in hopes that the information could help change organ selection behavior and increase the use of suboptimal kidneys to ultimately reduce the number of patients on the transplant waiting list.

Read more at bit.ly/transplantcard.

A U.S. First: Living Donor HIV-to-HIV Kidney Transplant

A multidisciplinary team led by Dorsey Segev, professor of surgery at the Johns Hopkins University School of Medicine, performed a kidney transplant from a donor living with HIV to a recipient also living with HIV for the first time in the U.S. Segev and his colleagues determined that new HIV drugs are safe for the kidney and that those with well-controlled HIV have essentially the same risks as those without and are healthy enough to donate kidneys.

Read more at bit.ly/HVtoHIV.

Keeping Organs Viable for Longer

Transplant teams at Johns Hopkins have been exploring ex vivo machine perfusion as a means to expand the donor pool, increase the range of donor hospitals, and gain extra time to determine an organ’s health and performance before a transplant. This process involves continuously pumping blood through the donor organ to keep it warm and more viable for transplant. Shane Ottmann is the principal investigator for the liver transplant team and Errol Bush is leading the lung transplant team to test ex vivo machine perfusion.

Read more at bit.ly/machinetests.

$8.4M NIH Grant to Expand Liver Transplant Study

A six-year Johns Hopkins pilot study made the case for giving liver transplants to select patients with alcoholic hepatitis (inflammation of the liver from excessive alcohol use), as opposed to requiring a six-month sobriety period. The study found that the relapse rate among patients who did not have a wait period was identical to those who did, and the rates of transplant function and patient survival were statistically identical. Researchers received an $8.4 million grant from the National Institutes of Health to expand this study.

Read more at bit.ly/liverstudy.

WAYS TO GIVE

‘Philanthropy Is Part of the Healing’

Philanthropy helps fuel the engines of biomedical discovery, clinical innovation and world-class medical education.

At Johns Hopkins, each faculty member controls a philanthropic fund that directly supports their research, says Merissa Courtright, director of development for the Department of Surgery. “It’s those funds that allow the faculty to further their research initiatives while hiring research and clinical fellows who will become the next generation of academic and clinical leaders.” Contributions often help pay for preliminary research that positions the institution for transformational NIH grants and other major sources of funding.

However, that does not mean that every donation is a huge amount. In fact, smaller gifts make up the overwhelming majority of philanthropic funds supporting the Department of Surgery. In fiscal year 2019, for example, the department received 1,630 individual gifts and 97% were gifts between $100 and $10,000.

Why Do People Donate?

Many generous people donate for a variety of reasons — whether they are grateful patients, alumni of the school of medicine or just feel a special connection to the work that Johns Hopkins does. Many donors are current or former patients who want to support their physician’s groundbreaking research or help ensure future patients will find the same support and chance of recovery. “Our supporters often say that philanthropy is part of the healing process. Investing in research is a step toward fighting against the disease and taking back a measure of control,” says Courtright.

You Can Help Make Breakthroughs

Surgery’s development team makes it easy to support the work of the department and its physicians. For those interested in learning more, or making a donation, one of the best places to start is at the Charitable Giving tab on the Department of Surgery website: hopkinsmedicine.org/surgery.

Anyone can make a single or recurring donation through the site using a credit card or online banking that is 100% tax deductible.

People can also learn how to make a gift through a will or trust. The institution’s Office of Gift Planning can provide suggested language to include in a will or trust that ensures a donor’s gift will go exactly where they wish to designate it.

The Tax Benefits of Giving

Gift planning advisor Suzie Ferrero says donors are often looking for the “win-win” in which they can make a donation to support research, education or clinical care and at the same time avoid paying further taxes. “Some people are finding that, after they reach the age of 70 and a half, they do not need to take the required minimum distribution from their retirement account,” she says. “In those cases, they can transfer retirement assets directly to Johns Hopkins and avoid paying additional taxes.”

Similarly, giving stock and other appreciated securities that the donor has held for one year or more directly to Johns Hopkins allows the donor to enjoy double benefits — an immediate income tax deduction on the fair market value of the stock gift and the ability to avoid capital gains tax.

“Everyone here believes in the power of philanthropy. Our institution was established by a philanthropic bequest from Johns Hopkins himself; so it’s in our DNA,” says Courtright.

To make a gift online, visit bit.ly/surgerygift.
Gala Supports Pancreatic Cancer Research (continued from page 1)

there’s nothing else we can do. ‘The gala felt like a way to actually have some control while raising consciousness of the disease.’

The contributions raised through the gala will help fund Wolfgang’s studies of circulating tumor cells that break free from the primary tumor and travel through the bloodstream, contributing to metastases. By the time pancreatic cancer is diagnosed, even if it’s early, it may already be systemic and recur, says Wolfgang: ‘If we can better understand these cells, their vulnerabilities and mechanisms of growth, we hopefully can develop novel therapies to prevent recurrences in patients who undergo surgery.’

William is a fighter who has gone through his treatments with grace, Wolfgang adds. ‘What’s really heartwarming about his family,’ he says, ‘is even though his care is ongoing, they’ve looked at the bigger picture and have been very altruistic in saying they want to make the situation better for others. They have gone above and beyond in getting support from many people through this gala and other means to support research at Johns Hopkins.’

Gifts Launch Rectal Cancer Survivorship Fund (continued from page 3)

near their home in Cincinnati, Ohio. At the time, their son Jonathan was a second-year medical student at Johns Hopkins, and he recommended she meet Jonathan Efron, then chief of the Division of Colorectal Surgery.

Efron coordinated with Debra’s local physicians and, after a few months, performed surgery. When the cancer metastasized a few years later, Efron referred her to Richard Battafarano, director of the Division of General Thoracic Surgery, who performed two more surgeries.

Around the time of Debra’s last surgery, Tom wasn’t feeling well. A colonoscopy revealed that he, too, had rectal cancer, and so he called Efron and had surgery a few months later.

Together, Tom and Debra recovered and returned to the activities they enjoy, such as walking several miles a day. They are delighted that the Rectal Cancer Survivorship Fund is providing comfort to others going through similar medical experiences.

‘Johns Hopkins has been wonderful to us,’ says Debra. ‘It was a little way to thank them for what they have done.’

To make a gift online, visit bit.ly/surgerygift.