Chairman’s Message:
Philanthropy in the Department of Surgery

Friends & Colleagues of the Department of Surgery:

Philanthropy literally means "love of humanity." The Philosophical Dictionary contains a similar definition: "A state of educated habits stemming from love of humanity that benefits both the giver and receiver." The Fall 2014 issue of Surgery Synopsis focuses on philanthropy and provides vivid examples on how it has helped our Department. We dedicate this issue to our donors and we thank them for their confidence and trust that together we can craft a better future for humanity.

Without the generosity and love of humanity – in other words: philanthropy – of our friends, patients, alumni and current staff and faculty, our mission would be constricted; discoveries, not made; and work for the public good dramatically diminished.

All the stories behind those inspired to give to our Department would fill a book: A patient, grateful to be alive after a difficult operation decides to show gratitude with a gift – large or small; the family of a patient, in gratitude or in memory, sets up a fund to advance research in a particular area; an alumnus is grateful for the outstanding education they received and gives to make sure great medical education continues; a young person who yearns to be involved in medicine in some way, "pays it forward;” a staff member who is proud of the mission and

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“Endowed Chair: A Shared and Rewarding Experience for the Donor and Recipient” by Alexander W. Clowes, MD

I am fortunate to have been recruited by then Department Chair John Schilling in 1980 and to have spent my entire career in the Department of Surgery at the University of Washington. I have enjoyed the camaraderie of my academic colleagues and the sense of shared mission and collaboration not only with them but also with my patients.

I am a firm believer in collaboration. Collaboration between physician and patient, collaboration between and among physicians, and collaboration among the team of health care providers. Physicians make their best effort to cure patients, who in return express gratitude. That gratitude sometimes is expressed as a gift. A gift that is made sometimes as payback to medical science, to society, or simply to express appreciation to the physician for the care they received. Sometimes, it involves a desire on the part of the patient to know more, to understand the mysteries of the particular disease, or to contribute to the development of a cure. This curiosity combines with a desire to contribute and to be a part of the discovery process.

In the course of this collaboration, all involved come to recognize the importance of the special, shared process that takes place; a process that can include giving of financial support, but goes well beyond.

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demonstrated expertise in this Department, gives. All of these are unique and wonderful stories that deserve telling. We hope to tell you more stories in subsequent editions of Surgery Synopsis. For length and impact, we have highlighted only a few in this issue. We also present you with statistics of giving for FY 2014 in aggregate.

One story highlighted in this issue relates to Dr. Alec Clowes, Professor and holder of the V. Paul Gavora and Helen and John Schilling Endowed Chair in Vascular Surgery. In his own words he tells us what endowment funding has meant to his long and productive research career. Similarly, Nicole Gibran, MD, Professor and Director of the UW Medicine Regional Burn Center at Harborview, and holder of the David and Nancy Auth-Washington Research Foundation Endowed Chair for Restorative Burn Surgery, relates what the endowment has meant for her professional development and how it has advanced her research and the ability to successfully restore to society burn victims that would have become permanently disabled or died in the not too distant past. I know you will find both of these stories of great interest.

Three years after I joined our Department I was awarded the first chair our Department had ever created, named after the first chairman, Henry N. Harkins, MD, Professor. I began to see the extraordinary benefits provided by the additional funds from this Chair that included allowing us to recruit a top liver cancer researcher (Raymond Yeung, MD, Professor), and allowing me and the team that works with me to unravel some of the mysteries associated with esophageal diseases, bringing new knowledge and potential solutions to esophageal problems. Seeing the benefits led me to set myself a goal to try to raise a professorship or a chair every year. Today, our Department has 18 chairs and professorships deployed at UW Medical Center (UWMC), Harborview Medical Center (HMC) and Seattle Children’s Hospital (SCH).

These chairs and professorships provide their holders with the same exceptional support I have experienced. We take this opportunity to provide a brief overview of many of these endowed chairs and professorships in our Department. These endowments have allowed us to recruit and retain faculty of the highest caliber in every area of our Department and have pushed their patient care, research and academic interests forward in amazing ways.

We also review some of the gifts not devoted to Chairs or Professorships, but to important parts of our mission: resident training and research. For instance, The Schilling Lecture fund was established so that every year the Department is able to plan an event that showcases and advances resident research. Funds that Helen and John Schilling donated for this purpose provide us with the means to put together an extraordinary day and a half of research presentations, thoughtful discussions, networking opportunities and a challenging lecture from a distinguished visiting lecturer. These kinds of gifts are critical to the continued academic prowess of a Department.

When you come away from reading this edition of Surgery Synopsis, I hope you all understand how much these gifts have meant and mean to our Department. And for those of you who are our donors, I express to you how much we honor your giving and thank you for your gifts.

Our next issue comes out after the beginning of the year, so I take this opportunity to wish all of you joys of the up-coming holiday season.

Sincerely,

Carlos A. Pellegrini, MD, FACS, FRCSI (Hon.)
The Henry N. Harkins Professor & Chair
Department of Surgery
University of Washington

In my case, the chair I hold, the V. Paul Gavora and Helen and John Schilling Endowed Chair in Vascular Surgery, is a result of a strong desire on the part of the Schillings and later the Gavoras to support the Vascular Division and my own research on the biology of vascular injury and repair. John Schilling himself had devoted much of his own career to the study of wound healing and wanted to see this line of investigation continue in the Department. He also was keenly interested in supporting the careers of young faculty.

Paul Gavora, a patient of mine from Fairbanks, Alaska required extensive vascular reconstruction with a vein bypass graft in one of his legs. When we first met, he was fearful that he was about to lose his foot from diabetes, ischemia and gangrene. Even after surgery he was concerned that scarring in the graft with narrowing of its lumen, through which blood was supposed to flow, would occur. He knew I had devoted my life to the study of why that narrowing occurs after surgery and how to prevent the scarring from occluding the new blood vessels.

Both the Schillings and the Gavoras recognized the need for innovation and for further investigation of vascular wound healing if limb loss was to be prevented. The research and pursuit of novel approaches to making vascular surgery more successful would require the effort of scientists and surgeons working together.

The support provided by a permanent source of funding, in my case derived from an endowed chair, has made it possible for me to undertake lines of research that otherwise would be impossible without such private financial support. For example, in mid-career, I was able to take a sabbatical and become trained in molecular biology. More recently, I have been able to use modern molecular genetic approaches to test the hypothesis that there is a pre-determined genetic basis for the arterial response to injury, restenosis, and ultimately in some circumstances an increased need for more surgery. The success that we have had is the result of a shared venture that reflects a strong desire on the part of everyone involved to know more about the problem at hand and to contribute to the quest for better treatment.

My own experience with the Schillings and Gavoras is not unique and illustrates the