

HERE

2022

GIVING BACK

Mui Kwok Buddhist Temple pledges \$1 million to support health care

FOR FAMILY

Cathy Housdorff honours her father

KIDNEY CARE

A generous donation brings home dialysis closer to reality

THE FUTURE OF HEALTH

CAN DONOR SUPPORT TO THE UNIVERSITY HOSPITAL FOUNDATION HELP CURE DIABETES?

LET SLEEPING ORGANS LIE

Dr. Evangelos Michelakis leads research in organ hibernation

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DR. LORI WEST,
Director, Canadian Donation & Transplantation Research Program and Director, Alberta Transplant Institute



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
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ON THE COVER

Over the next three years, the University Hospital Foundation is committed to moving the dial on three core fundraising areas at the University of Alberta Hospital site – Precision and Digital Health, Addiction and Mental Health and Transplant in support of some of the best and brightest health care professionals in the world like **Dr. Lori West**, Director, Canadian Donation & Transplantation Research Program and Director, Alberta Transplant Institute.

Thank You



Every year, the Festival of Trees brings joy and wonder to thousands of Albertans. This is only possible, thanks to the continued generosity of our presenting sponsor and partner, Landmark Homes. Their partnership with the University Hospital Foundation has helped us reach our goal of improving the quality of life for more Albertans living with end-stage kidney disease.

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Artwork by Laura Bachynski



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EVERYTHING IS POSSIBLE

A message from Dr. Jodi L. Abbott, president and CEO of the University Hospital Foundation

photography
LAUGHING DOG
PHOTOGRAPHY

Bill Stephenson, age 59, is a live-life-to-the-fullest kind of person. A husband, father, musician, painter, pilot ... incredibly, the list goes on. Yet his most recent achievement may also be his most impressive – he can walk.

In August 2021, the single-engine plane Bill was flying crashed into the ground. Following hours of surgery to repair his shattered spine, he was told that he would never walk again.

Then Bill met Dr. Chester Ho, a neurologist at the University of Alberta Hospital (UAH) with a special interest in spinal cord injuries. In fact, Dr. Ho was recruited to the University of Alberta in 2017 as Director, Physical Medicine & Rehabilitation, and inaugural Spinal Cord Injury Research Chair.

With years of medical training from renowned universities, including Cambridge and Harvard, Dr. Ho brought a different perspective to Bill's charts and saw the potential for recovery. And, he was right.

AS AGENTS OF HOPE, THE UNIVERSITY HOSPITAL FOUNDATION IS COMMITTED TO CREATING A WORLD THAT IS HEALTHIER, STRONGER AND MORE PREPARED FOR THE FUTURE THAT AWAITS US.

Dr. Ho is one of the many brilliant people at UAH whose work is supported by donors to the University Hospital Foundation. In this issue of *HERE*, you will learn more about how we are igniting transformational change in areas as far-ranging as neurorehabilitation, diabetes research and the future of organ transplantation, as well as the role our corporate and individual donors have already played in changing the lives of people with end-stage kidney disease and other devastating conditions.

You will also learn how we use our unique position within the health care ecosystem to bring together leaders in industry, government and community to create partnerships that make even the most daunting tasks – developing data platforms that may one day form the basis of astonishing medical breakthroughs in conditions like multiple sclerosis and cardiopulmonary disease – possible.

Why are we telling you these stories? To share a glimpse of the incredible challenges and unimaginable inspiration and excitement that form the basis of our work; and to let you know that, as agents of hope, the University Hospital Foundation is committed to creating a world that is healthier, stronger and more prepared for the future that awaits us.

Of course, we can only accomplish this with your support. Donor generosity is at the heart of everything we do and together, everything is possible.

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COMMUNITY CONNECTIONS

Dave McDougall's vast network leaves a lasting legacy in his honour

by LISA CATTERALL

By all accounts, there was something special about Dave McDougall.

As a pioneer in Edmonton's land development industry, Dave was a savvy entrepreneur, a caring community member and a passionate advocate for the city. Throughout his more than 60-year career, he facilitated the growth of communities across Edmonton, touching the lives of thousands along the way.

"Dave was just the kind of guy who wanted to take care of other people. The sick or the homeless, everyone," says Wes Alexander, a lifelong friend and eventual business partner of Dave. The two met in high school, when Dave stopped to make sure that Alexander could get home safely after a basketball game. "It was such a surprise to me that this tough guy wanted to check on me and would take the time to care like that. But that's just who Dave was - he had a heart of gold and was just a good, honest person."

Over the years, the two stayed in touch as they launched their respective careers. As Dave's development company, MLC Land, saw success, he turned his attention towards philanthropic efforts. He got involved in the University Hospital Foundation's Brain Centre Campaign and used his love of golf as a gateway to raise funds for local causes through the annual MLC Charity Golf Tournament.

When Dave passed away in February 2021, his loss was mourned by close family and friends, as well as a vast network across Western Canada. In that moment of loss, Alexander saw an important chance to honour his friend's legacy, deciding to create a memorial fund in his name. He spoke with Dave's family, and contacted Chris Nicholas, a long-time employee at MLC Land, with the idea. They set an ambitious goal - raising \$1 million to support innovation

in lung care at the University of Alberta Hospital - and set to work calling friends and colleagues who might be interested in donating.

They didn't expect to meet the goal just six months later.

"I've been involved in a lot of fundraising efforts, and this was unbelievable. It's a testament to him, really, to how great he was," says Nicholas. "It was effortless to raise a million dollars like this for Dave."

"Dave McDougall was a wonderful person and an absolute pillar in the philanthropic community. His friends and family have created a lasting tribute and a beautiful legacy for a man who touched so many lives. It's an incredible way to honour his memory," says David Finlay, past chair of the University Hospital Foundation (UHF), who played an instrumental role in stewarding the gift for UHF.

In addition to the donations raised by Alexander, Nicholas and all the members of Dave's network who gave so generously to reach the \$1 million fundraising goal, one of Dave's favourite pieces of art has been donated by his wife, Arlene, to UHF. "Coney Island" by Peter Schuyff will soon be displayed in the University of Alberta Hospital's Kaye Edmonton Clinic as a continued visual reminder of Dave's legacy of giving. ■

NEED BUSINESS OR TAX ADVICE IN THESE CHALLENGING TIMES?

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by UHF STAFF + illustration NOA SONG

DATA-DRIVEN EMPOWERMENT

Strategic partnerships bring hope to people with MS

W

hen Jane Holmlund recalls the day she was diagnosed with multiple sclerosis (MS) 41 years ago, what she remembers most is the lack of knowledge and understanding about the disease that her doctor shared with

her. "He told me to go home and get used to living with MS, and that was basically the end of it."

Is it different today?

"In a word, yes," says Dr. Lawrence Richer, vice-dean research (clinical) in the University of Alberta's Faculty of Medicine and Dentistry, and centre director of the Northern Alberta Clinical Trials and Research Centre. "In the last five years or so, there have been a flurry of new disease-modifying therapies that suggest things will be different for MS in the foreseeable future."

MS is also the focus of a project led by the University Hospital Foundation (UHF) based on several strategic, research-driven partnerships with multinational pharmaceutical companies.

"Because Alberta has one of the highest rates of MS in the world, the province has the clinical and administrative infrastructure that supports and facilitates a unique interdisciplinary care model with the resources to amplify translational research capacity," says Caroline Thompson, director of philanthropy with UHF. "Researchers and clinicians have access to province-wide health meta-data and a world-leading artificial intelligence community."

Currently, UHF has attracted investments from Biogen, Hoffman LaRoche Ltd. (Roche), Novartis Pharmaceutical Canada Inc and Prairies Canada for data projects, and from Roche and Biogen for biomarker studies.

"Such partnerships extend beyond MS," says Lisa Munro, chief development officer with UHF. "We are in

a unique position in that we can bring stakeholders to the table that potentially have competing interests. But our only agenda is finding innovative solutions to complex health challenges. What we're finding is that a lot of these organizations want the same thing – a health data platform. A way to measure which therapies are working. What is the difference between care in major centres and care in smaller communities?"

"That is just the start of the information that data can provide," says Richer. "The gold standard in terms of diagnosis and monitoring disease progress are expensive tools like MRI. It's quite a reasonable question to say, 'Are there other ways we could monitor disease progression that don't require expensive tests that you only get once every two or three years?'"

"That's where the health data platform can work with digital companies, startup companies that have ideas about this. We could start to marry the data with their technology, for example, and introduce studies where we could invite persons with complex conditions like MS to try these devices and see if we can't get a better handle for what's happening at home."

"We're empowering the patient to have more autonomy, more control. Imagine if you could bring data to your neurologist showing that there's changes in your physical status, as well as just reporting, 'I feel different.' Whereas right now it's, you report your symptoms. Maybe the doc sees something on exam, maybe they don't. Maybe they order an MRI, maybe they don't. It's very doctor-centric. Whereas this, I think, brings a dimension where patients have more autonomy in terms of tracking their progress."

"It starts with bringing the right people with the right resources to the table," says Munro. "Through our strategic partnerships, we can bring hope to people with MS and cardiopulmonary disease and any number of other conditions, and make real progress towards improving their lives." ■



"We're empowering the patient to have more autonomy, more control. Imagine if you could bring data to your neurologist showing that there's changes in your physical status, as well as just reporting, 'I feel different.'"

– Dr. Lawrence Richer, vice-dean research (clinical) in the University of Alberta's Faculty of Medicine and Dentistry and centre director of the Northern Alberta Clinical Trials and Research Centre



LEFT TO RIGHT: BRAD ARMSTRONG, VICE PRESIDENT, COMMUNITY DEVELOPMENT, NORTHERN ALBERTA — QUALICO, LISA MUNRO, UHF'S CHIEF DEVELOPMENT OFFICER AND SHANE ERICKSON, REGIONAL VICE PRESIDENT, NORTHERN ALBERTA — QUALICO

"No more 15-20 hours a week at the hospital. No more looking for parking. With home dialysis, I can dialyze whenever I want for as long as I want," says Gantar.

The optimal treatment for people living with end-stage kidney disease is a kidney transplant, but that can take years to happen and not everyone qualifies, leaving dialysis as their only option. In-centre hemodialysis involves three to four sessions every week for four to five hours at a time, plus travel. In comparison, home dialysis offers more flexibility and most importantly, independence, creating opportunities for school, work and spending quality time with family.

"Qualico's generous donation will ultimately make life better for Albertans living with end-stage kidney disease, and speaks volumes to the incredible impact that our corporate partners have on the communities they work in," says Dr. Jodi L. Abbott, president and CEO of the University Hospital Foundation.

It will also help lighten the load on facility-based dialysis units like WEKC. Cases of end-stage kidney disease are increasing at a rate of 4 per cent per year in Alberta, putting added strain on facilities that are already near or at capacity. Currently, Alberta Kidney Care — North has 30 per cent of their dialysis patients on a home therapy. Their goal is to increase that support to 40 per cent of the dialysis patients by 2025.

"Support from business leaders like Qualico is exactly what we need to provide people living with end-stage kidney disease access to expanded care and training for home therapies," says Dr. Kailash Jindal, Medical Director of Alberta Kidney Care — North. ■

HOME SWEET HOME

A generous donation from Qualico brings home dialysis closer to reality

Shane Erickson, regional vice president, northern Alberta for Qualico, understands the value of strong partnerships and the role they can play in transforming lives. Take their donation to the University Hospital Foundation (UHF), for example. Qualico's generous \$750,000 gift promises to open doors to a new way of life for people living with end-stage kidney disease.

"I've heard stories about how difficult it is for hemodialysis patients, especially those who don't live close to an urban centre. It struck me how disruptive and difficult life would be," says Erickson.

By helping to equip the second floor of the new West Edmonton Kidney Care (WEKC) centre, operated by the Alberta Kidney Care — North program at the University of Alberta Hospital, Qualico is making it easier for people on dialysis to transition to home therapies, a move that long time dialysis patient Taryn Gantar says changed her life.

"Support from business leaders like Qualico is exactly what we need to provide people living with end-stage kidney disease access to expanded care and training for home therapies."

— Dr. Kailash Jindal, Medical Director of Alberta Kidney Care — North

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The University Hospital Foundation is pleased to partner with Novartis in inspiring bold solutions in the care and treatment of multiple sclerosis and cardiovascular health.

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for your commitment to reimagining medicine and improving the quality of life for so many Albertans.



“In times of crisis where difficulties and tragedies are looming large on us, we have an obligation to extend a helping hand to others. Our gift to the University Hospital Foundation is merely a gesture of gratitude, from one human being to another. A heart of loving-kindness and compassion may not be sufficient, but it is a starting point in offering assistance.”

– Venerable Jianzong, Abbot of Mui Kwok Buddhist Temple

by UHF STAFF + photography COOPER & O'HARA

GIVING BACK TO THE COMMUNITY

MUI KWOK BUDDHIST TEMPLE
PLEDGES \$1 MILLION TO UNIVERSITY
HOSPITAL FOUNDATION ▶

In 2020, the Mui Kwok

Buddhist Temple in Edmonton made a \$1 million pledge to the University Hospital Foundation. Such transformational generosity from the community enables true advancements in patient care and research, benefitting patients across Alberta and around the world.

We spoke with members of the Temple, including Abbot of Mui Kwok Buddhist Temple, Venerable Jianzong (Master Ivan), to gain a greater appreciation for their gift and why giving back to their community is so important.

Q: What is the history of the Mui Kwok Buddhist Temple in Edmonton?

A: The temple was established in 1990 by the late Venerable Wude. We were the first Chinese Mahayana Temple with a monastic community. We were located in the McCauley area until 2020 when we moved to our new temple in Beaumaris.

Q: Why is it important to give back to your community?

A: According to Buddha's teaching, practicing generosity is one of the first steps on the Bodi Path. Five years ago, we pledged \$1.5 million in support of higher education at the University of Toronto. In 2020, we observed how COVID affected health care so we felt giving to a healthcare organization

was the best path. As a religious and spiritual organization, we felt it was our responsibility to give back to the community in any way possible.

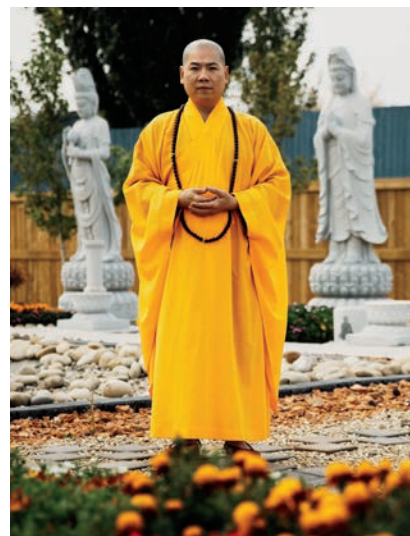
Q: Why did you choose the University Hospital Foundation?

A: The University of Alberta Hospital is the largest hospital in Edmonton. We recognize its excellence in so many areas of health care including cardiology, neurology, transplant, and research, which can have such impact on innovation in health care in Alberta and around

the world. It is also a teaching hospital and we wanted to support the next generation of healthcare workers. The University Hospital Foundation has a long history of supporting all of these areas, giving our pledge the greatest potential to multiply and become worth even more.

Q: What do you hope this pledge achieves?

A: We don't know how far \$1 million goes but we hope it can help in any area of emerging need. ■



"VENERABLE JIANZONG, YOUR DESIRE TO APPLY TEACHINGS OF THE BUDDHA BY ENGAGING IN ACTIVITIES THAT CAN BENEFIT THE COMMUNITY IS INCREDIBLY INSPIRING. ON BEHALF OF THE UNIVERSITY HOSPITAL FOUNDATION, AND THE MILLIONS OF LIVES YOUR GIFT WILL CHANGE AND SAVE IN THE COMING YEARS, THANK YOU."

— Dr. Jodi L. Abbott, president and CEO of the University Hospital Foundation

by UHF STAFF + photography COOPER & O'HARA + BLUEFISH STUDIOS

IGNITING THE FUTURE OF HEALTH

THE UNIVERSITY HOSPITAL FOUNDATION SUPPORTS GROUND BREAKING RESEARCH, MADE RIGHT HERE IN OUR CITY

At the University Hospital Foundation (UHF), we like to think big. We use our unique place in the healthcare ecosystem to bring people and resources together. Ignited by incredible community support, we get things done. Big things, that transform health and help people live longer, happier lives.

Incorporated in 1962, UHF raises funds to advance patient care at the University of Alberta Hospital, Mazankowski Alberta Heart Institute and Kaye Edmonton Clinic, and support world-leading research that has an impact across the globe.

The University of Alberta Hospital site (UAH) sees over one million patient visits a year – including adults and even children from across Western Canada and the northern Territories.

Clinicians and surgeons work hand-in-hand with researchers, exchanging ideas and information that are taken from the research bench to the bedside of our patients – and vice versa, creating a continuous cycle of discovery and innovation.

Our donors and our corporate and strategic partners, who give generously to causes of their choice, are the lifeblood of the UHF. In the last 10 years, donors have contributed nearly \$220 million, advancing patient care and research in every department of the University of Alberta Hospital site, including brain and spinal cord, cardiac, transplant, gastrointestinal, urologic and northern Alberta's only Level One Trauma Centre.

As agents of hope, our purpose is to continuously seek, inspire and lead bold solutions to seemingly insurmountable challenges and ignite new discoveries in health. >



DR. MICHELLE NOGA, medical director of the Servier Virtual Cardiac Centre at the University of Alberta Hospital's Mazankowski Alberta Heart Institute, is one of the best and brightest medical minds supported by donors to the University Hospital Foundation.

photography COOPER & O'HARA



"IS IT POSSIBLE TO INDUCE HIBERNATION IN HUMAN ORGANS? OF COURSE IT IS."

— DR. EVANGELOS MICHELAKIS, CLINICIAN SCIENTIST, UNIVERSITY OF ALBERTA HOSPITAL

photography COOPER & O'HARA

HIBERNATING ORGANS? BANK ON IT.

IMAGINE A WORLD where waitlists for organ transplants are a thing of the past.

Where transplant-ready lungs, livers, hearts and kidneys are stored safely in refrigerated organ banks.

Where doctors could find the best match for every recipient and surgeries could be scheduled, making it possible for everyone, regardless of where they live, to get the transplant they need to survive.

What would it take to make that happen? According to Dr. Evangelos Michelakis, a clinician scientist at the University of Alberta Hospital, and in partnership with Dr. Darren Freed, Dr. Jayan Nagendran and Dr. Gopi Sutendra, the answer may be hiding inside us. "Humans used to hibernate. It is in our genes, but those genes are inactivated by what we call an 'epigenetic mechanism.' In short, the genes are there, but they've been silenced.

"We think that there is a 'mediator,' or we call it a drug that when it circulates in the organ, can actually give a command to activate that hibernation machinery."

When a bear hibernates, its organs adapt to limited supplies of oxygen and blood, allowing it to lie dormant for months and wake up good as new, albeit stiff and a little groggy. The doctors and their team of researchers believe that inducing hibernation in donor organs will enable the organs to "live" longer outside the body, giving transplant programs the ability to create organ banks similar to blood banks.

"When someone needs a blood transfusion, we go to the blood bank where there are hundreds of bottles of blood. We find the perfect match and perform the transfusion.

"Is it possible to induce hibernation in human organs?" says Michelakis, "Of course it is."

THE MAGIC OF REHABILITATION

THE OFFICIAL CAUSE of Bill Stephenson's plane crash was engine failure after takeoff. He recalls blacking out just before hitting the ground. Minutes later, he regained consciousness to the sound of someone asking if he knew what his name was. He responded with the right answer, but he had bigger concerns on his mind — he had no feeling in his legs, feet or toes.

Flown by air ambulance from the crash site at the Wetaskiwin airport to the University of Alberta Hospital (UAH), Bill underwent several hours of surgery on his shattered spine. He also had 12 broken ribs. Everything else, he says, "was just fine."

A few days later, he had a talk with his physician. "I asked him, 'Do you think I'll ever walk again?'" And he goes, "Well, there's always hope you can do this and this." And I said, "In your experience with this extent of injury, have you seen anyone walk from it?" And he just shook his head. So I was like, you know, that's it for me."

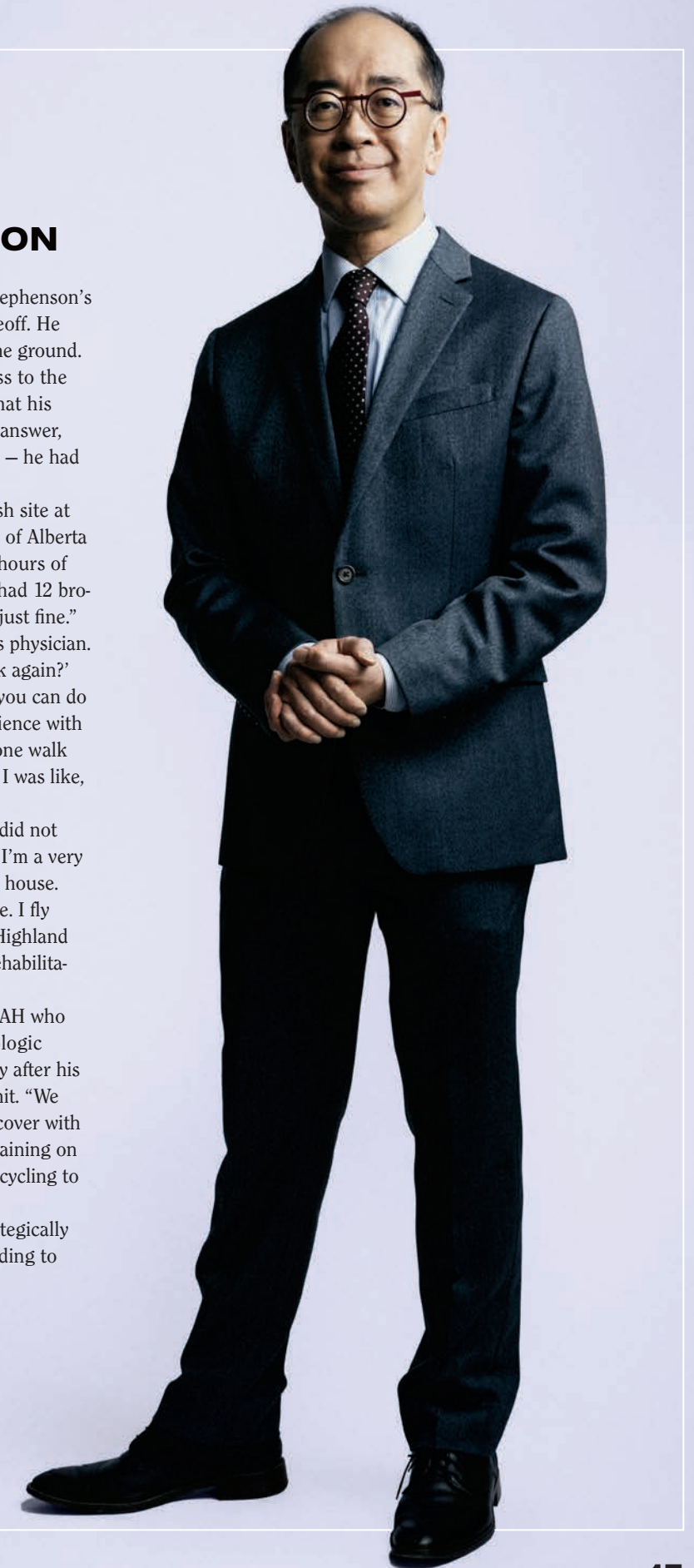
But, it wasn't. True to his nature, Bill did not accept his surgeon's prognosis as final. "I'm a very active person. I have my own gym in the house. I'm a portrait artist. I play piano and flute. I fly airplanes. I have a farm. I used to raise Highland cattle. So yeah. When they offered me rehabilitation, I took it."

Dr. Chester Ho, a neurologist at the UAH who specializes in rehabilitation after neurologic injuries, saw potential in Bill immediately after his initial evaluation in the intensive care unit. "We identified him as someone who could recover with the right rehabilitation. We started his training on Functional Electrical Stimulation (FES) cycling to harness the neurorecovery potential."

Using hydrogel electrodes placed strategically on his legs, Bill's muscles began responding to the stimulation. >

DR. CHESTER HO, NEUROLOGIST, UNIVERSITY OF ALBERTA HOSPITAL

photography COOPER & O'HARA



Days later, he felt a faint tingle in his left foot. “They said, ‘Can you move your feet?’ and suddenly I could. Just barely, but that was the start of it.”

Six months later, Bill now walks unaided in his house and with a walker when he goes outside, but, even that is temporary, he says.

For patients with debilitating brain and spinal cord injuries, early access to advanced rehabilitation is critical to recovery. Currently, the wait is between 15-25 days before they’re transferred to a rehab facility.

A new, state-of-the-art Neuro-Rehabilitation Innovation Centre at the UAH will provide patients with convenient and early access to innovative treatments and state-of-the-art technology. Led by Dr. Ho, the new centre will also serve as an advanced research hub for neurologic centres across North America.

THE END OF DIABETES

AFTER 40 PLUS YEARS of living with diabetes, Brent Smithson is at a loss for words when he considers what life without it may be like. “I feel like I’m there now,” he says, “It’s weird.”

Diagnosed with diabetes in 1978, Smithson was on insulin for the following 44 years. Without functioning islet cells, he had to test his own sugar levels up to six times a day. By 2017, the indicators that his sugar levels were dropping went from shivers, shakes and cold sweats to middle-of-the-night seizures. “They were pretty terrifying,

My wife wasn’t sleeping well in those days.”

The seizures led him to the lab of Dr. James Shapiro, a transplant surgeon at the University of Alberta Hospital (UAH) and lead researcher on a revolutionary project that has the potential to end diabetes.

No stranger to transformational research discoveries, Shapiro’s work in 2000 as the director of the Clinical Islet Transplant Program at the University of Alberta led to a procedure known worldwide as “The Edmonton Protocol” for transplanting insulin-producing islet cells.

As successful as the Edmonton Protocol has been in reducing the need for daily insulin injections, it left recipients with a lifelong dependency on anti-rejection drugs and, due to a shortage of available islet cells for transplantation, could only help a limited number of people.

Shapiro’s current research

involves extracting and converting a patient’s own blood cells into islet cells which he then transplants back into the patient, the idea being that the patient’s body will begin producing insulin on its own, effectively curing diabetes.

“The idea that you could generate patients’ own cells and not need anti-rejection drugs, and that you could apply it for all forms of diabetes, not specifically type one but type two as well, and maybe in children and other unusual forms of diabetes makes this, I think, particularly attractive,” says Shapiro.

By supporting the University Hospital Foundation, you are supporting patient care and research here in Edmonton and potentially around the world.

To learn more, visit our website at GivetoUHF.ca.



DR. JAMES SHAPIRO, TRANSPLANT SURGEON, UNIVERSITY OF ALBERTA HOSPITAL

photography BLUEFISH STUDIOS

BY THE NUMBERS

UHF AT A GLANCE

Donor support has allowed the University Hospital Foundation (UHF) to distribute millions of dollars to every corner of care at the University of Alberta Hospital site (UAH). This includes brain, cardiac, transplant, kidney care and trauma, as well as inspiring research competitions and ground-breaking projects.

Our donors play a critical role in the healthcare ecosystem, igniting innovation that will impact patient care in Alberta and around the world.

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At full capacity, the Kaye Edmonton Clinic consolidates **80 outpatient clinics** under one roof and provides ambulatory services to **>1M patients every year**



1 in 4 dollars to help build the Mazankowski Alberta Heart Institute (Maz) was provided by donors to the UHF



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*As of March 2022



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MILLION has been raised for the Maz

2021/22 FISCAL YEAR TO DATE (As of March 2022)

20 STRATEGIC PARTNERSHIPS

Supporting critical areas of care: Multiple Sclerosis, Alzheimer’s Disease, Diabetes, Cardiovascular Diseases, Lung Disease, Rare Disease, Gastrointestinal, Virology

With these themes:

Digital Health, Indigenous Health, Health Technological Wearables, Care in the Community, Improved Care Pathways, Health Data



33,991



gifts received* from 14,833 unique individual donors and 414 corporations or corporate foundations, including 592 donors from outside Alberta

*Between April 1, 2021 and February 28, 2022

6 strategic partnerships research projects awarded

18 active projects underway funded by the Kaye Competition (14 research projects and 4 quality improvement projects)

17 research projects awarded for the 2021 UHF Medical Research Competition (12 clinical research projects, 5 basic research projects)

1,662 registrations for Virtual Expeditions

88 endowed funds totalling \$20,944,786 as of March 15, 2022



\$3,887,765

distributed towards clinical projects*

*As of March 15, 2022



EVERY SECOND COUNTS

DONOR SUPPORTED PROGRAM BRINGS CARDIAC TREATMENTS TO PATIENTS

There's never a good time to have a heart attack, but there is a good place to have one.

Thanks to the cutting-edge work done at the University of Alberta Hospital's Mazankowski Alberta Heart Institute (Maz), Edmonton is the best place in Canada – and possibly the world – to be when a heart attack strikes.

A heart attack occurs when blood flow to the heart becomes blocked. When that happens, seconds can mean the difference between severe heart damage and no obvious damage. It is the difference between life and death.

With funding provided by generous donors to the University Hospital Foundation (UHF), heart specialists at the Maz have the ability to advance patient care and take healthcare innovation to new heights, including the development of the Vital Heart Response Program (VHR).

Based on research led by Maz cardiologist Dr. Robert Welsh and developed with Edmonton colleagues, the VHR Program is a game-changing system that takes life-saving treatment to patients, rather than waiting for heart attack victims to arrive at a hospital for diagnosis and treatment.

"One of the key things for treating heart attacks is time," says Dr. Welsh, who came up with the idea in 1999 while training as a resident. "We built a system of activating care wherever a patient presents."

To make the most of every minute a patient has, the VHR Program integrated ambulances into the spectrum of care for heart attack patients. Under the remote direction of a team of Edmonton cardiologists, northern Alberta paramedics – some of the most highly trained in the world – can receive approval to administer clot-busting IV drugs en route to the hospital.

The VHR Program is used specifically for STEMI

("ST-elevation myocardial infarction") heart attacks, which mainly affect the heart's lower chambers. It is one of the most severe and dangerous types of heart attacks.

The program is now offered in every ambulance and community hospital in central and northern Alberta. It has had such an impact on patient outcomes over the last 15 years that it is being copied and examined in major cities around the world.

"There's a thousand people each year – your friends and neighbours – having these events whose outcomes are improved by this program," says Dr. Welsh. "Usually, a STEMI heart attack has twice the risk of death (as a non-STEMI episode). We've taken the one that is supposed to kill twice as many people and reduced it to the point where it doesn't. The patients not only survive, but frequently underestimate the risk, saying "That wasn't so bad."

Today, the VHR team is looking for additional ways that innovation and technology can save even more lives. With help from the UHF, Edmonton collaborative researchers are taking bench research on the use of doxycycline and bringing it directly to heart attack patients to improve outcomes.

"There's also a new study coming up of a new antiplatelet that we'll deliver in the ambulance through injections," Dr. Welsh says.

New treatments are well placed at the Maz, which is home to state-of-the-art technology. It has the only cardiac hybrid operating room of its kind in Alberta, allowing cardiac surgeons and cardiologists to work on the same patient at the same time to provide the best care.

Its Cardiovascular Intensive Care Unit (CVICU) has proven one of the best in Canada for providing advanced cardiac and respiratory mechanical circulatory support.

THE PROGRAM IS NOW OFFERED IN EVERY AMBULANCE AND COMMUNITY HOSPITAL IN CENTRAL AND NORTHERN ALBERTA. IT HAS HAD SUCH AN IMPACT ON PATIENT OUTCOMES OVER THE LAST 15 YEARS THAT IT IS BEING COPIED AND EXAMINED IN MAJOR CITIES AROUND THE WORLD.

The institute also has the largest adult and pediatric heart-lung transplant program in Western Canada – ranked an impressive sixth in the world for transplanting excellence in clinical care and research. It is a centre for the brightest of minds seeking bold solutions and transforming health.

Dr. Welsh says he'll never stop striving to ensure the Maz remains Canada's gold standard for heart attack treatment.

"Even though we're one of the best in the world – if not the best – we've never stopped trying to get better. We just keep pushing forward." ■



■ **"THERE'S A THOUSAND PEOPLE EACH YEAR – YOUR FRIENDS AND NEIGHBOURS – HAVING THESE EVENTS WHOSE OUTCOMES ARE IMPROVED BY THIS PROGRAM."**

– Dr. Robert Welsh, cardiologist, the University of Alberta Hospital's Mazankowski Alberta Heart Institute

**Mishaela Houle, Executive Director,
Cardiac Sciences, Edmonton Zone**
photography **COOPER & OHARA**

CATHY HOUSDORFF WITH HER FATHER, STAN HOUSDORFF



Leaving the gift of a lifetime, and beyond

How Cathy Housdorff's gift in her will honours her father and advances research and patient care for the future

by KATRINA TURCHIN

It was September 2020. Cathy Housdorff drove eight hours to Regina to see her father. They sat outside in the courtyard six feet apart, and she couldn't even hold his hand due to COVID restrictions. That was the last time she saw him.

Lovingly referred to as "Stan the Man," Housdorff's father died three months later of Lewy Body Dementia, the second most common type of progressive dementia after Alzheimer's. He had turned 90 years old only a few weeks prior. Stan's bond with Cathy and her sister strengthened in the many years after their mother died at 57 years old. Stan and his wife had worked hard to put both of them through university, which was not easy but important to their family. After he passed, Housdorff contacted the University Hospital Foundation (UHF) looking to leave a legacy gift in her will in honour of him.

"I wanted to give something back, for being grateful for what I've been blessed with," says Housdorff. "And I didn't want to just do \$100 every paycheck. I wanted it to be significant, and I'm doing it in my dad's name."

Housdorff learned about groundbreaking research being done at the University of Alberta that may one day reverse memory loss in people living with Alzheimer's. She knew she wanted her gift to support that research, so other families may get the chance to have more time with their loved ones.

"The amazing thing about legacy giving is that you can out-live your life, in terms of impact," says Caroline Thompson, director of philanthropy at UHF. "Collectively, the estate gifts we receive have an incredible impact on the organization, and it's important to note that donors can direct their legacy gift to a specific area of care or research that's important to them."

A "legacy gift," sometimes known as a "planned gift," is a donation of money or portion of an estate given to a charitable organization through a will. These gifts are a meaningful way to leave the world a better place.

To learn more about how you can leave a gift in your will, please reach out to legacygifts@GivetoUHF.ca.

Housdorff's gift in her will is also a nod to the doctors who helped her through her own health scare. In 2013, doctors found a benign tumour growing on her pituitary gland. Housdorff has undergone two neuro surgeries and a non-invasive Gamma Knife radiosurgery to remove and prevent the tumour from growing.

"If what I'm doing can make a difference for even just a few people, then that's significant," says Housdorff. "And that makes me feel even better. That's not why I'm doing it, but I'm happy to tell people what I'm doing because I'm proud of who I am and I'm proud of my dad." ■

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