

Philanthropy Annual Report

Mini-Feature: DONOR PROFILE

Freedom from Addictions Brings Hope, Even Joy

When loved ones are lost to alcohol and drugs, expert help can put relationships back together.

Parent. Co-worker. Child. Friend. For those who abuse drugs or alcohol, the damage can cast a wide pall across the lives of everyone they love. Philanthropists John and Patricia Atkins, owners of Patsel's Restaurant in Glenburn, understand the realities of such addictions and, through their financial support to Geisinger's Marworth Drug & Alcohol Treatment Center, enable many people to live free from substance abuse.

"I came from a family of alcoholics," Pat says. "Daddy drank too much. But I loved him. He was my Daddy. I was his 'Patsel.'"

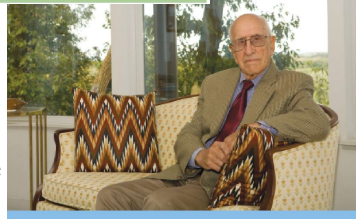
Such abiding love and tenderness is part of the heartache for people who live or work with alcoholics. For those in the throes of such addictions, Marworth offers hope.

"It wasn't my life that would have changed that much if Daddy had accepted help. It was his life that would have been changed," Pat says with regret. As an adult now living in Waverly, Penn., she also has seen close friends and their families devastated by alcoholism.

Pat chose to let her experiences inspire her to help others face their addictions. She has provided personal encouragement and even accompanied friends during successful rehabilitations at Marworth. And for many years, she and her husband, John, have supported Marworth's programs through yearly gifts.

Because of such support of Marworth's programs, families and friends are once again embracing loved ones they had lost to alcohol and drugs, and those recovering from addictions are finding joy and hope they might otherwise never have known.

"It's a wonderful, wonderful place," Pat says.



Mini-Feature: DONOR PROFILE

Cardiology Experts Lead Adventurer to Adopt Pennsylvania as His Home

Adventurer and British native Gordon Thompson's path into Pennsylvania was rather circuitous, but his relationship with Geisinger Health System became quite deliberate.

Some of Gordon's adventures include boarding a ship bound for the United States alone at age 15, rescuing Holocaust survivors when serving with the U.S.

Merchant Marines, founding a company while in his 20s, making—and losing—millions by his 40s, then gaining his foothold in business again.

"I've been short of money many times, and I've been close to death. I've been scared, and I've been alone," says the Lewisburg, Penn., resident and founder of the David J. Thompson Mailing Corporation, now in Bloomsburg.

"Through it all, people have helped me. I've always tried to turn it back around and help others."

Motivated by his life's experiences and the generosity of those who have helped him, Gordon's philanthropic focus is broad. It ranges from improving the lives of children in his British hometown to the health of people in his adopted home state of Pennsylvania. Recently, his philanthropy turned toward Geisinger.

Cardiologists here impressed him immensely during treatment for a heart attack years ago. His respect for their expertise is so great that twice later he bypassed other hospitals—one in downtown New York City and another in New England—in favor of care by Geisinger's specialists.

"They are what tie me to this hospital," he says. "My wife, Oci, and I even moved to Lewisburg in order to be near Geisinger."

In appreciation for his physicians' medical expertise, Gordon and his son, David, have donated funds to support Geisinger's cardiology services. Their gifts help ensure that friends, family, and neighbors also will find excellent care here, thanks to a philanthropy born of hardships and of helping, of privilege and of gratitude.

Copy by Amy@AveryWrites.com
Cancer Brochure/Development Office
Geisinger Health System, Pennsylvania

Answer the call

A diagnosis of cancer. It makes your mind race. It stuns your heart still.

One person's fight impacts entire families, entire communities.

Friends, families and neighbors answer the call. Helping with the smallest of details and the biggest of needs.

You can help. You can answer that call in many ways.

Smallest of details, biggest of needs

When a small newborn, an active schoolchild, or parents and grandparents have cancer, the diagnosis reveals needs that most have never considered before. What do I do next? What are my options? Is there someone who can help?

For each patient and their family and friends, your donation will address a variety of such questions, even before they are asked. Donations enable us to offer advanced, life-saving cancer treatment that is not available anywhere else in the region. Such gifts allow us to put an important system of medical care and support in place, all to help patients and their families right here in central and northeastern Pennsylvania.

In addition, donations also fund important intangibles, such as comfortable, homelike lodgings for parents, spouses, and families. Seemingly simple details like these can put some normalcy into the long days and nights of a hospital stay.

[new panel]

Join us in the fight against cancer

Throughout the rolling hills of Pennsylvania, a team of medical experts stands ready. They are the physicians, nurses, researchers, and staff of Geisinger Health System. And they are experts in caring for people with cancer.

From the most complex cancers to more familiar ones, patients every day depend on Geisinger to provide the latest in treatment and support. We welcome you to join this cancer care team.

Your gifts to the Geisinger Health System Foundation will:

- lead to research for exciting, effective treatments and cures
- provide expensive new equipment and innovative therapies
- fund programs to find cancer early
- create support groups and provide counseling

Donations bring important services like these closer to home and into the communities of central and northeastern Pennsylvania, right where your friends and family need it.

[new panel]

Support this spectrum of needs, options for giving

Geisinger Health System began with one woman's generous gift. Thousands of people have since answered that call. Today, these gifts combine to enable Geisinger Health System to bring extraordinary cancer care within reach of two million people in Pennsylvania.

From a \$5 gift to a \$5 million endowment, every donation puts patients and their families one step closer to their goals to beat cancer.

From the smallest of details and the biggest of needs, all are possible through your gift, your answer to that call.

[new panel]

Geisinger cancer services, in your community

Your support will improve and expand cancer services for patients and families throughout central and northeastern Pennsylvania. In addition to supporting cancer experts who visit Geisinger facilities across the state, they will also support the specialized services at these facilities:

[list of facilities]

Fundraising Direct Mail, “Age of Miracles” theme
(excerpt)

Audience: Potential Financial Donors

Dear,

For our family, friends and neighbors, you can make this an age of miracles.

For the newborn infant who arrived weeks too early.
For the school child enjoying sports despite his asthma.
For the baby-sitter on the phone with The Poison Control Center.
For the father in rehabilitation therapy after knee replacement surgery.
For the woman learning to manage newly-diagnosed diabetes.
For the grandparent who remains close to family at our impressive skilled nursing center.
And even for the family physician learning the latest procedures to care for you and your neighbors.

For all of these, and for many more, you can make this an age of miracles.

Wealth is not the key to philanthropy. The key is a kind and generous heart. At Southeastern Medical Center, every gift, large or small, builds upon the next. Each brings miracle-making and life-changing healthcare to people of every age. And so, not just every gift, but **every giver counts**.

Participate in the miracle. Generations depend on both the long-standing and the latest healthcare services at Southeastern Medical Center. Join your community in a commitment to ensure that the highest levels of care will continue. Our financial donors give cash gifts, and some pledge over time. They also give through trusts, wills, insurance policies, and other financial planning methods. As an individual, as part of a group, or as a business, you can ensure that medical miracles are part of every age, every stage of life in and around our county.

Join one of the giving clubs for Southeastern Medical Center. . . .[giving levels described] . . .

The Ella Fitzsimmons Heritage Society reflects some of the highest levels of dedication to the services of Southeastern Medical Center. Ella Fitzsimmon’s own gift, established in her will in 1918, created the original 18-bed hospital on Haynes Street downtown. This inspiring gift has grown miraculously to our present award-winning 157-bed hospital, outpatient facilities and long-term care center—which are in turn networked with a regional 17-hospital system.

Your gift, like that of Ella Fitzsimmons, can have a far-reaching impact on this and future generations.

And you can give through a variety of financial planning vehicles, including:

- wills
- life insurance
- real estate, and
- estate planning, including charitable gift annuities and charitable remainder trusts

Such gifts can offer both significant tax benefits to the giver as well as significant growth potential for the Fund. Many commonplace medical treatments were called “miracles” a generation ago. And a generation hence will marvel at new “miracles” as well.

Be a part of that exciting tradition with your gift to benefit Southeastern Medical Center.
Contribute today and help bring forth the next age of miracles.

[signature/contact info/giving envelope]

Copy by Amy@AveryWrites.com

“Grateful Patient” campaign including a series of

- post cards
- ‘ask’ letters
- video scripts

for Scripps Health, Calif.

“Grateful Patient” drip letter

Defined goal: *to drive prospects to personalized website (PURL):*

Dear [firstname],

You don’t necessarily know me. But you, others in our communities and I all have something in common: a proven confidence in Scripps. **I’d like to share with you exactly why I have that confidence—and why I’m a big supporter of the people and services there.**

My Dad needed a lot of care and attention during his later life. And we made many, many trips to Scripps. Each time I was with him there, it was always clear to me that the people who took care of him—every one—gave him their fullest attention and some of the best care he could get anywhere. They were exceptional. **And I’ve shared the details of my story at the webpage mentioned below.**

And it’s important for me to share this, too: their compassion didn’t stop with my Dad. Everyone at Scripps seemed to know what we as a family were going through, too. By their words and their actions, they showed us how very much they cared. I always felt comforted when Dad was in their care.

Because of this experience, I want to give back to these wonderful people and to such a wonderful place. By making a financial donation, I feel like I’m honoring my Dad in a very special way. And I’m making sure that the exceptional people and services at Scripps will be there for our neighbors and our friends, just as they were for my Dad and for my family.

For all these reasons, and for many, many more, I’ve made a gift to Scripps. It’s my way of saying, “Thanks.” **I hope you’ll watch our video at [PURL] to learn more about our family’s story. And I hope you’ll join me in supporting Scripps, perhaps for similar reasons, by making a donation, too.**

Sincerely,

Nancy Purvoy

Town

See Nancy’s full story—and the many other reasons she gives to Scripps: [web address]

To make a donation: [form]

To thank someone at Scripps who offered you or your loved ones care:

“Grateful Patient” campaign,
including a series of

- post cards
- ‘ask’ letters
- video scripts

**Copy based on patient interviews
and on-site visit
for Scripps Health, Calif.**

Copy by Amy@AveryWrites.com

Post Card copy, front:

**You and your neighbors have
something in common.**

Post Card copy, back:

You have a proven confidence in Scripps. You understand the compassion of everyone on your team. And you have confidence in your caregivers here.

- We might be at your bedside every day.
- Or we’re behind the scenes, carefully studying your medical tests.
- Others are down the hall, readying every tiny detail so that you get the care you need from an amazing team of caregivers.

Your doctors. Your nurses. And many others. We’re all here for you. We’re dedicated to your health and to improving your life.

And we thank you for your confidence in us.

Learn more about how the Scripps team impacts you and your neighbors, **and see a personal ‘thank you’ for coming to Scripps:** [\[purl \(personal URL\)\]](#)

Campaign Landing Page

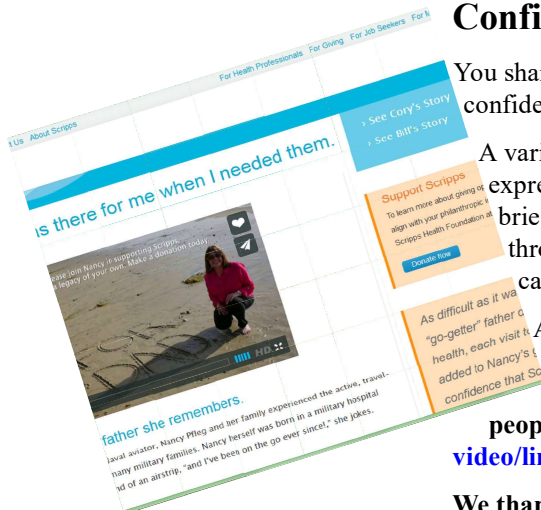
Confidence. Compassion. Inspiration. Scripps.

You share something in common with your friends, family and neighbors. That’s a confidence in Scripps.

A variety of people—people like you—have shared their stories of Scripps. Some express amazement at how clear our staff’s compassion comes through during even a brief hospital stay. Some come to depend on us over months or years, to support them through illness and injury. Others develop a special trust in us after witnessing our care for their beloved relatives.

As we listen to your stories and we hear your words, we hear some common themes. Confidence. Compassion. Inspiration. Your words mean a lot to us, and you do, too. **And so we want you to hear those words and see some special people. See Nancy’s, Bill’s and Corey’s stories of Scripps’ compassion.** [\[link to video/link to webpage\]](#)

We thank you for your trust in Scripps. For people like you, your family and friends, you inspire us to do our very best, every day.



Copy by Amy@AveryWrites.com

Foundation campaign report

Meredith College

(Excerpts from 32-page booklet I authored, based on phone interviews.)

A parent's challenge doubles donations

"Self-confidence is an important component of leadership," said Allen E. Gant, Jr., President and CEO of Glen Raven, Inc., an international provider of performance fabrics. "A lot of times, the difference between people who are successful and those who are not is self-confidence."

Clear about the value of the Meredith education and the potential to support other young women, Allen and Denise Gant, parents of Grayson E. Gant, '04, sponsored "The Parents' Challenge." During the Campaign for Meredith, they offered to match dollar for dollar gifts from other parents who felt as they do. Hundreds responded.

"Parent giving just shot through the roof because of their challenge," said Connie Harris, Vice President for Institutional Advancement. "The Gants obviously believe in Meredith, and their gift is a great example of what seed money can do."

In all, The Parents' Challenge raised over \$100,000 for The Meredith Fund. As parents and involved volunteers, the Gants are assured that the results of these gifts will be evident.

"Meredith helps build self-confidence, giving students the best chance at a career and at life," Gant said. "That's one of the really rich things that Meredith offers young ladies at a different level than many other colleges and universities can offer."

"I know that what we give will make a difference there in a way it could not in a larger university," he said. "It's gratifying to know that."



Multi-million dollar gift and a lifetime of contributions

When it came to Meredith College, it seems that the late Margaret Craig Martin, '30, could not get enough. Student. Professor. Staff member. Board member. Trustee. Volunteer. And this is the short list.

"She did everything at Meredith, and everything for Meredith," said Harold West, Senior Director of Planned Giving.

Therefore, it was no great surprise, but it was certainly a great joy, that during the Campaign for Meredith she provided in her will a charitable remainder trust of over \$2.5 million dollars, to support improvements to the facilities and grounds.

"She identified with Meredith all of her life," said her son, Zeno Martin. "She enjoyed the very good friends she met there, and was fond of the people she worked with. She loved that school."

Mrs. Martin's most recent gift was certainly not the first. She and her family found as many ways to support the college as she had connections to it. Their giving also includes a scholarship, gardens on campus and more.

In gratitude for her longstanding support, the college has named a newly renovated building in the heart of the campus in her honor. The Margaret Craig Martin Hall (formerly Hunter Hall) provides state-of-the-art facilities for students in a variety of disciplines, including human environmental sciences, foreign language and literature.

"This was a wonderful thing for her," Martin said. "There's a lot in that building that incorporates some of the contributions she made to the school. It's a fitting remembrance."

The Duke Endowment (foundation) Annual Report Feature: Healthcare Quality

Throughout the Thanksgiving holidays last year, Nelson Gunter, 56, was coping with the stresses of a cancer diagnosis and recent surgery to remove a large mass from his colon.

“The surgery was very successful. I was healing as expected and was supposed to go home from the hospital in less than a week,” he said.

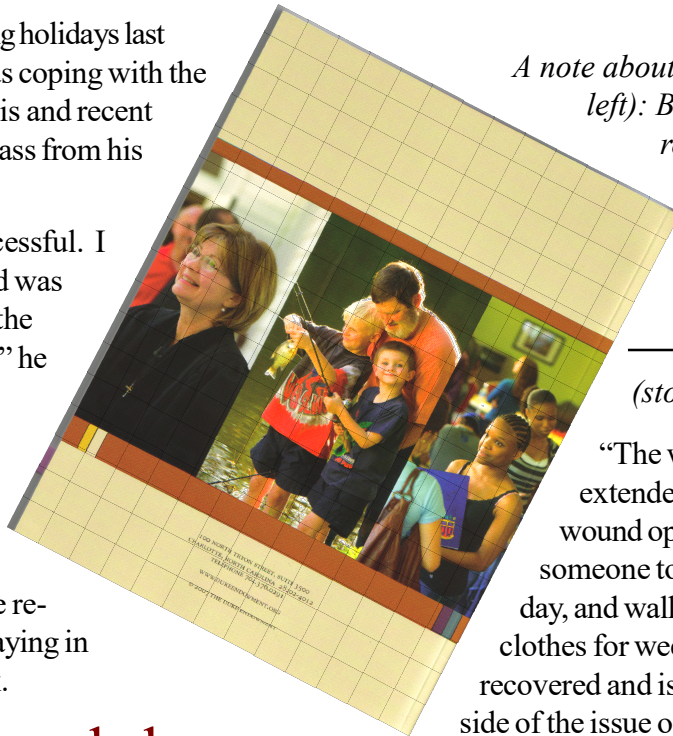
But because of an error or oversight that occurred sometime during his stay, a dangerous infection set in; the surgery site had to be re-opened; and he ended up staying in the hospital for over a week.

As a patient -- and also a physician and healthcare quality expert himself -- Dr. Gunter offers an important perspective of mistakes in care.

“No one at that hospital had any mal-intent,” he said. “Everyone wants the best for the patients. But I got an infection because of poor quality. It was preventable.”

Dr. Gunter is far from alone in this view. Hospitals nationwide have long focused on improving healthcare quality and patient safety. Mistakes cost billions of dollars in medical care, lost wages, lost productivity, disability and death.

There are quality of life costs, too.



A note about accompanying graphics (middle left): Based on interviews, I recommended a photo of Dr. Gunter and grandsons fishing on his property, to emphasize the quality of life issues discussed in the article.

(story, continued)

“The worst part of the experience was the extended length of time I had to leave the wound open [to promote healing], finding someone to change the bandage three times a day, and walking around with saline-soaked clothes for weeks,” said Dr. Gunter, who has recovered and is cancer free. “That’s the human side of the issue of poor quality of care.”

Fortunately, North Carolina’s healthcare leaders now have concrete, collaborative resources to identify and prevent problems like those that Dr. Gunter experienced. A new Center for Hospital Quality and Patient Safety, which was established by a grant from The Duke Endowment, is the focal point on which quality initiatives converge.

“You don’t get training in quality in nursing school, or even in medical school,” said Carol Koeble, MD, Director of the Center, based at the North Carolina Hospital Association. “We and the hospitals throughout the state share research, resources, expertise and success stories.”

In 2006, the center’s first full year of operations, over 800 professionals from over 100 hospitals across the state gathered eagerly to consult with each other during conferences and learn during training sessions.

“With this Center,” Dr. Koeble said, “we now have a tremendous network of hospitals and their employees who are working together to improve the care they give to every citizen of North Carolina.”

The process of incorporating each quality initiative will take time, but the goal is worthy: to create the safest and best hospitals in the United States.

Copy by Amy@AveryWrites.com

Foundation campaign report
Meredith College, a liberal arts
college *(Excerpts from 32-page booklet I*
authored, based on phone interviews.)

Past and future merge in one gift

“Before coming to Meredith, I had never been to any place that could be considered third world,” said Amanda Beasley, ’04, of Raleigh. “After a study abroad to Nogales, Mexico, I realized how privileged I am. It’s something I still think about.”

When her father passed away last year, those thoughts turned to action. Beasley, age 24, used monies she inherited to establish the Campbell-Beasley Travel Scholarship, named in memory of her father and in honor of her mother. With her \$50,000 endowment, she became Meredith’s youngest major donor.

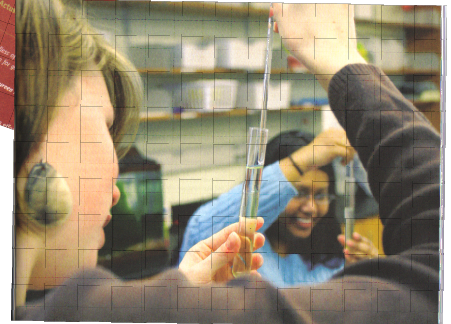
“It’s pretty amazing that she did this,” said Connie Harris, Vice President for Institutional Advancement. “Both of her parents placed value on education, travel and generosity. It was touching that she honored her parents in this way.”

From volunteer experiences while attending Meredith and today working in the College’s Office of Study Abroad, Beasley understands firsthand the need for travel funding.

“In the midst of getting excited about other students’ life-changing experiences traveling abroad, the reality of money hits them,” she said of conversations with students.

“My own travels opened my eyes so much,” she said. “By seeing other places and meeting other people, you start to realize what you don’t know, and what you need to know. It has affected the way that I look at the world and made me realize what is important.

“I want to help students get to that point too,” she said. “I want to help give them the opportunities that I was so fortunate to have.”



“Why wouldn’t I give?”

As a volunteer for the annual phonathon fundraiser, Deanna Harris, ’90, remembers the thrill of talking to alumnae. She felt a connection with them as she learned what they had done since graduation and as she filled them in on campus changes.

Today, Harris still volunteers for alumnae events, serves as a class agent and has stepped up to contribute even more time and energy as the Alumnae Association’s new Vice President for Development.

Through her interactions and networking on campus, she has also had gained a deeper understanding of the expenses of running a college and, related, of the importance of alumnae donations.

“It’s hard to believe that one summer month’s electric bill for the college was \$80,000,” she said. “I know that tuition doesn’t pay for that, and the money has to come from somewhere.”

With this understanding and knowledge, Harris has remained a loyal donor to The Meredith Fund, the pool of “unrestricted” monies often called the lifeblood of a college.

“Deanna understands the need for annual giving,” said Jane Mitchell, director of The Meredith Fund. “She is an extremely dedicated alumna—giving \$1,000 a year—and encourages her classmates to support the Fund as well. I am thrilled that she will be serving as the Alumnae Association’s new Vice President for Development.”

“When you get something out of an organization like Meredith, you want to give back,” Harris said. “So when people I contact ask me why I give, my answer is ‘Why wouldn’t I?’”

Direct Mail Brochure, “Age of Miracles” *(excerpt)*
Audience: Potential Financial Donors

For your family, friends and neighbors, you can make this an age of miracles.

For the newborn infant who arrived weeks too early.
For the school child enjoying sports despite his asthma.

For the baby-sitter on the phone with The Poison Control Center.

For the father in rehabilitation therapy after knee replacement surgery.

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And even for the family physician learning the latest procedures to care for you and your neighbors.

For all of these, and for many more, you can make this an age of miracles.

Give to the Fund Development Council of Southeastern Medical Center.

[Inside panels, body copy:]

Every giver counts

Wealth is not the key to philanthropy. The key is a kind and generous heart.

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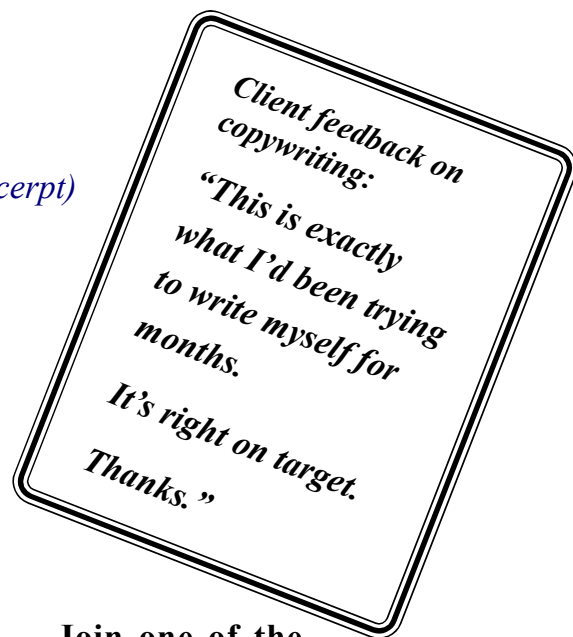
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Following the example of hospital founder Ella Fitzsimmons, members of this Society gift funds through a variety of financial planning vehicles, including:

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Be a part of that exciting tradition with your gift to benefit Southeastern Medical Center.

Contribute today and help bring forth the next age of miracles.

Heart Center: Main Brochure (excerpt)

The physicians and staff of the Heart Center* chronicle a long and proud history of successes, successes on which patients and physicians worldwide have learned to rely. For over half a century, we have demonstrated expertise in research and in treatment focused on our main concern: bringing improved quality of life to patients with heart and vascular disease.

Physicians with the Heart Center led our region in performing the first open heart surgery in 1957, were among the first in the U.S. to use drug-eluting stents in 2003, and today manage an active caseload that includes heart transplantation; minimally-invasive cardiac, thoracic and vascular surgery; and other nationally- and internationally-recognized therapies.

....

Every year, for example, tens of thousands of patients from throughout the U.S. and world seek our progressive heart and vascular care.

On average, 20 heart transplant patients annually rely on this expertise.

Every week, 200 patients rely on our cardiac catheterizations to diagnose health conditions.

And every weekday, three patients along with their families place their trust in the Heart Center for open heart surgery. Of these surgery patients, an average of four each week are children. . . .

We focus our energies and expertise on pushing advancements that benefit our patients as well as colleagues in the medical community. This focus attracts the attention of the best clinical staff, which now totals 400 physicians, therapists, nurses, technologists and support staff. Our 60 physicians are board-certified in over 15 medical specialties and sub-specialties, and collaborate regularly with each other as well as with physicians worldwide. . . .

.

The heart and vascular specialists of the Heart Center of North Carolina are grateful for the opportunity to make significant contributions to our patients, to our professional colleagues, and to the body of knowledge that we have made our main concern for over 50 years. Heart and vascular care for adults and children continues as our focus now, and for the future.

Brochure Insert:

Advanced Interventional Cardiology

“Interventional” cardiology is simply the use of catheters and related technology to repair, cure or otherwise treat obstructions to blood flow to the heart. It could involve medication, an invasive or non-invasive procedure, or a medical device such as a stent.

At the Heart Center, Interventional Cardiologists and other physicians specializing in cardiology, nuclear cardiology, cardiovascular disease, echocardiology and related sub-specialties are at the forefront of research. Therefore, we are able to provide patients the most advanced treatment options in cardiac care. . . .

Advanced cardiac interventions lead to quicker diagnoses, less invasive treatments, more positive outcomes and better quality of life for our patients with heart blockages.

Two common *diagnostic* interventions are the **cardiac catheterization**, also called an **angiogram**, and the **thallium stress test**, in which liquid thallium is injected into the blocked vein and then x-rayed.

In *treating* blockages, the Heart Center ensures our patients have access to a variety of advanced interventions:

Balloon Angioplasty makes use of a catheter and a tiny “balloon” to clear the blockage.

Stents are used for a large number of patients with blockages in the carotid (heart) and peripheral arteries of the arms and legs. **The drug-eluting stent** is the treatment of choice for 70 percent of patients with coronary blockage. Coated on the newest stents, which our physicians use exclusively, is a time-released clot-thinning medication that is so effective that the majority of patients with this therapeutic device avoid bypass surgery. . . .

The Heart Center has long been a leader in researching and adopting the latest technologies and procedures to treat heart disease.

As advancements evolve, we will continue to provide our patients with advanced options for treating heart disease.

*This corporate name is a pseudonym.

Short-form introduction:

Cola: Bad for the bones

Study surprises researchers, shakes up women's attraction to cola

Researchers and parents have long understood that nutritionally bereft soft drinks often replace healthier choices in the American diet. One study now also suggests that colas actually rob bones of calcium, making them brittle. The large study, published in the *American Journal of Clinical Nutrition*, yielded several surprises both for researchers and for those who indulge in carbonated cola.

“We have long suspected a link between bone mineral density and cola consumption, but little research has explored the relationship between the two,” said lead author Katherine L. Tucker, Ph.D., with Tufts University in Boston. “We showed a significant relationship, but we were also surprised at how strong and consistent the results were.”

Bad news for girls, women

According to the study, drinking cola significantly lowers bone mineral density in the hips—in women, but not in men. Bone mineral density, or BMD, is a proven indicator of bone strength. Low BMD leads to osteoporosis and to millions of expensive, debilitating and even life-threatening hip and other bone fractures each year, according to the National Osteoporosis Foundation.

Several studies have found that girls with low BMD have more fractures than others, in part because drinking cola leaves less room for milk and other bone-building dairy products. But calcium displacement does not explain low BMD in women, the study showed, because women cola drinkers consumed as much calcium as non-cola drinkers. . . .

“There’s just something about cola, and that includes diet colas, too,” Tucker said. “That’s one of the more important results, because many women think that diet colas have no negative effect.” . . .

The bottom line for women? Read the label. [Read more...]

Background/ implications:

**Before you
drink that
cola....**

Read the label

The major difference between carbonated cola and non-cola drinks are caffeine, phosphoric acid and cola extract. Caffeine intake is a risk factor for osteoporosis, but it is the phosphoric acid, added to cola for tartness, that is now the targeted suspect, Tucker said.

“Phosphoric acid releases hydrogen in the blood and makes it more acidic,” she said. “We believe that’s related to the body pulling calcium out. Each time you drink cola, there’s a small effect on the bones; but over years, there’s a cumulative effect that results in lower bone mineral density. It starts to show more in middle and old age.”

Bones naturally become less dense and weaker with age, and four times as many women than men today have osteoporosis, though it does affect both.

“That’s why these results are so important,” Tucker said. “We’ve noticed that bone is more sensitive than people realize to all sorts of items in the diet. Research will continue to make clearer the benefits and risks of items in the food we eat.”



Cola: Bad for the bones [excerpt]

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Researchers and parents have long understood that nutritionally bereft soft drinks often replace healthier choices in the American diet. One study now also suggests that colas actually rob bones of calcium, making them brittle. The large study, published in the *American Journal of Clinical Nutrition*, yielded several surprises both for researchers and for those who indulge in carbonated cola.

“We have long suspected a link between bone mineral density and cola consumption, but little research has explored the relationship between the two,” said lead author Katherine L. Tucker, Ph.D., with Tufts University in Boston. “We showed a significant relationship, but we were also surprised at how strong and consistent the results were.”

Researchers at the Jean Mayer USDA Human Nutrition Research Center on Aging at Tufts analyzed bone mineral density and food consumption data from over 2,500 men and women. Women in the study drank an average of four servings of cola per week.

Bad news for girls, women

According to the study, drinking cola significantly lowers bone mineral density in the hips—in women, but not in men. Bone mineral density, or BMD, is a proven indicator of bone strength. Low BMD leads to osteoporosis and to millions of expensive, debilitating and even life-threatening hip and other bone fractures each year, according to the National Osteoporosis Foundation.

Several studies have found that girls with low BMD have more fractures than others, in part because drinking cola leaves less room for milk and other bone-building dairy products. But calcium displacement does not explain low BMD in women, the study showed, because women cola drinkers consumed as much calcium as non-cola drinkers. . . .

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“There’s just something about cola, and that includes diet colas, too,” Tucker said.

“That’s one of the more important results, because many women think that diet colas have no negative effect.” . . .

Read the label

The major difference between carbonated cola and non-cola drinks are caffeine, phosphoric acid and cola extract. Caffeine intake is a risk factor for osteoporosis, but it is the phosphoric acid, added to cola for tartness, that is now the targeted suspect, Tucker said.

“Phosphoric acid releases hydrogen in the blood and makes it more acidic,” she said. “We believe the body pulls calcium out. Each time you drink cola, there’s a small effect on the bones, but over years there’s a cumulative effect that results in lower bone mineral density. It starts to show more in middle and old age.”

Bones naturally become less dense and weaker with age, and four times as many women than men today have osteoporosis, though it does affect both.

“That’s why these results are so important,” Tucker said. “We’ve noticed that bone is more sensitive than people realize to all sorts of items in the diet. Research will continue to make clearer the benefits and risks of items in the food we eat.”

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By-lined feature included in award-winning series

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Exploring the twists and turns of the DNA helix

Both practical and promising research is emerging from virtually every twist and turn of the DNA helix. Discoveries are quickly advancing our understanding of the relationships between human genetics and disease.

"We're experiencing a paradigm shift in the way medicine is being practiced," says Geoffrey S. Ginsburg, M.D., Ph.D., director of the Center for Genomic Medicine at the Duke University School of Medicine in Durham, N.C. "There's a real opportunity to learn early in our lives about our genetic risks and to proactively plan to avoid illnesses. As a researcher, that's what gets me up in the morning."

The range of genetic research encompasses studies of health before birth and chronic disease later in life; mental health disorders and physical illnesses; inherited traits passed from parent to child and those shared by siblings and cousins.

"Families have a remarkably strong sense already that the kinds of diseases their relatives have can increase their risk for those diseases," says Elizabeth Hauser, Ph.D., Interim Chief of the Division of Medical Genetics at Duke.

"If we can understand the genetic components of that risk, we can offer more targeted treatment, and maybe even prevention," she says. "Genetics puts some specificity in the phrase, 'it runs in the family.'"

Encouraging breakthroughs

Study of the human genome and increasingly specific components of genes is offering solid medical strategies to diagnose, treat and predict disease. In the past two years alone, scientists have pinpointed around 50 new genes related to chronic conditions that had been previously impervious to research, according to experts.

Hauser and fellow researchers, for example, have been following the genetic trail of over 900 families who have histories of early-onset (before age 50) coronary artery disease (CAD).

"We've been doing this study for 10 years, and I'm starting to see light at the end of the tunnel," she says. "I'm starting to see ways our research can help these families, how it can give family members a more complete risk profile that they each can use individually."

Hundreds of studies

Scientists are exploring the relationship between diseases and genetics across a broad array of medical disciplines.



Part of award-winning publication:
Gold Winner: Aster Awards
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They have identified different genetic risk factors for neural tube defects, multiple sclerosis, age-related macular degeneration and cardiovascular diseases, for example.

Researchers are also investigating potentially inherited dermatological conditions such as eczema; ophthalmic conditions such as eye movement disorders; neurological disorders such as Alzheimer's disease, restless leg syndrome and multiple sclerosis; plus others related to severe obesity and septic shock.

Other scientists begin with studies such as these, then explore how external factors like exercise, diet and stress affect genes to cause disease.

"We used to sit around and postulate about the role of genetics and of the environment," Hauser says. "But with the increase in information available today, we're developing the ability to stratify patients, to group them with risk factors and identify ways to reduce health risks."

Dramatic choices

As research leads to more definitive diagnoses, it also leads to therapies. As reported this year in the *Journal of the American Medical Association (JAMA)*, in one study of overweight patients, scientists found that half of the patients who received nutrition counseling based on results of individual nutrigenomics testing lost significantly more weight on average than those who received conventional nutritional counseling.

Research also enables geneticists, pharmaceutical researchers and physicians to proffer preventive treatments even before a disease produces its first symptoms. Another *JAMA* study on genetic mutations related to osteoporosis offers insights that might lead to drugs that target the disease.

In addition, discovery of the "BRCA" gene mutations that lead to specific types of breast cancer defines important options for those who inherit the gene. Some choose to keep a tight schedule for regular screenings. Others choose preventive mastectomies even before cancer develops.

Early diagnosis

In other cases, DNA research offers patients and their physicians the chance to catch diseases early, when treatment and prevention can be most effective. The Duke study on early-onset coronary artery disease is one such example.

...continued (available upon request)



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Master's level study in marketing and healthcare management
Master of arts degree in education, focusing on adult communication and communication theory
Health literacy and plain language communications
Ethical use of AI; 50-hour foundations course (2026)
Industry courses, workshops, webinars

Professional Involvement

American College of Healthcare Executives
Association of Healthcare Philanthropy
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Unsolicited comments about my work:

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--From a client's boss, for on-going contract work

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--From a client regarding fundraising collateral

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--From a national agency representative

Amy, these are WONDERFUL stories. You're a great addition to our magazine team. . . . Hope you'll be interested in an assignment for the next issue.

--Corporate Magazine Editor

