Issue #5
June, 2010

Friends & SLU Liver Center

friends of the SAINT LOUIS UNIVERSITY LIVER CENTER
Cure Liver Disease Now

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INSIDE THIS ISSUE:

Natalie & John Alberici Host The Green Event

When you see the wind turbine outside Alberici Headquarters off I-170 & Page, you think of corporate responsibility and commitment to our community due to their "green" building which has received a Platinum level of achievement from the Leadership in Energy and Environmental Design (LEED). When the Friends think of Alberici, we have an admiration of both Natalie and John Alberici for their commitment to research at the SLU Liver Center. We're very excited to have Natalie and John as our hosts of the upcoming Green Event, highlighting their green building and helping to educate others about "green" things we can do at home or in our business. Guests of the Green Event will be able to experience a guided tour through the Alberici building to view green development at it's highest form as well as visit our vendor area and learn how to bring green into their everyday lives.

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SAVE THE DATE!
"Any Way the Wind Blows"
October 16, 2010,
Alberici Headquarters
8800 Page Avenue

SLU Liver Center Night at the Ballpark

The Saint Louis University Liver Center will celebrate the 2nd annual **Liver Center Night at the Ballpark** on June 15, 2010 at Busch Stadium. The Friends of the SLU Liver Center had 500 tickets to sell for the Cardinals vs. Mariners game and all are SOLD— Dr. Adrian Di Bisceglie will throw out the first pitch! For those who attended last year, you will remember that Dr. Bacon had the first pitch honor. Dr. Di Bisceglie has been warming up his pitching arm and we look forward to seeing him on the mound!

Many of the faculty, subspecialty residents, staff and members of the SLU community, patients and volunteers will attend the game. Nearly $7,000 has been raised for the Friends of the SLU Liver Center.

Denim & Diamonds[8]

Before you know it, October will be here and that means it's time to get out your favorite denim and shine up those cowboy boots for our annual Denim & Diamonds event. We have a new location this year, so be on the lookout for details to arrive soon. We look forward to seeing you there!

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SAVE THE DATE!
Denim & Diamonds[8]
October 9, 2010

Introducing Iliana Bouneva, MD Asst. Professor of Internal Med.

Dr. Iliana Bouneva recently joined the faculty in the Division of Gastroenterology and Hepatology at Saint Louis University in late 2009. Dr. Bouneva is an experienced hepatologist who trained and worked previously at Duke University. She sees patients in the General Hepatology Clinic two days per week and one day per week in the Liver Transplant Clinic. Dr. Bouneva performs liver biopsies and a wide variety of endoscopic procedures. She participates in the education and training of residents, fellows and physician assistants. Dr. Bouneva is a member of the SLU Liver Center, the Liver Transplant Selection Committee and the Liver Tumor Board at SLU. Her areas of clinical interests and expertise include:

*Liver transplantation and management of immunosuppression
*Liver cancer and focal liver lesions
*Non-alcoholic steatohepatitis (NASH)
*Hepatitis B and C
*Autoimmune liver diseases

Dr. Bouneva is married and her hobbies and interests outside of medicine include 20th Century West European literature, drawing and painting.

SHOPPING AT SCHNUCKS = $'S FOR RESEARCH!

During these tough financial times it has become increasingly difficult to find extra money for things other than the essentials. Donating to charities seems to be one of the first areas we cut back on. We are fortunate in St. Louis—Schnucks Supermarkets has made donating *the easiest thing in the world!*. Schnucks offers a program called the **eScrip *Community card***. It's FREE and doesn't cost the donor a single penny. The eScrip program is a great way to give back to the Saint Louis University Liver Center! The Schnucks Foundation will donate up to 3% of your Schnucks purchases (including prescription co-pays) at any of their supermarkets.

There are approximately 2,500 organizations in the metropolitan St. Louis area that receive contributions from the eScrip program. This includes the Friends of the SLU Liver Center. If you're a grateful patient like me, it's a must to participate in this program! And if you already have a card, you may choose up to three organizations to support and Schnucks will donate equally to those organizations.

How do you get a Schnucks eScrip card? It's very simple. Call the Friends office at 314-576-3078 and they will sign you up and send your Schnucks eScrip card to you. Or you may pick up a card at your Schnucks Market and register online. (I recommend calling the Friends office and getting my "sign up online cheat sheet to help you through the online process).

How do you earn money for the Friends of the Liver Center?

- **Present your eScrip card to the cashier every time you shop at Schnucks**

- Be sure to present the eScrip card anytime **BEFORE** YOU PAY FOR YOUR GROCERIES.

By simply swiping your eScrip card, it generates contributions from Schnucks to the Friends of the SLU Liver Center.

If you shop at Schnucks, there is no reason why you should not avail yourself of this service. Why not ask your family and friends to participate in the program? Remember there is no cost. Schnucks does all the work and the SLU Liver Center reaps the benefits. Spread the word!

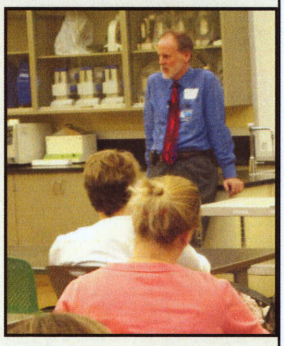
By Paul Azzara

The "ABC's of Liver Disease" presented at the Saint Louis Science Center

"The ABC's of Liver Disease", presented by the Friends of the SLU Liver Center on Wednesday, January 20, 2010 was a well attended educational program for school nurses. The class was conducted at the Saint Louis Science Center's Life Sciences Lab, and included 23 nurses from the Metro St. Louis area, including East St. Louis, Illinois and as far away as Desloge, Missouri.

Dr. Bruce R. Bacon, Dr. Brent A. Tetri, and Dr. Ajay Jain with the SLU Liver Center presented the program and answered the nurses questions about the rise of liver disease in children. The Friends organization also had volunteers present to support the program, along with Lou Ann Biermann, Manager of the SLU Liver Center. Educational credits for school nurses were also provided through the SLU School of Nursing.

Interested in bringing information about liver disease into your school? Call the Friends office at 314-576-3078.



HOW CAN YOU HELP THE FRIENDS OF THE SLU LIVER CENTER? BECOME A SPONSOR! BECOME A VOLUNTEER!

Whether you are interested in becoming a sponsor or want to answer phones, stuff envelopes or be a leader and serve on a planning committee, we have volunteer opportunities available. You may volunteer as an individual or bring a group of friends. Please complete and fax this form to 314-576-3654 or mail to the Friends office. A representative will contact you.

☐ Yes, I am interested in learning more about sponsorship opportunities! Please contact me with more information.

☐ Yes, I am interested in volunteering! Please contact me with more information.

Name _____ Home Phone _____ Work Phone _____

Address _____ Cell Phone _____ Email _____

City, State, Zip _____ Best way to reach you _____

Times you are available to volunteer: _____

"A Picture Paints 10,000 Words"

My sister Sarah and I were first diagnosed with Primary Biliary Cirrhosis in 1998. Like so many patients with liver disease our journey started with abnormal blood results leading to a liver biopsy and concluding with a confirmed diagnosis. Stage two for each of us or so they thought. How much damage to our livers? No one could say for certain. Over the years we appeared to remain relatively stable. Still there was always this concern that we did not know enough.

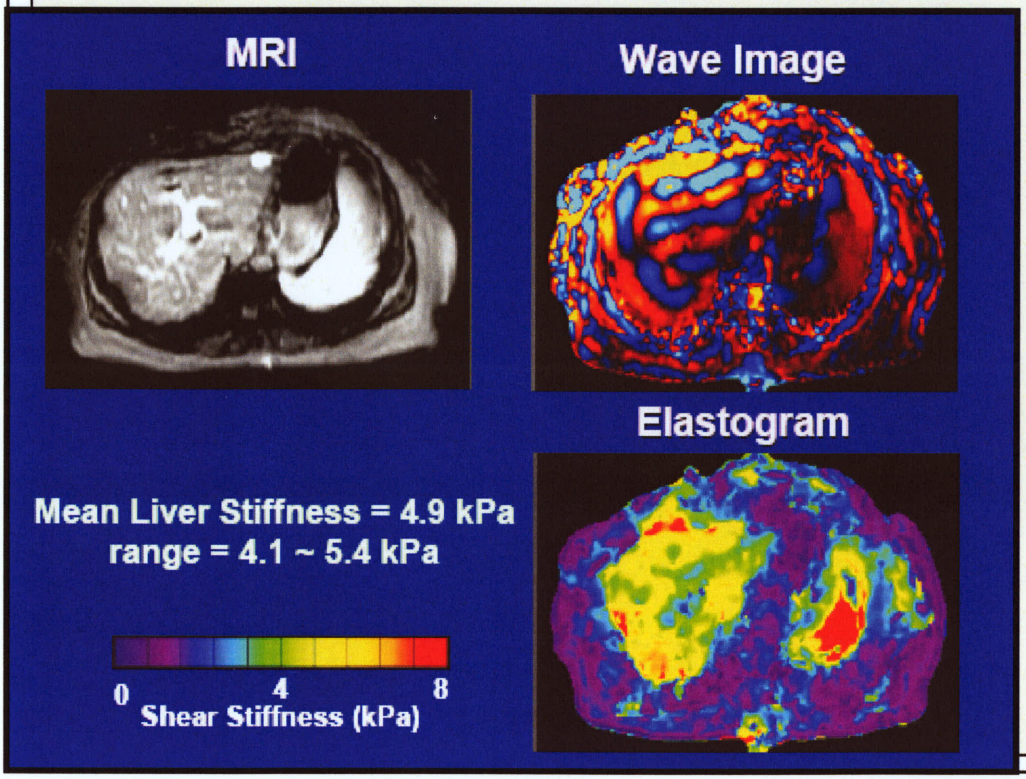
Everything changed when Sarah took a sudden and dramatic turn for the worse in 2004. She was suddenly jaundiced and listed for transplant. In 2006 Sarah died from complications resulting from two failed liver transplants. It was at that point concern for specific information on the overall condition of my liver turned to alarm.

Early in 2007 I saw a CNN story on, Magnetic Resonance Elastography. The technology was developed by Dr. Richard Ehman, Professor of Radiology at the Mayo Clinic. Pictures of the liver aired by CNN were stunning. Using an apparatus placed directly over the upper right quadrant of the abdomen technicians could measure the elasticity of the liver. The images showed with incredible specificity the degree of damage throughout the liver. Deep purple represents the most flexible or healthy areas, yellow and green indicate increasing rigidity. Red indicates the most rigid or damaged. Finally, a comprehensive picture of the overall condition of the liver. I was determined to see that same picture of my own liver. February of 2007 I travelled to the Mayo Clinic and underwent an MRE coupled with a liver biopsy. The resulting picture was the perfect expression of the ancient Chinese saying "a picture paints ten thousand words."

Stage 3 PBC was confirmed. For the first time since the original diagnosis I felt certain I knew the precise condition of my liver. Reliance on Biopsy could only extend so far as diagnosis, it was after all a sample pulled from a targeted injection site. Determining the overall condition of the liver required a different tool. As a patient, MRE provided those answers. I could now trust the stage 3 conclusion.

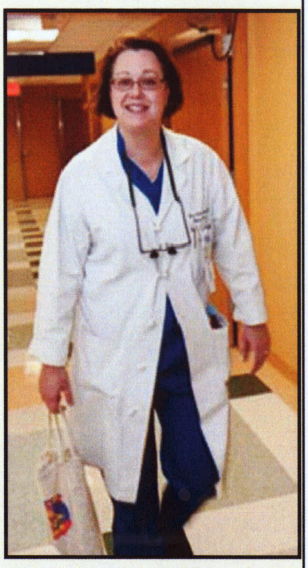
Currently MRE is available only at The Mayo Clinic. As with any new technology the key is wider access for both medical professionals and patients alike. Broad use of MRE will meet several important objectives; provide an opportunity for professionals to explore and comment on the technology, serve as a conversation piece so that the doctor and patient can have a meaningful and easily understood conversation about the overall condition of the liver and most importantly improve patient care. The medical professionals at SLU Liver Center have always taken a leadership role in the fight against liver disease. Making this technology available to SLU liver patients would continue that tradition.

By Deborah Sobel



Magnetic Resonance

Nationally Recognized Surgeon to Lead SLU's Abdominal Transplant Program


Betsy Tuttle-Newhall, M.D.

A surgeon who has helped guide the federal standards for organ transplantation now is division chief for abdominal transplant at Saint Louis University.
Janet Elizabeth "Betsy" Tuttle-Newhall, M.D., formerly an associate professor of surgery at Duke University Medical Center, said she was attracted by the opportunity to take SLU's abdominal transplant program to the next level.
"There's a great tradition here. The program's got one of the best hepatology departments in the country and a great nephrology group," said Tuttle-Newhall, who is professor of surgery at SLU.

National Consultant

Tuttle-Newhall has been a consultant on organ transplantation for the Department of Health and Human Services since 2005. In 2007, she was project director for a collaborative by the federal Health Resources and Services Administration (HRSA) to improve organ donation and transplantation. "It was a national effort to make transplant services better. We examined how to improve efficiency and get patients through the process quicker," she said.
Tuttle-Newhall said she first fell in love with organ transplant surgery, working with children.
"I loved taking green little children and turning them into pink little children. That was the best thing," she said. "It works almost overnight. Their eyes get white and they pink up and their moms will say, 'Look, he has pink cheeks.' It's really cool."

Background

Tuttle-Newhall completed her surgical residency at Harvard Medical School, New England Deaconess Hospital, where she was chief resident in surgery. In addition, Tuttle-Newhall completed fellowships in surgical critical care at the University of North Carolina in Chapel Hill and abdominal transplant surgery at Duke University Medical Center.
A national lecturer, Tuttle-Newhall is the author of more than 85 publications. Her primary areas of research include immunotherapy for transplant recipients; the critical care of immunosuppressed transplant patients; post-graduate and graduate medical training; organ allocation policies and the governance structures of academic medical centers.
"I'm very comfortable in the operating room. The OR is a good place to be. You're in control. The phone doesn't ring. You can concentrate on what you love to do," Tuttle-Newhall said. "I love teaching, too. Students keep you honest and don't accept things just because you said it. They want to question."
A native of North Carolina, Tuttle-Newhall is married to Philip Newhall, M.D., a urological surgeon who also is at Saint Louis University. They have a 9-year-old daughter,

Access to Donated Organs Varies According to Where You Live

Where you live in the country can impact your ability to receive an organ transplant.
Saint Louis University's Center for Outcome Research has received a $1 million grant from the National Institute of Diabetes and Digestive and Kidney Diseases to review regional kidney and liver distribution in the United States and equalize the access to transplantation among patients with similar stages of organ failure across the country.
Recent studies have found that patients with similar diseases but living in different parts of the country had substantially different waiting times and waitlist mortality rates due to geographical differences in organ supply.
The resulting disparity can mean some patients will not have access to organ donations that could save their lives, says Krista Lentine, M.D., associate professor of internal medicine and lead researcher at Saint Louis University School of Medicine.
"The geographic regions were established prior to the availability of modern systems of organ preservation and without anticipation of the current unevenly distributed organ supply-demand ratios across the country," said Lentine.
As part of a multi-institutional collaboration, Lentine and colleagues are trying to design and evaluate a novel geographic system of organ sharing that better balances donor and recipient populations.
The primary goal is to save more lives and prevent illnesses from becoming more severe by reducing the amount of time patients who live in under-supplied areas would have to wait for a transplant.
"We believe that our research can provide the objective evidence to achieve fairness in the distribution of kidney and liver transplants regardless of where one lives," she said.


Krista Lentine, M.D.

Vitamin E Helps Those with Fatty Liver Disease

Study Offers First Treatment for NASH, Says SLU Researcher

In an NIH-funded study published in the *New England Journal of Medicine*, research found that daily vitamin E improved the livers of patients who have a type of liver disease known as nonalcoholic steatohepatitis (NASH). The study results are welcome findings because there are currently no approved treatments for the disease, says a Saint Louis University researcher on the project.

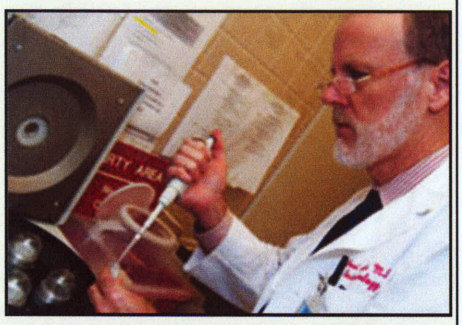
Increasingly common, NASH is characterized by excessive fat that causes inflammation and damage in the liver; NASH affects 3 to 4 percent of all adults in the U.S. Linked to weight gain and obesity, NASH can lead to cirrhosis, liver cancer and death.

"Fatty liver disease is a growing problem in the U.S., and we currently have no approved medication to offer patients," said Brent Tetri, M.D., a hepatologist at Saint Louis University Liver Center and study researcher. "With this study, we're pleased to find that vitamin E should help some of our patients."

During 96 weeks of treatment, patients with NASH were given 800 IU daily of the natural form of vitamin E or a placebo. Researchers found that 43 percent of those treated with vitamin E showed significant improvement of the liver; only 19 percent of those who received a placebo improved.

Separately, researchers also studied the effects of a drug, pioglitazone, in treating NASH. It, too, improved the condition of patients' livers, although its use was associated with weight gain.

Researchers caution that neither treatment improved liver disease in all patients, and that diabetic patients were not included in this study. Diabetes is common in NASH patients, and further research is needed to determine if vitamin E or pioglitazone will be appropriate treatments for diabetic patients.



Brent Tetri, M.D.

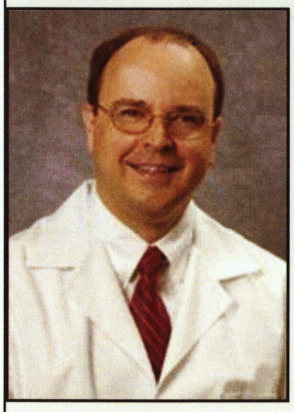
"This study is a promising step in treating NASH," said Tetri, professor of internal medicine at Saint Louis University.

The study was published in the advance online edition of the *New England Journal of Medicine* on April 28.

Interested in participating in a clinical trial at the Saint Louis University Liver Center?

Contact Judy Thompson, Mgr., GI and Hepatology Clinical Research Unit at 314-977-9400

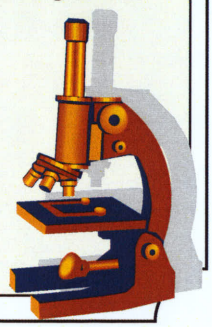
RESEARCH at the SLULC



Jeffrey H. Teckman, MD
Associate Professor of
Pediatrics and Biochemistry

The Saint Louis University Liver Center has graciously supported some of the work in our medical research laboratory that has focused on understanding, treating, and curing liver disease. Our laboratory studies how the liver is damaged by disease, what methods might be used to prevent or stop such damage, and the role that liver proteins play in liver damage. Our primary disease of focus is the genetic liver disease known as alpha-1-antitrypsin deficiency. In this condition, also known as, "alpha-1" the liver produces an abnormal form of a common protein called, alpha-1-antitrypsin. The abnormal protein accumulates within the liver, rather then being released into the blood stream, as is usually the case. The accumulation of the abnormal protein within the liver causes damage to liver cells, which over time leads to cirrhosis, liver cancer and death. Alpha-1 liver disease can affect infants, children, or adults, and it can also result in life-threatening lung damage in adults.

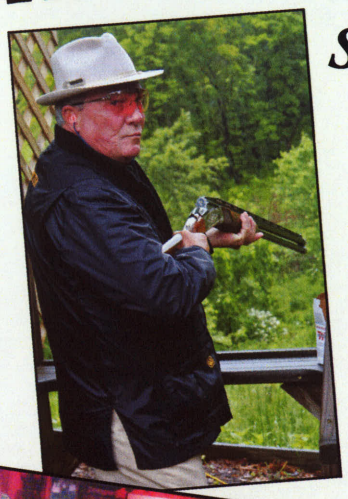
Alpha-1 is largely underappreciated among laypeople and medical professionals alike, much in the way that the importance of liver disease is not recognized among those who are fortunate enough to be unaffected. However, over 100,000 Americans suffer from alpha-1, many of whom are undiagnosed or misdiagnosed. One study of alpha-1 patients suggested that some might see as many as seven doctors over 10 years before the correct diagnosis is made. There is no cure for alpha-1, other than liver transplantation, and there are no effective treatments, other than those techniques used for liver disease in general. Our laboratory has studied the processes within liver cells that cause damage in this disease and have investigated experimental drugs to block this liver damage. Our work has also included experimental drug trials in humans. We are confident that we are moving closer to effective treatments for alpha-1 liver disease and that the knowledge we gain can be applied to the treatment of liver damage caused by many other conditions. The support from the Saint Louis University Liver Center has been critical to the continuation of our work, and has led to increased funding for the study of liver disease from other sources.



2010 Fundraising with Friends

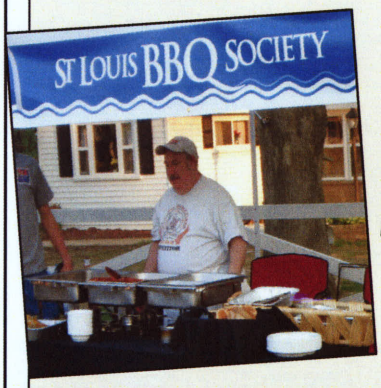
BBQ & MUSIC JAM AT STOVALL'S GROVE

Top St. Louis musicians, an historic location, and finger lickin' good BBQ all served up to benefit research at the BBQ & Jams Session at Stovall's Grove on April 10th. What started as a yearly musicians jam session, turned in to a fun-raising afternoon! Special thanks to Hosts, Liz & Dennis Elze, owners of Stovall's Grove and the St. Louis BBQ Society Members who grilled up the best BBQ ever! There were over 100 people in attendance, $2,300 raised for the SLU Liver Center and no one left hungry!



Strathalbyn Farm Club Shooting for a Cure!

A few clouds and a little rain didn't stop shooting enthusiasts from participating in the 2nd annual "Shoot for a Cure" event at Strathalbyn Farms Club on May 15th. Special thanks to Hosts, Lisa & Vic Turvey, as well as a group of volunteers from Scott Air Force Base who helped keep safety a number one priority. Both beginning and experienced shooters enjoyed their afternoon on the range. With a dinner, live auction and many donations to research, over $35,000 was raised for the SLU Liver Center!



The Friends of the Saint Louis University Liver Center raise money to support the research efforts of the SLU Liver Center for the treatment and cure of liver diseases, and to promote understanding and awareness of liver disease.

New Hope for Treating Hepatitis C: Telaprevir

Findings Bode Well for Hard-to-Treat Patients

A study co-authored by a Saint Louis University researcher found telaprevir, a protease inhibitor, combined with standard hepatitis C treatment, cures a significantly higher number of difficult-to-treat patients than standard treatment alone. The findings were published in the April issue of the *New England Journal of Medicine*.

A member of the international research team, Adrian Di Bisceglie, M.D., chair and professor of internal medicine at Saint Louis University, studied the effects of the protease inhibitor, telaprevir, one of a new class of antiviral drugs.

"Hepatitis C remains a major public health problem. Although the number of new cases is decreasing, we have a large number of individuals with chronic hepatitis who remain at risk of progressive liver disease," said Di Bisceglie. "Current therapies only 'cure' about half of those with the virus, so we desperately need new treatments for those for whom current therapy has failed. "Overall, in this group of patients whose hepatitis C was not eliminated in previous treatments, we successfully treated and eliminated hepatitis C for over 50 percent with the addition of telaprevir. In particular, for those who had shown no response at all to previous treatment (a group that is especially hard to treat), the addition of telaprevir eliminated hepatitis C for 40 percent."

Worldwide, experts estimate that nearly 180 million people are infected with hepatitis C. In the U.S., about 4 million people have the virus, and an estimated 10,000 to 12,000 people die from complications each year in this country. In Missouri 4,468 cases were reported in 2007.

Hepatitis C is caused by a virus, transmitted by contact with blood, and may initially be asymptomatic. For patients who develop a chronic hepatitis C infection, inflammation of the liver may develop, leading to fibrosis and cirrhosis (scarring of the liver), as well as other complications including liver cancer and death.

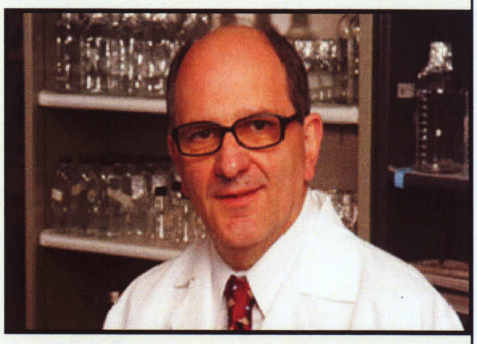
The prognosis varies for patients with chronic hepatitis C. With the current standard therapy, about half fully recover after an initial course of peginterferon and ribavirin anti-viral therapy that may last from six months to a year.

The remaining patients, known as non-responders, may improve with initial treatment but the virus is not eliminated. For this group, the only current option is to retreat patients with the same or similar drugs, which increase the likelihood of severe treatment side-effects.

In addition, researchers have found that the success of treatment depends on the major strain, or genotype, of hepatitis C that a patient has.

In the current study, researchers examined the drug telaprevir in combination with the standard treatment of peginterferon and ribavirin. They looked specifically at the retreatment of hepatitis C for those who were initial non-responders and whose hepatitis was genotype one, known to be the most difficult strain to treat.

The trial examined the efficacy and safety of telaprevir in the treatment of 453 patients. The patients were separated into four treatment groups. Three groups were given varying combinations and durations of telaprevir along with peginterferon and ribavirin. The control group was given the standard retreatment therapy of peginterferon and ribavirin.



Adrian Di Bisceglie, M.D.

Researchers found that patients retreated with telaprevir fared better than patients not given telaprevir; those who received both telaprevir and peginterferon and ribavirin showed a cure rate ranging from 24 to 53 percent compared to the control groups of peginterferon and ribavirin only, which had a cure rate of 14 percent.

From their data, the authors concluded that telaprevir is indeed beneficial in combination with the current medications used in the retreatment of hepatitis C.

In addition, telaprevir treatment for 12 weeks appears to be sufficient; longer durations of treatment were not necessary.

The study also showed that patients who received only telaprevir and peginterferon had a lower response, suggesting that ribavirin remains important in this combination therapy.

If telaprevir trials conclude successfully, FDA approval is anticipated as soon as 2011. The clinical trial, PROVE3 (Protease Inhibition for Viral Evaluation 3), was funded by Vertex Pharmaceuticals.

SAINT LOUIS UNIVERSITY
LIVER CENTER

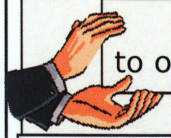
Free Screenings

Free Screenings For Hepatitis C

M-F 9:00 am—4:00 p.m.

at Special Design Health Care
61 Doctors Park
Cape Girardeau, MO 63701
Phone 1-866-936-1999 for more information

Special Thanks to the ***Spears Foundation and Volunteers*** which have made these free screenings available to the public.



Special Thanks
to our newsletter sponsors!

What's on the Calendar?

June 15, 2010 Cardinals vs Mariners Game 7:15 p.m.

August 6, 2010 School Tools for Nurses Program, St. Clair Hospital, Fenton, MO—call 314-294-8146 for reservations

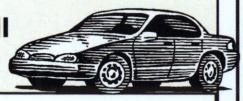
September 25-26, 2010 St. Louis Home Fires BBQ Bash at Wildwood Towne Center—visit the Schnucks/Friends Soda Booth

October 9, 2010 Denim & Diamonds[8] Meadowbrook Country Club

October 16, 2010 *Any Way the Wind Blows,* a Green event hosted by Natalie & John Alberici at Alberici Headquarters

October 29-November 2, 2010 AASLD (Assoc. for the Study of Liver Diseases), John B. Hynes Convention Center, Boston, MA

Do you have a car you would like to donate? The Friends now accept vehicle donations. Please call the Friends office at 314-576-3078 for details.



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Denim & Diamonds

October 9, 2010
Meadowbrook Country Club