

# The Vincent Memorial Hospital Foundation



*Building Community*

ANNUAL REPORT 2020

## Message from the Board of Trustees

# Groundbreaking progress during the pandemic



Welcome to the 2020 annual report of the Vincent Memorial Hospital Foundation. The year 2020 proved to be one of great challenge as well as significant achievement for the Vincent Department of Obstetrics and Gynecology. As the COVID-19 pandemic spanned the entire year, the department continued to adapt its approach to patient care while maintaining the high standards that are the hallmark of Massachusetts General Hospital.

Community health centers played an essential role, as disadvantaged populations were disproportionately affected by the virus. There was no place the Vincent's teams of providers — physicians, midwives, nurses, medical assistants — worked harder and with greater urgency.

In spite of restrictions arising from COVID-19, researchers in the Vincent Center for Reproductive Biology (VCRB) continued to make groundbreaking progress, benefiting from state-of-the-art resources available at

Mass General, recently ranked by *U.S. News & World Report* as the No. 1 research hospital in the country. Among studies, VCRB scientists are making major strides to conquer ovarian cancer in collaboration with colleagues at the Mass General Cancer Center. Vincent investigators also are leading other important areas of research including studies of COVID-19 in pregnancy.

The VMHF Board of Managers, a longstanding community of volunteers, expanded its membership during the year and continued to provide support to the department's patients and nursing staff.

The following pages provide details of the important and exciting work that the VMHF helps make happen. We are grateful for your continued support.

**DAVID E. WALKER**  
Chair

**CATHERINE S. AUSTIN**  
Vice Chair

## Exceptional care in the community

"It doesn't matter how much money you make or where you're from, we try to provide one standard of care for everyone," said Alessandra Peccei, MD, director of Vincent OB/GYN services at the Mass General healthcare centers in Chelsea, Revere and Charlestown. Services also are provided in Danvers and Waltham. These community centers are how one of the nation's top hospitals delivers premium OB/GYN primary care to area neighborhoods — pre- and post-natal care, screenings and gynecologic care. Labor and delivery, surgery and advanced fertility services are provided at the main hospital in Boston.

Launched in 1994, the Chelsea center (*cover photo*) now serves approximately 2,500 OB/GYN patients a year. Vincent Certified Nurse Midwives work in the clinic five days a week, and collaborating OB/GYN doctors are there three times a week. High-risk obstetrics patients are seen by experts in Maternal-Fetal Medicine, and fellows in this subspecialty serve this rotation during the first year of their three-year fellowship.

One-fourth of babies born at Mass General are delivered by nurse-midwives. "In my 10 years of doing this work, I've never seen the economic suffering of the past year," said Katherine Rushfirth, CNM, one of 25 midwives serving the Boston and regional Vincent OB/GYN clinics. "More than ever, we needed to coordinate medical care with community organizations to obtain food, baby formula and other essentials." The clinics serve a large minority population, so most midwives are bilingual, and interpreter services also are available.

## Message from the Chief

# Caring for patients and each other

When the COVID-19 pandemic swept the world in 2020, exceptionalism was everywhere at Mass General. As COVID patients arrived in increasing numbers, thousands of faculty and staff, including all in our Vincent OB/GYN community, were called to battle this previously unknown and devastating disease.

Within days, beds on Phillips 22, our Vincent inpatient gynecology floor, were converted to caring for COVID patients. When non-essential surgeries and outpatient activities were cancelled, many whose schedules were suddenly less full were redeployed to the front lines of COVID care. Labor and delivery, of course, could not be deferred, so our obstetrics team sprang into action to create a safe environment to deliver babies and continue needed outpatient care. Our researchers quickly pivoted to investigating the biology and effects of COVID-19 in pregnancy, including creating a new and invaluable biobank of blood, breast milk and other tissues from mothers and newborns. Investigators and clinicians in our "COVID-19 in Pregnancy" program became leaders in understanding and informing the public about the virus. We embraced online communication tools — telemedicine to connect with our patients and Zoom meetings to connect within our community and share emerging data, science and ever-changing recommendations for care.

As we emerge from the pandemic, I could not be prouder of all our teams have done together and recognize that the work has made ours an even stronger service, wiser for the many lessons learned. My sincere thanks to our many donors, who continue to give us vital resources to create a better world.

**JEFFREY L. ECKER, MD**

Chief, Vincent Department of Obstetrics and Gynecology, Massachusetts General Hospital  
Joe Vincent Meigs Professor of Obstetrics, Gynecology and Reproductive Biology, Harvard Medical School



## Building an 'educational peloton'

"The pandemic initially was a challenging time for us, as we didn't have the answers," said Lori Berkowitz, MD, MBA, a member of the Vincent OB/GYN faculty who also is vice chair of education and well-being at Mass General. "But by engaging our well-knit community, we've emerged more whole." In an article recently published in the *Journal of Continuing Education in the Health Professions*, she and two other Mass General faculty, Kristina Dzara, PhD, MMSc, and Arabella Simpkin, MD, MMSc, presented a metaphor for building community and resilience — the peloton.

"In bicycle racing, a peloton is the main body of riders who cycle together, forming a community," they wrote. "Building an 'educational peloton' with this sense of protective community is essential to optimize learning and team performance." Even during normal times, this is no small feat for Harvard's academic medical community, which offers 300 training programs for 2,430 residents and fellows.

To effectively contend with the pandemic, the Vincent Department of OB/GYN created new ways to keep everyone connected and informed. In-person meetings were replaced by online forums, initially held twice a week. Divisions also created their own ways to interact virtually and even socially. For example, in November the department was invited to the home of May Wakamatsu, MD, vice chair of gynecology and director of Female Pelvic Medicine and Reconstructive Surgery, for an outdoor gathering (*for more stories, see "Voices from the front lines" on back page*).



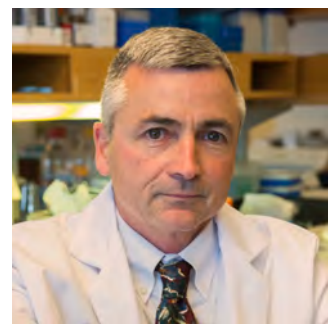
## Research Advances

# Collaborations to conquer ovarian cancer

Medical breakthroughs often arise from collaborations between scientists. Below are examples of how the Vincent Center for Reproductive Biology, a funding priority of the VMHF, is working with other researchers to find new ways to diagnose and treat ovarian cancer.

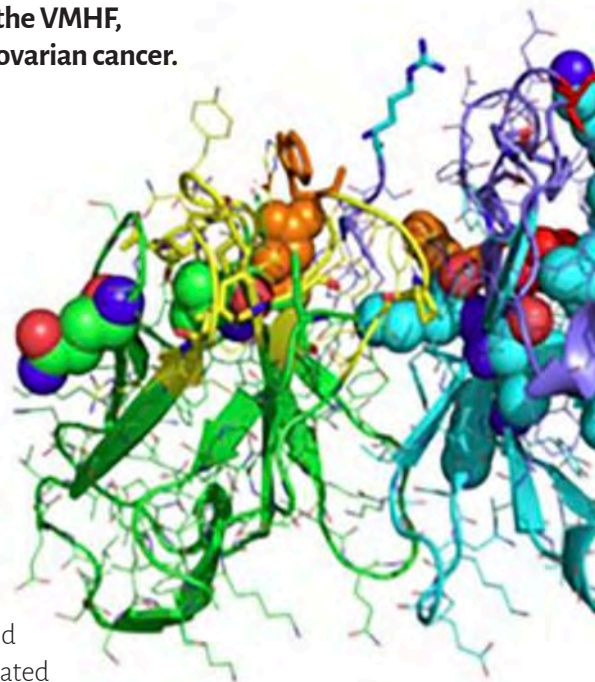
### PHARMACEUTICAL INDUSTRY

## New drug therapy for recurrent ovarian cancer



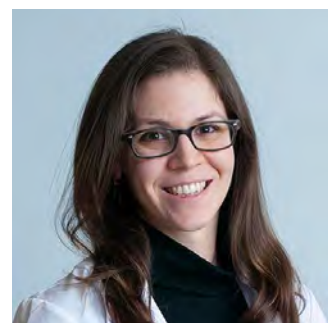
In a classic example of “bench to bedside” medical progress, lab research conducted by **Bo Rueda, PhD**, director of the Vincent Center for Reproductive Biology (VCRB), has culminated in a clinical trial for a new drug therapy designed to combat recurrent ovarian cancer. The trial, launched in January 2021 by a biotech company, was based, in part, on preclinical work completed here at Massachusetts General

Hospital. The Phase 1 study will accrue 205 patients to determine safe doses of a new drug called SGN-STNV. This highly specific antibody-drug conjugate is designed to target a tumor-associated antigen called STN, which Dr. Rueda has shown is elevated in chemotherapy-resistant ovarian cancer and associated with decreased survival (*art shown at right is adapted from a figure Dr. Rueda published in PLoS One*). The trials prospectively will then advance to the next phase to determine the drug’s effectiveness against recurrent ovarian cancer and other advanced solid tumors. Because this same antigen also is present in chemo-resistant pancreatic, colon and gastric malignancies, research performed in the VCRB may have lifesaving potential beyond gynecologic cancers.



### MASS GENERAL DEPARTMENT OF MEDICINE

## Detecting DNA of high-grade serous ovarian cancer in the bloodstream



**Sara Boubberhan, MD**, a Mass General medical oncologist and an instructor in medicine at Harvard Medical School, is striving to detect circulating tumor DNA in the bloodstream of patients with high-grade serous ovarian cancer — the most fatal gynecologic cancer in the United States. To help oncologists make clinical decisions with more precision, she is working to develop a liquid biopsy — a blood test that detects damaged DNA from ovarian cancer cells (*represented by the artistic rendering below*). These pursuits also may lead to a much-needed screening tool for early detection and treatment of ovarian cancer. Another potential application of a liquid biopsy is identifying which patients have been cured with front-line therapy and those who are still

receiving but not benefiting from chemotherapy, causing them to experience toxicity unnecessarily. She has been pursuing this area of research at Mass General since 2019, when she joined the Department of Medicine and also began collaborating with VCRB director Bo Rueda, PhD, benefiting from his mentorship. Dr. Boubberhan draws upon the VCRB’s tissue bank, which over the past 14 years has collected thousands of gynecologic samples useful in identifying genes or proteins and their signaling pathways that contribute to malignant transformation of cells and treatment resistance. In 2020, she was the lead author of a review article in the journal *Cancers* that describes recent scientific advances that may improve ovarian cancer treatment. Even with surgery and chemotherapy, many patients live less than five years. But today, scientists know that ovarian cancer often harbors defects in DNA-repair mechanisms, and several new treatment approaches are focusing on exploiting this genetic instability.



## Training the Next Generation

# The future of women's health

By supporting 12 Vincent fellowships in four OB/GYN subspecialties, the VMHF is ensuring that future generations of doctors will ask key questions and get solid answers to advance innovations in women’s health. The following Vincent fellows launched research projects this year.

## Tumor mutations in endometrial cancer



**Varvara Mazina, MD**, a Vincent fellow in Gynecologic Oncology, is focused on finding novel therapies for recurrent endometrial cancer. Using an FDA-approved platform to detect tumor mutations and other molecular factors, her research seeks to identify associations among the tumor molecular characteristics with clinical outcomes. Her current work in the VCRB is focused on testing the hypothesis that a subset of endometrial tumors harbors a significant degree of a recombination deficiency that associates with expression of immune checkpoint proteins. Her findings will provide preclinical rationale for clinical trials investigating the role of dual immune checkpoint and poly ADP-ribose polymerase (PARP) inhibition in women with recurrent endometrial cancer.

## Effect of positioning during delivery

**Marti Soffer, MD, MPH**, a fellow in Maternal-Fetal Medicine, is studying how positioning at the time of vaginal delivery may impact perineal lacerations. She is leading a randomized controlled trial of women in their first pregnancies to determine the impact of different positions at the time of crowning of the fetal head on perineal trauma. Should a simple change in position at the time of emergence of the fetal head lead to decreased or less morbid perineal lacerations, this work could help women worldwide delivering vaginally. In addition to this work, she is studying factors contributing to patient understanding and future decision-making following a history of primary cesarean section. She also is examining the utility of serum biomarkers in screening for postpartum diabetes among women with pregnancies affected by gestational diabetes.



## Culturing ovarian cells for infertility clues



**Victoria Fitz, MD, MSCR**, a Vincent fellow in Reproductive Endocrinology and Infertility, is studying a protein called anti-Müllerian hormone (AMH), which is produced by the ovaries of reproductive-age women and has been found to inhibit development of egg-containing follicles. This protein has potential applications in prevention of ovarian aging, protection of ovarian function from the effects of chemotherapy and optimization of in vitro fertilization (IVF) cycles. The mechanism of AMH action has been characterized in a variety of animal models, but she is culturing granulosa cells obtained from follicles of IVF patients to understand changes in gene expression in human cells in response to AMH treatment. She also is studying the effect of novel medications that may act on the same pathway to produce a similar response in these cells.

These findings may lead to a better understanding of the action of AMH in human cells and ultimately to developing new treatments for fertility preservation, contraception and adjuncts to in vitro fertilization.

## Comparing bacterial populations

**Youngwu Kim, MD**, a fellow in Female Pelvic Medicine and Reconstructive Surgery, is evaluating the abundance of beneficial lactobacilli in the vagina and the bladder. Contrary to what many had believed in the past, urine is not sterile. Detection of lactobacilli in the vagina is associated with a lower risk for urinary tract infection, but it is not known if this is due to a direct colonization of the bladder. Her study will be the first to correlate quantities of vaginal and bladder lactobacilli in both pre- and postmenopausal women. This will provide critical information to guide interventions to change the urinary microbiome and reduce urinary tract infections.



# VMHF Donors

January 1, 2020, through December 31, 2020

The donor list below recognizes gifts made to The Vincent Memorial Hospital Foundation. It does not include gifts benefiting Mass General's Vincent Department of Obstetrics and Gynecology that are processed through the Mass General Development Office.

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# Vincent Memorial Hospital Foundation Statement of Activities for the Years Ended September 30, 2020 and 2019

Sources of Revenue	2020	2019
Annual Contributions*	\$107,527	\$124,534
Income from endowment	559,467	615,509
Endowment transfer to support Operating Expenses	732,330	538,711
<b>Total revenue</b>	<b>\$1,399,324</b>	<b>\$1,278,754</b>
<b>Operating Expenses</b>		
Vincent Center for Reproductive Biology support	\$642,988	\$600,000
Teaching and research support	257,500	250,000
Program and project support	175,00	125,000
VincenTech, LLC	16,840	7,948
Support services (outreach, investment fees, audit)	275,921	273,585
Board of Managers grants and program expense	31,075	22,221
<b>Total expenses</b>	<b>\$1,399,324</b>	<b>\$1,278,754</b>
<b>Percentage of endowment Net Assets used to fund Operating Expenses</b>	<b>4.2%</b>	<b>3.8%</b>
<b>Net Assets, beginning</b>	<b>\$30,201,115</b>	<b>\$30,343,587</b>
<b>Net Assets, ending</b>	<b>\$31,347,977</b>	<b>\$30,201,115</b>

\*Annual Contributions include only those gifts made directly through the VMHF to benefit the Vincent Department of OB/GYN. Additional support is also solicited and channeled through the Mass General Development Office to benefit the Department.

The VMHF is a public charity that fuels novel research and supports the training of tomorrow's leaders, advancing the care and treatment of women in the Vincent Department of Obstetrics and Gynecology at Massachusetts General Hospital. It is a 501(c)(3) tax-exempt charitable organization that is separate and distinct from Mass General. The figures shown reflect the audited financial statements of the VMHF.

## Board of Managers

# Can do spirit

"We focused on what we could do, rather than what we couldn't," said Ann Corcoran, president of the VMHF Board of Managers (BOM) from 2020 to 2022. "Continuing our remarkable 130-year legacy of volunteerism, we actually expanded membership during the pandemic and found creative ways to support the patients, families and staff of the Vincent Department."

- Patient activity kits:** Our members couldn't visit Vincent patients and give them items from our visiting carts, so we assembled over 250 gift boxes, which the nursing staff gave to patients on all three inpatient floors.
- Fleece baby blankets:** Rather than in-person gatherings, one member cut the fleece material and sent it to others to sew at home. The blankets then were gathered and delivered to the Special Care Nursery and the HOPE Clinic to be distributed to patients.
- Personal notes to faculty:** All 110 Vincent OB/GYN faculty received hand-written notes of appreciation and thanks for their dedication.
- Nurse appreciation and support:** With donations from the Lubetsky Family Foundation, we provided over 1,000 snacks and sundries to Vincent nurses during Nurse Appreciation Week (in photo, from left: Dr. Jeffrey Ecker, Sarah Meigs, VMHF BOM; Kim Francis, PhD, RN, PHCNS-BC, nursing director, Blake 13 and Ellison 13; Molly Lyttle, MSN, RN, OCN, nursing director, Phillips 22; Hattie Kessler, VMHF BOM; and Michele O'Hara, DNP, RN, NE-BC, nursing director, Blake 14). We also continued the monthly meals program. During the holidays, all 380 staff received gift cards. In addition, we sponsored a \$7,500 nursing education grant to be shared by 38 Vincent nurses.



## VMHF funding supports the future

Please visit the VMHF website to see how gifts of all sizes, both large and small, are working together to advance women's health. Donations may be made online ([vincentmemorial.org](http://vincentmemorial.org)) or mailed to Vincent Memorial Hospital Foundation, 55 Fruit Street, Austen 516, Boston, MA 02114. Our deepest appreciation for supporting the future of women's healthcare.

[vincentmemorial.org](http://vincentmemorial.org)



The Vincent Memorial Hospital Foundation, Inc.  
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## VINCENT OB/GYN FELLOWS

# Voices from the *front lines*



*“As a mother of two, it was challenging to deal with the unknowns of this new virus, particularly to provide care to our patients while also protecting our families. We shared these concerns with colleagues during Zoom meetings and helped each other stay positive. When the inpatient unit for Gynecologic Oncology (Phillips House, Ellison 22) was reassigned to COVID patients, our cancer patients were placed throughout the hospital in as many as 10 units. Because they could not receive visitors, we did our best to provide supportive care for their emotional well-being.”*

**KATELYN DORNEY, MD**, a Vincent fellow in Gynecologic Oncology, credits her family and colleagues with helping her stay focused and resilient during the pandemic. With the vaccine now widely available, many initial stresses have been resolved, and surgical schedules have returned to normal.



*“When our outpatient care model shifted to telehealth, we realized some older patients might have a hard time using online technologies, so we contacted them ahead of their appointments to offer guidance. We also interacted with our colleagues via online meetings, which provided important updates on the pandemic. Because surgery in my subspecialty was largely considered elective, I went to the medical floors to help COVID patients, drawing upon my former training in internal medicine.”*

**MARCUS ORTEGA, MD**, a Vincent fellow in Female Pelvic Medicine and Reconstructive Surgery, attended many of the department's Zoom meetings and an outdoor social gathering held in November. Adding to his Vincent training in urogynecology, he is beginning a Mass General fellowship in Healthcare Policy and Administration.



*“Our job as obstetricians is a happy job. So even though COVID made women very scared, we highlighted that having a baby could still be an exciting experience. In Zoom meetings with Vincent colleagues, we discussed how to help all women in the hospital, not just OB/GYN patients. We consulted with colleagues in other states to discuss care strategies. And while most people in society were isolated, we at least could come into the hospital and interact with other human beings, which helped us retain a semblance of normalcy.”*

**MARTI SOFFER, MD, MPH**, was the fellow in Maternal-Fetal Medicine assigned to the inpatient high-risk service throughout the first wave of the pandemic. She recently joined the department's Well-being Council, which strives to optimize work satisfaction by promoting a sense of community and feeling valued and respected.

COVER: In 2020, two Vincent fellows served in the high-risk obstetrics clinic at the Mass General Chelsea HealthCare Center, a role assigned to Maternal-Fetal-Medicine (MFM) fellows during the first year of their three-year fellowship. In photo are fellows Marti Soffer, MD, MPH (left), and Molly Seigel, MD (right), with Mark Phillippe, MD, MHCM (center), the attending MFM specialist who mentors fellows in this clinic and also serves as a senior investigator in the Vincent Center for Reproductive Biology (VCRB), where his lab is working to identify the biological mechanisms of preterm childbirth and potential therapeutic interventions. The Vincent training fellowships and the VCRB's scientific programs are the top funding priorities of the Vincent Memorial Hospital Foundation.