NewYork-Presbyterian

LEGACY PARTNERS

THE WHITNEY-HARKNESS SOCIETY NEWSLETTER | FALL 2019

IN THIS ISSUE:

VISIONARY MICHAEL OTTEN

"If you want something done, ask a busy person," the maxim goes.

Case in point: Michael Otten, computer engineer by training, international business strategist by trade, and social entrepreneur by … unceasing curiosity. "If you keep your eyes open, there are lots of things you can jump into. These days I'm extraordinarily busy," says Michael, who retired in 2009 from IBM. For more than 40 years, he worked for the multinational tech giant—starting as a high school student in the late 1950s over summer break. Looking back, he says humbly, "I was lucky to get in on the ground floor."

Michael has an impressive array of academic degrees from Princeton, Columbia, Harvard, and American University, and he had a successful career at IBM in international business strategy and planning. He served in various leadership capacities in the company's corporate headquarters in Westchester, New York, as well as its European, Asian-Pacific, and Latin American operations.

> "My family has been part of the makeup of NewYork-Presbyterian for many years."

While he was dedicated to his work at IBM, Michael's careers belie an amazing variety of interests and talents. He engaged in medical systems research at the National Institutes of Health for two years and had his research published in the *Journal of the American Medical Association*. He also worked for the Project Apollo moon landing program at North American Aviation, a major aerospace manufacturer.

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DEVELOPMENTS IN ALZHEIMER'S PREVENTION:
A DISCUSSION WITH RICHARD S. ISAACSON, MD

Associate Attending Neurologist
Director, Alzheimer's Prevention Clinic
NewYork-Presbyterian/Weill Cornell Medical Center

Dr. Richard S. Isaacson is the Founder and Director of the Alzheimer's Prevention Clinic (the "APC") at NewYork-Presbyterian/Weill Cornell Medical Center. The APC team works directly with patients, builds tech applications, develops new methods of cognitive testing, and conducts research programs to promote brain health and risk reduction.

How did you become interested in Alzheimer's disease?

When I was in high school, my uncle Bob was diagnosed with Alzheimer's. He was 70. This was back when there was zero treatment for the disease. At the time, I was applying for college. I entered an accelerated six-year BA/MD program at age 17, got my white coat, and when I started my pathology rotation, I learned the same thing: There was no treatment for Alzheimer's. It didn't sit well with me. My great-uncle Max was also diagnosed. The family had called him "senile" and said it was normal, but I knew something was wrong by just looking at him. In all, four of my family members have been diagnosed with the disease. So that was the start of this work for me. I decided I wanted to specialize in Alzheimer's, full time, and start a set of programs to try to prevent Alzheimer's.

> "NewYork-Presbyterian is the only place in the world ... where I could have done this."

When did you first start thinking about Alzheimer's prevention?

It all started when I was treating a retired physician at another hospital for Alzheimer's disease. His children—one a physician himself—were concerned that they had the disease and asked what they could do to prevent it. I had a 45-minute conversation with one of the children, and after I thought, "That was my first prevention consultation." I knew this was what I needed to focus on. So, I then started seeing the family members of patients I was treating.

How did it come about that you opened the country's first Alzheimer's prevention clinic at NewYork-Presbyterian?

With the forward-thinking nature of this work, NewYork-Presbyterian is the only place in the world—I'm not exaggerating here—where I could have done this. Period. We opened the APC in 2013. Now there are five or six risk-reduction clinics at other institutions across the country. We were the first to put our stake in the ground and say "Alzheimer's prevention." Nowhere else could I have used the term "prevention," and that's a very important distinction for people to understand.

Today, I oversee a team managing Alzheimer's prevention for the 700 patients treated in the APC. Our patients come from all over. A third live outside New York, New Jersey, and Connecticut. Some come from California and Utah, and 20 percent were born outside the U.S. They come from all walks of life, so it's a very interesting group we're treating and studying. Our aim is to truly change medicine in this field.

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EDWARD AND RUTH FROST:
A BEQUEST FOR THE HOSPITAL THEY LOVED

Edward and Ruth Frost on their wedding day

In the artistic heyday of New York City's Greenwich Village, East Ninth Street alone claimed among its residents Barbara Streisand, Maurice Sendak, Joseph Papp, Marianne Moore—and Edward "Ed" and Ruth Frost. The Frosts bought their 1844 Ninth St. townhouse in 1958. He was a dentist; she worked in publishing. Ed and Ruth moved into one floor of the building and rented out the other seven apartments—to "people in the arts" only, such as fashion designers Mark Badgley and James Mischka. Tenants said that when walking through the building's halls, the sense of community was palpable, and each apartment represented the resident artist's creative and unique tastes.

A 2017 *New York Times* article detailed some of the ephemera amassed by the Frosts during their 60 years in the building: jazz records, abstract paintings, model sailboats handmade by Ed, and the old gramophones and piano rolls the couple collected. The Frosts had an instinct for the kinds of creative people who might establish a community. After many years on Ninth Street, Ruth died in the fall of 2016 at age 90; Ed predeceased her by a few months at 93.

With gratitude for the care they received at NewYork-Presbyterian, the Frosts made a generous bequest to benefit a different kind of art—the medical arts. The proceeds from the sale of their Ninth Street townhouse were bequeathed to the Hospital by the Frosts to benefit the Irving Sherwood Wright Center on Aging at NewYork-Presbyterian/Weill Cornell Medical Center.

BEQUESTS: SIMPLE WAYS TO SUPPORT LIFE-SAVING HEALTHCARE

Like Edward and Ruth Frost, many of our generous donors have remembered NewYork-Presbyterian Hospital in their estate plans. Bequests through wills or living trusts are great ways to help provide the finest healthcare available while not affecting your cash flow or securities portfolio.

We suggest the following language for your will or living trust:

"I give, devise, and bequeath to New York-Presbyterian Fund, Inc., a corporation created under the New York State Not-for-Profit Corporation Law and located in New York City, New York, (the sum of $___ or ___% of my residuary estate) to be used for the general corporate purposes of NewYork-Presbyterian Hospital as its Board of Trustees shall determine."

(New York-Presbyterian Fund, Inc., exclusively supports NewYork-Presbyterian Hospital. The Tax Identification Number for New York-Presbyterian Fund, Inc., is 13-3160356.)

For more information:
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MICHAEL OTTEN continued

"President Kennedy had announced the challenge to put a man on the moon," Michael recounts. "Engineers were needed; I applied and was hired. I figured it would be fun to have an expense-paid trip to California," he jokes.

Back at IBM, Michael began teaching, an avocation that would lead to a new career and deepen his dedication to educational and social organizations. He served as President of the School Board for the Scarsdale Schools of New York and as President of the Board of Green Chimneys School, a nonprofit dedicated to helping young people with special needs through animal-assisted therapy.

Now in "retirement," Michael divides his time between Paris, his wife Evelyne's place of birth, and New York. In Paris, Michael teaches part time at the French engineering grande école, EFREI (École Française d'Electronique et d'Informatique), and mentors at INSEAD, the Business School for the World, as a Social Entrepreneur in Residence.

> "I have a great amount of respect for the Hospital, and it's nice to be able to contribute ..."

Michael explains that while engineers traditionally have great ideas, they don't always know how to put them into a business model. With his multifaceted experience, "this is an area where I can give something back," he says. "And teaching is a wonderful way to stay in touch with young people. Retirement is fun," he quips.

Born and raised in New York, Michael's ties to NewYork-Presbyterian are strong. "My family, my grandmother and grandfather—we only went to Columbia Presbyterian Hospital," he says of what is now the largest campus of NewYork-Presbyterian. Continuing the family tradition, Michael's two sons, Marc and Daniel, both pursued medical degrees and/or training from the Hospital's two medical school partners. And, Marc L. Otten, MD, is Director of Neurosurgery at NewYork-Presbyterian Lawrence Hospital in Bronxville, New York. "My family has been part of the makeup of NewYork-Presbyterian for many years," says Michael.

Grateful for the compassionate, expert care—and training—received by his family from the Hospital, Michael, when seeking counsel on making a gift, turned to NewYork-Presbyterian's Planned Giving experts and established a charitable gift annuity. "I like the arrangement because it's a simple agreement that provides me with fixed, lifetime income in exchange for my donation," says Michael.

"I have a great amount of respect for the Hospital," Michael says, "and it's nice to be able to contribute and to be reminded of my giving—first time around by the tax deduction, and then by the regular income."

NewYork-Presbyterian is lucky to count Michael and Evelyne among its friends and generous supporters. In addition to continuing a family legacy, Michael has created a legacy of giving that will benefit NewYork-Presbyterian patients and New Yorkers at large for years to come.

Michael Otten with Steven J. Corwin, MD, President & CEO of NewYork-Presbyterian, and Marc L. Otten, MD, Director of Columbia Neurosurgery, NewYork-Presbyterian Lawrence

DEVELOPMENTS IN ALZHEIMER'S PREVENTION continued

Why is early intervention so important to Alzheimer's disease prevention?

It's estimated that 46 million Americans have preclinical or presymptomatic Alzheimer's (meaning, the disease has started silently in their brains). We know that the disease starts decades before the onset of symptoms, giving physicians ample time to intervene in an individualized fashion. Just because most people are diagnosed in their 70s and 80s doesn't mean we shouldn't be treating them 20 or 30 years before. Many of our APC patients are in their 30s and 40s. Alzheimer's risk reduction is in its infancy, but our next steps are to assess the effectiveness of our clinic's precision-medicine interventions, publish what we learn, and disseminate information to the public through our website.

Plus, we now know that one out of every three cases of Alzheimer's may be preventable. Having a few FDA-approved drugs on the market is marginally helpful, but we feel it is vital to address vascular risk factors, lifestyle changes, exercise, nutrition, sleep, and stress management. We have learned that Alzheimer's is a very heterogeneous disease, meaning different people have different roads to the disease—some genetic, some not. I believe combining a variety of interventions along with lifestyle modifications may help to delay or, in some cases, possibly prevent the progression of this disease.

By what methods does the APC promote brain health and reduce the risk of Alzheimer's?

We offer a highly individualized approach for patients at risk, those with preclinical Alzheimer's, and those who have mild cognitive impairment due to Alzheimer's. Each patient undergoes what we call the ABCs of Alzheimer's prevention management. A is for anthropometrics, or body composition. B represents blood-based biomarkers related to genetics, lipids, metabolism, inflammation, and nutrition. C stands for cognition. In addition to blood draws, genetic testing, and biometric measurements, patients undergo extensive cognitive assessments.

We use technology a lot in our approach. Patients wear wrist biosensor devices—like a Fitbit on steroids, so to speak—to measure exercise, pulse rate, and sleep patterns. With a comprehensive prevention framework established, we've attracted visiting neurologists from all over the world who want to replicate our work at their institutions. Our ultimate goal is to have a consortium of clinics around the country, working together on this clinical research.

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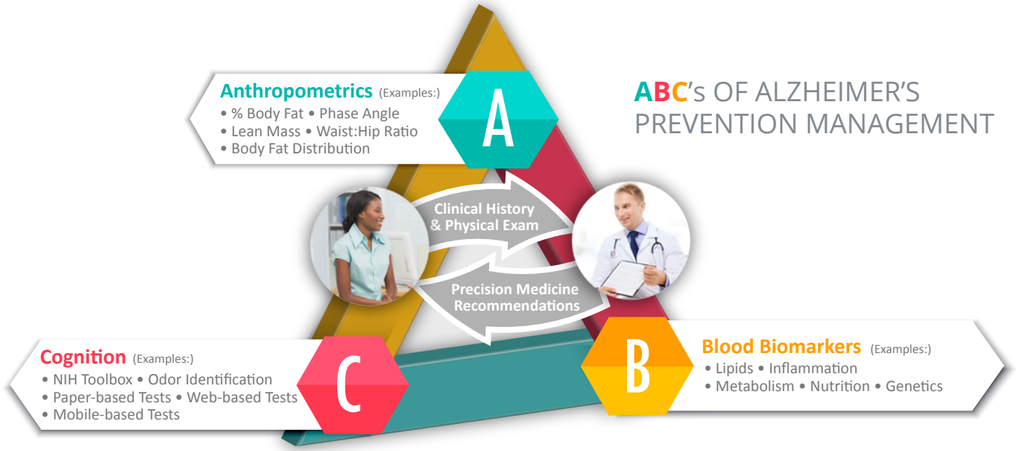

BENEFICIARY DESIGNATIONS: SIMPLE WAYS TO MAKE A GIFT THROUGH YOUR ESTATE

Naming NewYork-Presbyterian on a beneficiary designation form is, perhaps, the easiest and quickest way to support state-of-the-art, compassionate healthcare after your lifetime.

IRAs and other qualified retirement plan designations – You can designate the Hospital as the ultimate beneficiary of your individual retirement account (IRA) or other retirement account. To do so, you simply complete a beneficiary designation form and return it to the plan's custodian. Typically, donating this type of asset provides substantial tax advantages. For example, the majority of the value of an IRA you bequeath to your heirs could be eaten up by taxes. Naming the Hospital as beneficiary of a qualified retirement plan may avoid income and estate taxes that otherwise might be due.

Life insurance beneficiary designations – The Hospital can be named as a beneficiary of an existing life insurance policy if your family no longer needs the insurance benefits. You would simply complete and return to the insurance company a form designating the Hospital as recipient of all or a portion of the ultimate benefit associated with the policy. Life insurance can represent a significant gift to the Hospital at a relatively low cost to you.

Payable on death ("POD") and transfer on death ("TOD") accounts – A POD or TOD account allows for the money remaining in the account, when the account owner passes, to go directly to the beneficiary named. POD/TOD accounts can be created for most bank and investment accounts. To create a POD/TOD account, you simply complete a form instructing your bank or investment account administrator to pay to your favorite charity all or a portion of what remains in your account at the end of your lifetime.

Donor advised fund designations – If you have a donor advised fund account, you are generally able to recommend in advance (on a form provided by the account manager) that, upon your passing, the balance in your account or a lump-sum grant be paid to the Hospital or another charity of your choosing.

Designating the Hospital – Please name the Hospital on your beneficiary designation form as *"New York-Presbyterian Fund, Inc."* Please note that it is advisable to review these and all gifts with your legal and/or financial advisor to be sure they are appropriate in your specific situation.

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Online: www.nyp.org/plannedgiving

NewYork-Presbyterian does not provide legal or tax advice. This communication is not intended or written to be used, and cannot be used, for the purpose of avoiding tax-related penalties.

MEET THE PLANNED GIVING TEAM

Nick Pitaro, Lynn Hoyte, Jisun Kim, and Olivia Greco

Our Planned Giving team is available to answer your questions about gift options, such as bequests, charitable gift annuities, charitable trusts, or tax-free giving from your IRA. We would be pleased to consult with you and/or your advisors, in confidence and with no obligation.

Please contact us using the enclosed reply card, or feel free to call or email us at:

(646) 317-7499 or legacy@nyp.org, or visit www.nyp.org/plannedgiving

DEVELOPMENTS IN ALZHEIMER'S PREVENTION

continued

Please tell us about your website, Alzheimer's Universe (AlzU.org).

AlzU.org offers the most up-to-date information on Alzheimer's prevention, treatment, and caregiving. It offers free Alzheimer's prevention education courses for the general public and has reached more than 1.3 million people in 56 countries. We also have a CME-accredited course for healthcare providers, as well as courses for high school, college, and medical school students, and neurology residents. We're trying to take the information we learn in the clinic and disseminate it on our website.

How significant has the role of philanthropy been to the work of the APC?

Without philanthropy, we could not have done what we do. In all, 85 percent of our funding comes from philanthropy. It fast-forwards our work in an emerging field. Philanthropy has an immediate impact on our work at the clinic and on our website, where hundreds of people log on and learn vital information every day.

The evidence shows that one in three Alzheimer's cases may be preventable if a person does everything right. But, does that person know their risk factors and how to reduce them? Philanthropy helps us get the information to those who need it.

LEGACY MINUTE

DR. GEORGIOS NIKOLAOU PAPANICOLAOU: CREATOR OF THE PAP TEST

Dr. Georgios Nikolaou Papanicolaou

In the early 1900s, cervical cancer was most often diagnosed when the disease had already reached an advanced stage. It was the leading cause of cancer deaths in women during this time, claiming nearly 40,000 lives every year. Dr. Georgios Nikolaou Papanicolaou addressed this with an unprecedented idea—detect the cancer earlier by scraping cells from tissue in the cervix for microscopic examination. His breakthrough findings led to what is today known as the Pap test.

Dr. Papanicolaou had a unique career path. After completing his medical studies at the University of Athens in 1904, he and his wife, Mary, arrived in Manhattan from Greece in 1913 to pursue basic science research.

After a year of working odd jobs, Dr. Papanicolaou secured his first research position at New York Hospital, now NewYork-Presbyterian/Weill Cornell Medical Center. He began to research reproductive cycles in guinea pigs by examining smears of their vaginal secretions. Dr. Papanicolaou then turned his attention to the human reproductive system, and he was able to spot the differences between the cellular biology of normal and malignant cervical cells upon viewing swabs smeared on microscopic slides.

For 47 years, Dr. Papanicolaou worked at the Hospital, retiring as professor emeritus of clinical anatomy and director of the Papanicolaou Research Laboratory. His studies have had a profound impact on women today, and his invention of the Pap test has reduced the mortality rate of cervical cancer by an estimated 70 percent.

Courtesy of NewYork-Presbyterian Health Matters

For more information, please contact:
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