

Dr. Noel R. Rose receives AARDA's highest award

With AARDA's gratitude, great respect, and affection, Noel R. Rose, M.D., Ph.D., has been granted the 2016 American Autoimmune Related Diseases Champion Award in recognition of his invaluable and dedicated service to the American Autoimmune Related Diseases Association. The presentation was made on May 7, at AARDA's Annual Derby Luncheon which celebrated the organization's past 25 years of service to autoimmune patients and others.

In the earliest days of AARDA's struggle into existence, Dr. Rose gave significant encouragement to Founder Virginia Ladd and the original planners. His support has continued faithfully and wisely over the past 25 years. Whether quietly answering questions via telephone, helping to organize scientific meetings, attending AARDA Board meetings in an advisory capacity, educating autoimmune patients and others at AARDA public forums, or basically supporting AARDA in myriad ways, Noel Rose has been present for AARDA.

Aptly called the "Father of Autoimmunity" for his breakthrough discovery of thyroid autoimmunity in 1956, Dr. Rose has gained international recognition. A listing of his academic achievements, awards, writings, and other accomplishments, including a Nobel prize nomination, cover many pages.

Dr. Rose is a Fellow of the American Academy of Allergy, the College of American Pathologists, the American Academy of Microbiology, and the American Association for the Advancement of Science. He is the recipient of the Abbott Award and the Award for Pioneering Research on Autoimmunity, both awarded by the American Society for Microbiology. In 2009, Dr. Rose received the Polish Academy of Sciences' Nicolaus Copernicus Medal, the

academy's highest honor. He is co-author of the renowned textbook *The Autoimmune Diseases*.

Woven among all the research areas in his life is the influence that he has had on many, many individuals on various levels in sharing his talent (and love) of teaching--in classrooms, laboratories, scientific symposia, one-on-one contacts, and public forums. A member of The Wayne State University (Michigan) Academy of Scholars, he received the WSU Lamp Award for Excellence in Teaching (1976), the President's Award for Excellence in Teaching (1979), and the Distinguished Service Award from the College of Medicine (1982).

A former professor of microbiology, pathology, and immunology at the Johns Hopkins University School of Medicine, Baltimore, Maryland, Dr. Rose served as first Director of the Center for Autoimmune Disease Research, Bloomberg School of Public Health, at Johns Hopkins. He recently moved to the Brigham and Women's Hospital, Harvard Medical School, Boston, Massachusetts, as he teaches, plans and coordinates scientific symposia, and continues to enlighten the public about autoimmune disease through AARDA public forums held throughout the country.

Dr. Noel Rose is a true Champion in the lives of autoimmune patients worldwide. We truly are blessed to have his continuing guidance. ■



See **AARDA** in the News online

- "25 Years of Autoimmune Heroes" <http://detne.ws/1owMvb6>
- "Eastpointe-Based Group Fights Autoimmune Disease" <http://bit.ly/1T543Db>
- "AARDA Salutes Autoimmune Heroes for Volunteer Efforts" <http://bit.ly/1qUsigQ>

AARDA Celebrates 25th Anniversary by Saluting #AutoimmuneHeroes

On March 23, 2016, the American Autoimmune Related Diseases Association (AARDA) announced that it was continuing its 25th Anniversary celebration with the launch of its yearlong Autoimmune Heroes campaign. Each month for the next 12 months, AARDA will be announcing its #AutoimmuneHeroes.

Over the past 25 years, these heroes--individuals, foundations, organizations--have proved critical in helping AARDA become the national organization it is today, while advancing the autoimmune disease agenda in the areas of research, patient safety, advocacy, public education and awareness, service, and volunteerism, among others.

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President/Executive Director's message — Virginia T. Ladd



Looking back 25 years--left to right: AARDA Founder Virginia Ladd, volunteer Nancy Mestrovic, staff member Eula Hoover, and volunteer Jean Wetering

Our 25th Anniversary Year is moving along at a rapid pace. It's a year of memories, recognitions, and celebrations. Chartered in December 1991, AARDA has been described by some observers as "the little mouse that roared." Well, yes, we still are comparatively little and we definitely still are roaring, with no plans to stop until our mission has been fulfilled.

◆ In the March issue of *InFocus*, you saw "AARDA by the numbers," our colorful front page review of major accomplishments--for example, 155 research/scientific/clinical meetings and conferences sponsored/supported in 23 U.S. states and 20 other countries; and \$5 million awarded in research grants, fellowships, and medical school scholarships. And how about the "tens of millions" of autoimmune disease patients and their families around the globe to whom AARDA has provided information, resources, and referrals through the 800 numbers, Web site, e-mail, postal service, patient educator, and in-person public education events?

◆ We established the AARDA Champion Award and were proud to choose as our first honoree a true champion of autoimmune patients and AARDA itself, **Noel R. Rose, M.D., Ph.D.** (see article in this newsletter). His gracious acceptance, given at our Annual Derby Luncheon, touched everyone.

◆ A toast was offered to AARDA as we celebrated our 25th Anniversary at the Annual Derby Luncheon. A full report of this gala event, complete with photos, will appear in the September *InFocus*.

◆ **Abid Khan, M.D.**, Director, Autoimmune Center, MidMichigan Health, affiliated with the University of Michigan, paid tribute to AARDA at the Derby Luncheon and presented AARDA with a **Certificate of Appreciation** from the Center. AARDA provided initial funding for this Center as "support of a pilot study, headed by Dr. Abid Khan, for an Autoimmune Diagnostic Triage Clinic." The MidMichigan Autoimmune Center, the first of its kind in the nation, is receiving grateful reports from autoimmune patients (see the March 2016 *InFocus*).

◆ AARDA received U.S. Congress acknowledgment through a proclamation printed in the *Congressional Record* and presented in the House of Representatives on May 12, 2016, by **Congresswoman Debbie Dingell**, "In Recognition of the 25th Anniversary of the American Autoimmune Related Diseases Association." Mrs. Dingell also was a member of the Honorary Committee at AARDA's Derby Luncheon.

◆ We are celebrating some of our earliest volunteers who initially shared--and continue to share--our vision of a cure for the life-threatening category of autoimmune disease and who have been dedicated to actively supporting that vision throughout the years. You will be introduced to them elsewhere in this newsletter.

◆ Family foundations, with their generous contributions, have played an important role in financing research, awareness, and education projects over the past 25 years. They, too, will be given recognition during this year--Web site, *InFocus*, and other means.

◆ We also are recognizing, with thanks, the pharmaceutical companies and other corporations that, through their representatives, have supported AARDA's efforts on the part of the 50 million Americans affected by autoimmune disease. With no strings attached, an understanding which we always have emphasized, they truly have opened doors and provided grants for which all of us can be grateful.

◆ The **#25for25 Campaign Finale & Anniversary Gala** is being planned for March 2017, during--appropriately--Autoimmune Disease Awareness Month. Perhaps you will be in the New York City area at that time and can attend. We'll be in touch!

◆ My message wouldn't be complete without once again thanking you, each supporter, for your active role, whatever it may be, in furthering AARDA's mission.

With joy and gratitude,
Virginia



#Autoimmune Heroes for March & April (continued)

◆ **AARDA's March #AutoimmuneHeroes** are AARDA National Spokesperson actress **Kellie Martin** and AARDA Ambassador actress **Haley Ramm** and her mother **Barbara Ramm**, who copes with an autoimmune disease, relapsing polychondritis. They are honored for their impact in fostering public education and raising public awareness of autoimmune disease.



In recognizing **Kellie Martin** (@kelliemartin), AARDA cites her nearly two decades of dedication to the organization, serving as its celebrity spokesperson, participating in countless media interviews, speaking at public forums, headlining special events, advocating on Capitol Hill, filming public service announcements, and enlisting her friends and family to support the autoimmune cause.

AARDA salutes actress **Haley Ramm** (@halesbells) and her mother **Barbara Ramm** (@BarbeeVintage) for their intense commitment, spearheading the first-ever Los Angeles Autoimmune Walk which raised over \$100,000 in its inaugural year for research and awareness. In addition, Haley enlisted the cast of ABC Family's *Chasing Life* to have a pillow fight in pajamas on camera to raise awareness of the link between fatigue and autoimmune disease.



"We at AARDA are immensely fortunate to have the pleasure of working with these three intelligent, talented, and passionate women, all of whom continually work to raise awareness of autoimmunity and autoimmune disease to make life better for the 50 million Americans who suffer from these diseases and their families," said Virginia Ladd, founder and executive director, AARDA (@AARDATweets). "We cannot thank these Autoimmune Heroes enough."

Most recently, Kellie and Haley joined forces to launch AARDA's "#25for25" fundraising campaign. **#25for25 invites individuals and organizations the world over to recognize AARDA's achievements on behalf of people with autoimmune disease and support its work going forward by donating \$25 to the organization (www.aarda.org).**

◆ **AARDA's April #AutoimmuneHeroes** range from being familiar faces at the AARDA national office and, in most cases, at AARDA fund raisers to sharing their professional roles from their Washington DC offices and volunteering as needed in other locales.



Ruth Kibler is recognized for her role as AARDA's longest serving "go-to" volunteer since 1991, helping in the office with "whatever needs to be done," such as answering phones, filing and typing, acknowledging donors' gifts, bookkeeping, mailing the newsletter, communicating

with Local Contacts, and everything in between. Ruth has been actively involved in planning and facilitating AARDA's 16 annual Detroit-area fund raisers, and Victorian Tea and Derby Luncheon guests have appreciated Ruth's smoothly run Silent Auction checkout system.

Ruth met AARDA founder Virginia Ladd in the mid-1970's when they shared volunteer work at their children's school and became fast friends. It seemed only natural to jump into action when Virginia created AARDA.

Ruth says, "Virginia wanted more focus on autoimmune disease as a whole, and AARDA was born. I wanted to be a part of it and followed along for the adventure--and that it has been! It is a pleasure to work with a wonderful group for a cause that is so important."

Marilyn and Dr. Tom Assiff first came to know AARDA when Marilyn met Virginia Ladd at a rheumatologist's lecture on lupus with which her husband Tom had just been diagnosed. Within a week, Marilyn and Tom both were volunteering at AARDA, a labor of love



that Tom continued until his passing in 2015. He created AARDA's first data base and continued lending his expertise over the years while Marilyn cheerfully collated, stapled, typed, mailed, and did whatever was needed in the AARDA office and at home via computer and other projects. Both Marilyn and Tom worked to support AARDA's vital patient education and outreach activities, and Marilyn continues her affiliation with AARDA, especially in the fundraising area.

Marilyn says, "It has been a mutually rewarding relationship as AARDA provided us much needed education and support about Tom's autoimmune disease, and we could volunteer our time and dollars to support AARDA's vital outreach to other patients and their families."



Abby Bernstein first became involved with AARDA in 1994 when she was diagnosed with her first autoimmune disease. She was struggling to obtain information and found AARDA to be an invaluable resource. Knowing right away that she wanted to become involved with AARDA's work, she plunged into advocacy, lobbying Congress to raise awareness of autoimmune disease and the need for autoimmune disease research funding.

In addition to participating on AARDA's Advocacy Committee, Abby served two terms as a member of AARDA's Board of Directors. Throughout her years with AARDA, she has been a valuable advisor not only in advocacy but also in general guidance. Abby has made herself available for media interviews, willingly sharing her autoimmune experience for the good of others.

Abby states, "AARDA is an outstanding organization that is leading the way in supporting autoimmune disease research and promoting autoimmune disease awareness. I'm proud to be an AARDA volunteer."

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Natasha Leskovsek has combined her nursing and legal backgrounds in the areas of patient and physician advocacy and education work, using her legal and medical prowess to help translate science from the bench to the clinic to the benefit of countless patients. Natasha covers AARDA meetings and symposia to write lay-friendly reports while also collaborating on articles for peer-reviewed journals.



An attorney practicing FDA regulatory law in Washington DC, Natasha considers it a stroke of luck that she was introduced to AARDA and Virginia Ladd in 1996 when she first started practicing law.

“Working with AARDA over the years on patient advocacy issues, scientific symposia, publications, and autoimmune nursing practice guidelines has allowed me to learn so much. It has been so gratifying. Next on, the autoimmune moon shot!”



Donna DiSante is recognized for her incredible fundraising and special events work at AARDA's headquarters in Detroit--organizing highly successful annual events, soliciting donations, recruiting volunteers, and raising awareness for autoimmune disease and money for research.

About 20 years ago, Donna's rheumatologist introduced her to AARDA and suggested that she help with a fundraising event. Once she had learned more about the immensity and impact of autoimmune disease on the population, she was happy to remain an AARDA volunteer.

Donna says, “Based on my own experience with rheumatoid arthritis and the struggles of relatives and friends with type 1 diabetes, multiple sclerosis, lupus, Crohn's disease, psoriasis, and scleroderma, I realized the necessity of finding a common factor.” She adds, “I greatly admire AARDA for the research they've brought forth, the education they provide for medical professionals and the public at large, and for their advocacy efforts for all people with autoimmune disease.

“I congratulate Virginia Ladd, Dr. Noel Rose, the AARDA Board and staff, the dedicated medical professionals, and the many volunteers who contribute to this noble work.”

Chuck and Susan Gaidica receive recognition for their outstanding support of the autoimmune cause in Detroit and the Greater Detroit area. They have been very successful in fund raising, autoimmune awareness, hands-on event planning, volunteer recruitment, and enlistment of their families, on both sides, to help support the autoimmune cause.



Susan and Chuck, the former Director of Meteorology on Detroit's WDIV-TV Channel 4, current host of “Live in the D,” and incoming pastor of Metropolitan United Methodist Church, in Detroit, began their contact with AARDA via telephone as they sought information

when their son Charlie was diagnosed with an autoimmune disease. They have been strong supporters of AARDA ever since that time.

Susan and Chuck state, “As our young family was growing, our son Charlie was stricken with autoimmune hepatitis in his teen years. We have supported AARDA because of the information and kindness they provided our family over time. Charlie is now a busy husband and father.

“The team of caring souls at AARDA is wired to serve others each day, and they do an amazing job. They are a blessing.”



Carolyn Ugval, the “Energizer Bunny” of AARDA's Victorian Tea and the Derby Luncheon, plus other major fundraising events over the past 16 years, solicits donations, recruits volunteers, organizes and oversees the highly successful silent auction at each of the events, and generally raises awareness for autoimmune disease and money for research. As Carolyn says, when she walks through the door of a local

business, the greeting is, “O.k. What do you want?”

Carolyn became involved with AARDA through her sister who has multiple autoimmune diseases. Over the years she has seen other relatives and friends diagnosed with different autoimmune diseases, too.

“I have been very fortunate to work with the people at AARDA,” Carolyn declares. “I have learned so much from them. They are hard workers who are also so kind and thoughtful. I am very touched and blessed to be given this honor.”

Barbara Willett stepped into chairmanship of AARDA's first Victorian Tea with gusto and ability. Organizing, cheering on, and pitching in to inspire the committee, she solicited donations, recruited volunteers, donated many of her own items, and began the first of her several years of AARDA fundraising leadership.



How did Barbara get involved with AARDA? Some 20 years ago, Barbara's young niece was hospitalized for many months with a life-threatening autoimmune disease. The niece's mother, Ann Willett, already an AARDA volunteer, introduced Barbara to AARDA and asked her to help AARDA with fundraising--and Barbara never looked back.

Barbara says, “I volunteer to help with AARDA fundraisers not only because of the support the organization has given to our family but also because of the integrity and dedication of AARDA's staff. Led by Virginia Ladd, the staff makes volunteers feel that their time invested in AARDA is important. We all know how important public awareness, advocacy, and research is in helping those afflicted with autoimmune disease. The cause itself is important; but most of all, I think people volunteer at AARDA because their staff make them feel their efforts count.”

LOOK IN THE NEXT ISSUE OF INFOCUS (SEPTEMBER 2016) FOR OTHER #AUTOIMMUNEHEROES, STARTING WITH THE MAY HONOREES.

--Our thanks to Carway Communications, Inc., carwayny@aol.com

Do the primitive parts in your brain influence your food choices?



Why do sweet foods taste so good to us? Why do we sometimes crave salty foods? Are these biological needs our body's way of trying to communicate something? Yes! In these primitive parts of the brain, this is what each of the different taste cravings mean.

- Salty - The body is seeking electrolyte balance (especially for someone in adrenal fatigue).

- Sweet - This indicates a food that is rich in energy (calories) and nutrients.

- Sour - This is the taste of acids (helps maintain pH balance in the body).

- Bitter - In nature, this is the taste of natural toxins (why we avoid bitter tasting foods!).

- Umami - This indicates amino acids (protein). Umami is a taste characteristic of monosodium glutamate and associated with meats and other high-protein foods, sometimes considered to be a fifth basic taste along with sweet, sour, salty, and bitter.

Most modern processed food is designed with chemical substitutes to mimic the flavors that our body craves. This triggers a response in the brain to make us feel that we are being satisfied with the nutrient need whether that is true or not.

A good example is the food enhancer MSG (monosodium glutamate) which mimics the flavor umami. The addition of MSG makes the food taste hearty and satisfying. The brain thinks that it is getting a good source of protein, whereas most of the foods to which it is added do not provide the actual nutrition to back up that flavor. So what happens? You end up craving more of it. You eat a super-sized meal from a fast food restaurant--well over your required calories--and feel hungry a few hours after consuming it. That's MSG. And not only that, MSG is also an excitotoxin, which means that it is toxic to your brain cells.

In nature, the flavor of foods indicates the nutritional value of food. Try the "carrot test." Buy a bag of organic carrots and a bag of conventional carrots. Try one (no dressing or dip) and then try the other. The organic carrot will taste sweeter and simply more

like a carrot!

This is because organic foods have more nutritional value

and, therefore, they taste better to us. (You can do the same experiment with an apple.)

So if we are eating a whole foods diet and are listening to our bodies, we can understand our nutritional needs by what foods we crave. A great example of this was a study conducted in the 1920s by Dr. Clara Davis, a pediatrician, who performed an experiment on fifteen babies, ages 6-11 months. These babies, from underprivileged families, had never been exposed to food beyond breastmilk. They were put on an experimental diet in which, throughout the course of a day, they could choose from 34 different whole food choices ranging from vegetables, milk, and different meat proteins--no sugar, cream, butter, cheese, or potato chips. The children had complete control over what they ate and how much.

The results showed that throughout the course of the first few weeks, the children sampled a little bit of each of the foods. After that, each child came to have certain preferences. The remarkable fact was that their preferences started to align with their individual nutritional needs. For example, one child with a severe case of rickets, a vitamin D deficiency, consumed of his own free will varying amounts of cod liver oil. He did this until his deficiency was resolved, and then he never touched another drop.

This speaks to the intuitive, nutritional nature we have as humans. If we can get back to a whole foods diet, no tricks with chemical additives, we can better hear the needs of our body. Then we can give it the nutrition it is craving rather than supply it with foods that serve only to deepen its nutritional deficiencies. What are the primitive parts of your brain telling you? ■

--Source: Adapted from "The Influence of Taste," Anne Zauderer, DC, *Health Hunters Newsletter*, Riordan Clinic, Wichita, Kansas, October 2015

AARDA brings public forum to Florida

The AARDA-sponsored "What Every American Needs to Know About Autoimmune Disease" public forum held in Tallahassee, Florida, on February 20, was termed a success by all who attended. The turnout for the very informative program was tremendous, and both Dr. Noel R. Rose and Rita Baron-Faust gave excellent presentations. Many thanks go to the *Tallahassee Democrat*, WCTV, and WTXL for covering the event. Adding to the value of the day were displays supplied by the Florida Division of Vocational Rehabilitation, the Big Bend Rural Health Network, and The Lupus Support Network.

Other public forums are being planned. Watch upcoming issues of *InFocus*. Those on the AARDA contact lists for the areas involved will receive notification. ■

Watch for Derby news...

The September *InFocus* will have a full report of the 25th Anniversary Celebration at AARDA's Annual Derby Luncheon and Silent Auction--complete with photos. Look for it!

Keep up with AARDA!

Follow us on: **Facebook**
(www.facebook.com/Autoimmunity)

Twitter
(@AARDATweets) (@autoimmunewalk)

YouTube
(www.youtube.com/AARDATube)



Grassroots fund raisers--we love them!

Awareness, education, and donor dollars spring from labors of love on the grassroots level across the United States and, in one case, Mexico. On behalf of the many autoimmune patients and interested others who will benefit from these efforts, we say THANK YOU.

◆ Three cheers for Kappa Kappa Gamma

Yes, the Kappa Kappa Gamma Chapter at California State University in Northridge has now tallied proceeds from its November “KKGlee” event and has donated more than \$2,000 to AARDA. As mentioned in our March *InFocus*, this event featured sororities and fraternities competing against each other in a lip sync and dance competition.



One can only imagine! The chapter decided to donate to AARDA because some of its members suffer from autoimmune disease--a great way to honor friends.

◆ “Out of the box” fund raiser crosses the border with Mexico

What do video games and autoimmune disease have to do with each other? A fund raiser that brought in \$200 for AARDA, that’s what! In recognition of Autoimmune Disease Awareness Month (ADAM) plus in honor of a friend who is battling Graves’ disease, Nahum Luna and TV co-host Nathaniel Bandy completed an “out of the box” fund raiser. On two consecutive Friday evenings in March, they broadcast a live feed of themselves and friends playing video games while talking and interacting with their audience. This, according to Nahum, was “overall just having a good time.” The event took place on Twitch.tv, Nahum’s personal channel, Charrii5. It should be noted that Nahum resides in Mexico, but her love for her friend battling Graves’ disease made the decision to donate to AARDA a very easy one.

◆ Baskets and Bingo, a winning combination

A Longaberger Basket Bingo, a winner for autoimmunity, was held in the Gordonsville, Virginia, Fire Hall. Organized by Pat Jones, Leigh-Anne Sheppard, and Nancy Sheppard, the event netted \$3,379 for AARDA! All Longaberger baskets, egg raffle, auction items, and concession offerings were donated by the community, friends and family. Many thanks go to the “village” that made this event a success and to AARDA Board Secretary Michelle Ouellet for her assistance. ■



It’s “Linking Together” time--join the fun!

Take your walking shoes out of the closet (or from under the bed), or call some friends (or not), set a date, and find your favorite snacks and cup for coffee or tea. The AARDA Autoimmune Walks offer something for everyone, ranging from active to virtual walking (that’s the snacks and cup plan). Simply choose your level to Link Together for a Cure. Then let the dollars add up for autoimmune disease research and education.

For information: E-mail, walk@aarada.org; Web, www.autoimmunewalk.org; call, 855-239-2557; updates, www.facebook.com/AutoimmuneWalk; register, www.autoimmunewalk.org. Are you the tea or coffee person/team? Visit www.autoimmunewalk.org and click on the Virtual Walk link.

Autoimmune Walk

LINKING TOGETHER FOR A CURE

Saturday, September 10

DC Area Autoimmune Walk,
Bluement Park, Arlington, Virginia

Sunday, September 18

Tri-State Autoimmune Walk,
Hudson River Park’s Clinton Cove,
Manhattan, New York

Saturday, September 24

Atlanta Autoimmune Walk,
Piedmont Park, Atlanta, Georgia

Saturday, October 8

Metro Detroit Autoimmune Walk,
Belle Isle, Detroit, Michigan

Saturday, November 5

Los Angeles Autoimmune Walk,
Culver City Park, California

Any Time, Any Place

Your Own Virtual Autoimmune Walk

Do we have 25 grassroots leaders?

During AARDA’s 25th anniversary year, we are challenging 25 of our supporters to complete at least one Grassroots Fund Raiser. This event can be as big or as small as you envision it to be.

We recommend that AARDA supporters organize fund raisers around what they love to do. Do you like to draw? Perhaps you could create greeting cards. How are your baking skills? Are you a “collector” who would like to clear out your extra treasures with a yard sale? How about inviting friends to your very own white elephant sale? Do you like to walk? Awesome! Gather your friends and have your own Autoimmune Walk around your neighborhood (and maybe they can pack bag lunches to enjoy after the walk).

Be creative. People get tired of participating in the same types of activities, so be sure to think outside the box.

Use your networks to recruit allies--perhaps social media (Facebook, Twitter, etc.). Be prepared for questions about autoimmunity (we can send you some brochures); awareness is a major part of fund raising.

When you’re ready to get started, please contact Sharon at sharris@aarada.org (or 586-776-3900). Sharon has an AARDA “Grassroots Fundraising Volunteer Leader” cap waiting for you.

The 50 Million with autoimmune disease thank you! #25For25 ■



Company develops tool to assess autoimmune status and therapies

The 2016 Life Science Innovation Northwest exposition, held in June, featured a presentation by CEO Andrew Holman, M.D., in which a new discovery of interest to autoimmune patients was reported. The sponsoring corporation, Inmedix, is a medical diagnostic company combining brain and immunology research to determine treatment outcomes and predictors for rheumatoid arthritis and other autoimmune diseases.

Inmedix has discovered a tool to determine overall patient response based on smaller samples than currently used, which could save an enormous amount of time and resources for certain clinical trial testing. Dr. Holman said that this tool has not only determined treatment outcomes but has shown promise in predicting who will become afflicted with rheumatoid arthritis. The company currently is working on regulatory FDA clearance and additional research in other autoimmune diseases, such as systemic lupus erythematosus and multiple sclerosis.

Dr. Holman and his team have discovered that a little talked-about section of the brain that controls stress and aggravates autoimmune diseases, the autonomic

nervous system (ANS), can be measured via a device the company created, the Inmedix ANS Neuroscan. This 5-minute ECG-based assessment accurately reveals an individual's ANS status to identify those most likely to respond to immunosuppressive therapies. Preferentially enrolling these subjects into new studies potentially can jumpstart the assessment of a promising new treatment.

The ANS Neuroscan testing not only will identify patients most likely to respond to current treatment options and guide clinician decision-making but also will accelerate development of new therapeutics for patients less responsive to currently available options.

Dr. Holman said, "By considering how the brain controls immune function, Inmedix offers a novel opportunity for patients, clinicians, and pharmaceutical companies to diminish the tragic consequences of rheumatoid arthritis and other autoimmune diseases." ■

--Source: "Inmedix to Discuss Breakthrough Fast/Fail Development for Autoimmune Disease Therapeutics at 2016 Life Science Innovation Northwest," via Press Release Rocket, May 21, 2016

Does this interest you?

New fact sheets are now available on AccessBetterCoverage.org that provide an in-depth, state-by-state look at coverage and access in the 2016 exchange plans. From deductibles and cost sharing to prescription drug coverage and formulary data, each fact sheet lays out the specifics for a given state compared to the national average, according to research analyzing 2016 silver health insurance exchange plans. Based on the data and information gathered, the fact sheets also include suggestions for improving exchange coverage in each state. <http://accessbettercoverage.org/numbers#states>. ■

NOW AVAILABLE

The Autoimmune Connection

Second Edition - Revised, Updated -
Rita Baron-Faust & Jill P. Buyon, M.D.

See order form on page 11

Turmeric, not just a tasty, colorful herb

Is turmeric in your cupboard? For many centuries, this herb has been used to make yellow dyes and give food a zing. Now multiple studies, mostly originating in India, Europe, and Australia, show that turmeric, and especially its colorful constituent of curcumin, can help prevent or treat a wide spectrum of cancers, inflammatory conditions, autoimmune problems, neurologic ailments, including Alzheimer's disease, cardiovascular disease, diabetes, and diabetes neuropathy, and other metabolic diseases.

A recent review published in the journal *Molecules* stated that studies to date "suggest that chronic inflammation, oxidative stress, and most chronic diseases are closely linked, and that antioxidant properties of curcumin can play a key role in the prevention and treatment of chronic inflammation diseases."

An M.D. Anderson Cancer Center review of curcumin research, in the journal *Phytotherapy Research*, in 2014, found that it regulated inflammation that "plays a major role in most chronic illnesses, including neurodegenerative, cardiovascular, pulmonary, metabolic, autoimmune, and neoplastic diseases."

Another M.D. Anderson study found that curcumin shows "antioxidant, anti-inflammatory, antiviral, antibacterial, antifungal, and anticancer activities," all bolstering its "potential against various

malignant diseases, diabetes, allergies, arthritis, Alzheimer's disease, and other chronic illnesses."

That being said, there are no guarantees that turmeric or its active ingredient of curcumin will work for everyone. Researchers also caution that they may delay but not prevent or slow down but not stop a medical condition.

Curcumin influences 700 genes, including ones that inhibit activation of the COX 2 gene, which produces an enzyme by the same name that causes pain and inflammation. Curcumin should not be confused with curcumin; they are unrelated.

Joseph Maroon, M.D., noted University of Pittsburgh Medical Center neurosurgeon, uses curcumin supplements as part of his health regimen as an ultra-marathon runner and recommends it to his patients.

While studies have found no notable side effects, possible drug interactions should be discussed with one's physician. ■

--Source: "Turn to turmeric for better health, experts say," David Templeton, *Pittsburgh Post-Gazette*, June 15, 2015; and *Detroit Free Press*, April 10, 2015



What plays a role in development of lupus?

The search continues to discover what is involved in the development of autoimmune disease. Bacteria? Infections? Why does the immune system begin its misdirected assault?

A team of researchers at Temple University School of Medicine, in Pennsylvania, led by Stefania Galluci, M.D., and Cagla Tukul, Ph.D., have shown that bacterial communities known as biofilm play a role in the development of lupus erythematosus. They are hopeful that this discovery may provide important clues about several other autoimmune ailments as well.

The research efforts show how bacterial biofilms found in the gut can provoke the onset of lupus in lupus-prone mice. Biofilm is a densely packed bacterial community that excretes proteins and other substances. Those substances form a protective haven for the bacteria from antimicrobials, the immune system, and other stressors. Biofilms can occur in our guts, among the bacteria that help in digestion. They exist as dental plaque or arise in urinary tract infections. They also can find a home on man-made surfaces, such

as intravenous catheters.

Common to the lupus story is a biofilm protein deposit called an amyloid, in the common gut bacteria *E. coli*, as well as the bacteria often responsible for the severe gastrointestinal distress accompanying food poisoning. *Salmonella Typhimurium* amyloids are called “curli” because of their curly fiber-like appearance. The new research shows that the complexes formed from curli amyloid and DNA in the biofilms of both *Salmonella* and *E. coli* give rise not only to inflammation but also to the self-attacking antibodies of lupus.

It has long been known that infection is associated with lupus flares. In fact, infections play a role in between 20 percent and 55 percent of lupus patient mortality. Up to 23 percent of hospitalizations in lupus patients are due to infectious disease complications. Also, the bacteria *Salmonella*, especially aggressive in lupus patients, have the ability to create potentially lethal complications.

Dr. Galluci says that understanding how biofilms trigger autoimmunity may

ultimately lead to changes in patient treatment, and understanding how the biofilms affect flares could lead to a different treatment approach. “Now they give immune suppressive drugs,” she says. “Maybe you want to do something else, like treat the underlying infection.”

Dr. Tukul comments, “The beneficial bacteria found in our guts can cause problems when they cross the intestinal barrier and reach to places they shouldn’t be. Thus, besides infectious bacteria, a leaky gut could cause many problems.

“We are now starting to understand how the bacteria in our gut may trigger complex human diseases including lupus. So it’s critical for us to understand the biology of the bacterial communities and their interactions with the immune system.” ■

--Source: “*Temple-Led Research Team Finds Bacterial Biofilms May Play a Role in Lupus*,” *Temple University Health System*, July 5, 2015

FDA approves biosimilar Inflectra

In April, the U.S. Food and Drug Administration announced that it had approved Inflectra (infliximab-dyyb) for multiple indications. A biosimilar to Remicade, which was originally licensed in 1998, Inflectra is administered by intravenous infusion. It has been approved and can be prescribed by a health care professional for the treatment of adult patients and pediatric patients (ages six years and older) with moderately to severely active Crohn’s disease who have had inadequate response to conventional therapy and of adult patients with moderately to severely active ulcerative colitis who also have had an inadequate response to conventional therapy.

In addition, a health care professional can prescribe Inflectra for patients with moderately to severely active rheumatoid arthritis in combination with methotrexate, patients with active ankylosing spondylitis (arthritis of the spine), patients with active psoriatic arthritis, and adult patients with chronic severe plaque psoriasis.

A biosimilar product, such as Inflectra, is a biological product that is approved based on a showing that it is highly similar to an already-approved biological product, known as a reference product. The biosimilar also must show that it has no clinically meaningful differences in terms of safety and effectiveness from the reference product. Only minor differences in clinically inactive components are allowable in biosimilar products.

Because of many questions surrounding biologics and biosimilars, the American Autoimmune Related Diseases Association (AARDA) established a “Statement of Principles on Biologic Medicines.” Briefly, these principles are the following:

1. Approval standards for a biosimilar product must meet the same standards of rigor and accountability as those for the innovator biologic.
2. All users (including patients and their healthcare providers) must have access to information that distinguishes the biosimilars from the innovator biologic for appropriate prescribing.
3. Accurate tracking and tracing of biologics must be assured for purposes of monitoring safety and effectiveness.
4. Patients and their physicians must have the final choice on what product a patient receives. ■

--Sources: “*FDA approves Inflectra, a biosimilar to Remicade*,” U.S. Food and Drug Administration, April 5, 2016; “*AARDA Board approves policy statement on biologics*,” *InFocus*, newsletter of the American Autoimmune Related Diseases Association, June 2015

Sjögren's syndrome target of new study

The bad news is that the diagnosis of Sjögren's syndrome may be delayed, or missed entirely because its characteristic symptoms of dry eyes, dry mouth, and reduced tear production are similar to those encountered in other conditions.

The good news is that researchers from the University of Southern California Roski Eye Institute believe that distinct changes in the composition of tears may occur before tear production lessens. They have found a protein, called cathepsin S, that is present only in the tears of patients with Sjögren's syndrome. The researchers link its presence to proteins involved in tear secretion.

Despite the prevalence of Sjögren's disease, which affects an estimated four million people in the U.S., it is not understood how the disease starts and develops. Nine out of ten of those patients are women. No therapies specific to Sjögren's exist, and current treatments only manage the symptoms.

Lead investigator Sarah Hamm-Alvarez, Ph.D., says, "We think that the large increase in tear cathepsin S is a fairly robust

biomarker for Sjögren's syndrome-mediated dry eye." She adds that earlier detection and treatment would offer the potential to prevent some of the serious systemic effects and give the opportunity to prevent serious damage to various organs, including kidney, liver, and brain, and the loss of glandular tissue beyond repair. Attention must also be given to an increased risk of the development of lymphoma.

To help develop better therapies for Sjögren's syndrome, the research team currently is investigating how cathepsin S interacts with the tear production process and the eye surface. The team also is investigating the molecular pathway of Rab3D, another protein involved in the tear secretion process, to find drug targets that can restore tear production. ■

--Sources: "Dry eyes no more: New insight may lead to better detection, treatment of common autoimmune disease," *American Physiological Society via ScienceDaily and Newswise, Inc.*, May 3, 2016

Good news from Quebec about MS

Researchers at the University of Quebec-Laval have found the involvement of a molecule in the development of multiple sclerosis (MS), an autoimmune disease that attacks the central nervous system.

In their study, the team, led by Dr. Steve Lacroix, professor of molecular medicine, focused on one of the mechanisms that characterize multiple sclerosis, the massive influx of immune cells in the brain and spinal cord. The researchers found that the interleukin IL-1 beta molecule was important in the development of brain inflammation and autoimmunity. It was discovered that when this molecule is blocked, the rodents used in the study did not develop multiple sclerosis.

Dr. Lacroix reported that deleting the gene of interest, the famous immune cells that attack the brain, spinal cord, neurons, myelin (a kind of sheath that protects neurons) are unable to enter the central nervous system and cause death and permanent damage to nerve cells. The researchers feel that the discovery of the involvement of interleukin IL-1 beta offers a glimpse of hope and allows treatment options. They indicate that they will not materialize until several years from now, an estimate of five years, when determining whether the molecule also has beneficial effects that should be considered to be blocked in a possible treatment.

A statement issued by Radio Canada International indicated that MS is considered a Canadian disease because in Canada the prevalence rate is the highest in the world.

According to the Multiple Sclerosis Society Quebec Division, more than 100,000 people in Canada are living with autoimmune disease of the central nervous system. Louis Adam, Executive Director of the organization, indicates that there is something in the environment that causes the greatest number of cases of MS to be registered in Canada. ■

--Source: "Promising Discovery for Multiple Sclerosis," *Science News Hub*, May 23, 2016

European consortium studies autoimmune diseases

The European Commission is funding a new project to be devoted to research of chronic autoimmune diseases and the development of individualized therapies for autoimmune disease patients. Called "RELENT" (RELapses prevENT), the international project is coordinated by Professor Dr. Renate Kain, Department of Pathology, Med Uni, Vienna, Austria.

The consortium plans to research mechanisms common in certain autoimmune diseases which are responsible for the persistence and life-threatening developments of these diseases. They intend to utilize the results of the study for clinical application as soon as possible. The RELENT consortium will analyze jointly data from a variety of measurements (clinical, serological, genetic, transcriptome) and thus

develop new biomarkers for the autoimmune diseases being studied.

Prof. Kain says, "There is currently no means to distinguish at the outset those patients who will suffer from frequent relapses and, therefore, need intensive early treatment from those who do not." She adds, "Titration of the use of immunosuppression to the disease activity and developing novel treatment strategies consequently requires the application of precision medicine to autoimmunity--a concept already established in cancer treatment."

Nearly six million Euros have been awarded to the RELENT consortium for the next four and a half years. ■

--Source: Excerpted from "EU Project Aims to Improve Diagnostics and Intervention Strategies," *Vasculitis Foundation*, May/June 2016

~ EDITOR'S NOTE ~

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To our readers: Autoimmune diseases are conditions in which the body's own immune system can (among other things) cause damage to the skin, joints, and internal organs. Although most autoimmune diseases are not yet preventable or curable, most can be controlled to varying degrees. It is because of the wide variance and severity that **the individualization of medical management** is so important. It is vital that persons diagnosed with (or suspected of having) an autoimmune disease consult with their physician or with the appropriate division at a major teaching hospital to assure proper evaluation, treatment, and interpretation of information contained in this newsletter. Opinions expressed in this newsletter do not necessarily reflect the views of the American Autoimmune Related Diseases Association or its Scientific Advisory Board.



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