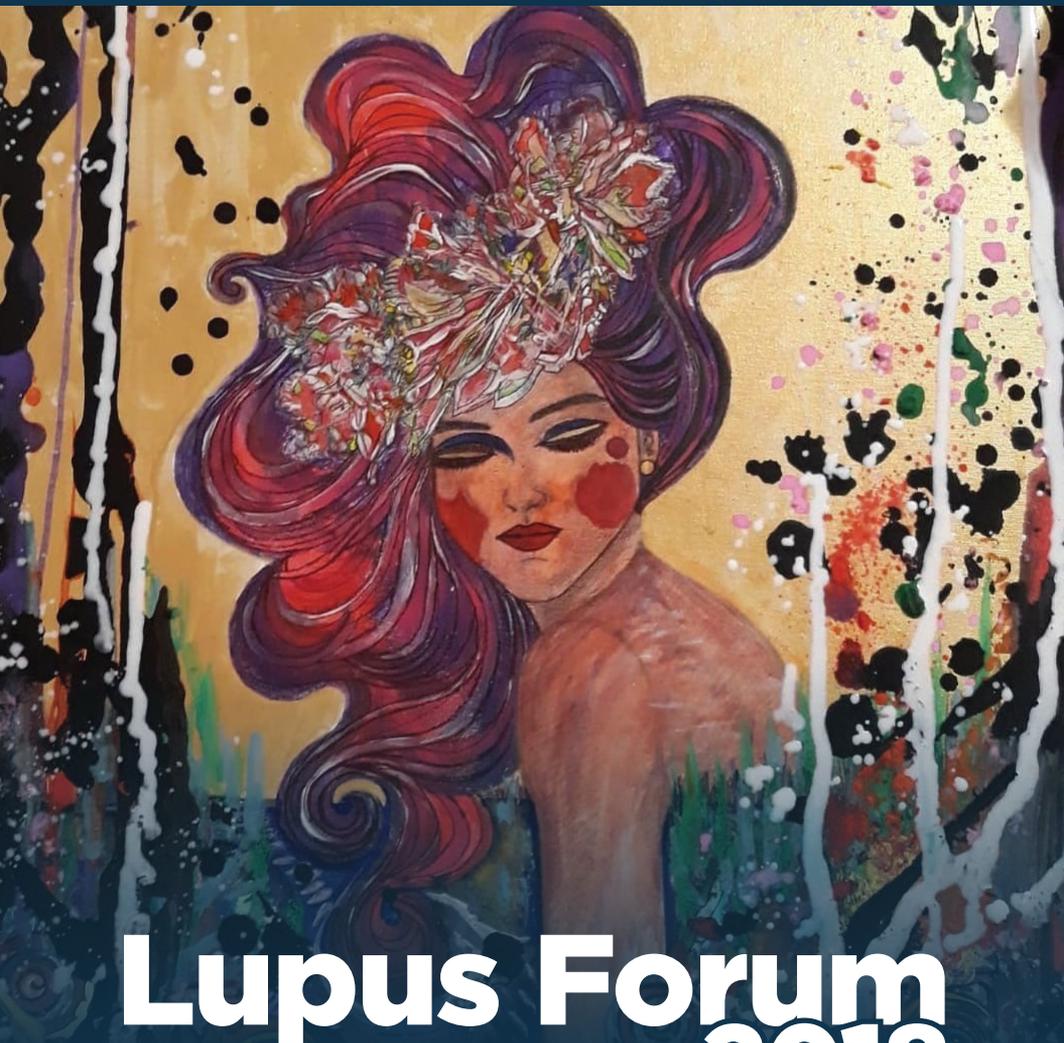




**ROSEMARIE K. WITTER
FOUNDATION**

WHITE ROSES FOR A LUPUS CURE



**Lupus Forum
2018**

www.rkwfoundation.org



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Our Mission

The Rosemarie K. Witter Foundation is a 501(c)(3) not-for-profit organization dedicated to promoting medical research in finding effective treatment, leading to a cure for Lupus. As a sponsor of the Rose Garden Scholarship Fund, your donation helps the foundation award scholarships to women afflicted with Lupus, who are pursuing a college degree in the areas of engineering, science, mathematics, medicine or law, thus assisting them financially to pursue their education.



**ROSEMARIE K. WITTER
FOUNDATION**

WHITE ROSES FOR A LUPUS CURE

*G*reetings, on behalf of the Rosemarie K. Witter Foundation Inc., we would like to extend our sincere gratitude for your support towards our commitment to finding effective medical treatment for Lupus and ultimately a cure, while offering scholarship opportunities to young women.

The RKKW Foundation is unique as we are small, however committed and determined. We are exposed to Lupus up close and personal. In 2002, my sister Rosemarie Karenza Witter lost the battle to this dreadful disease at the young age of thirty-seven, in the prime of her life, an intellectual, mechanical engineer, with hopes of attending law school. Rosemarie - affectionately known as "Rosie"- was a humanitarian who truly cared about her fellow man.

The vision to launch this foundation came to me immediately after Rosie's passing, however it took 10 years to finally move forward. On July of 2012, the Rosemarie K. Witter Foundation Inc. debuted as a nonprofit organization and was awarded the 501(c)(3) exempt status. Our mission is: to raise significant funds to partner with research scientist, sharing some of our observations about patterns, in particularly people with Systemic Lupus Erythematosus (SLE) (an autoimmune disease), in which the body's immune system mistakenly attacks healthy tissue. In addition, a portion of the funds raised, will assist women in college suffering from this disease, with a scholarship, who are studying in the areas of medicine, science, mathematics and law.

In 2011, BENLYSTA was and is the first and only drug approved to treat lupus in more than 50 years. This medicine is the first drug developed specifically for Lupus since the disease was discovered more than a century ago. Currently approved medications for Lupus are borrowed from other diseases and conditions.

To date there is no cure for Lupus, the goal of treatment is to control symptoms. In conjunction with your support; the RKW Foundation Inc. will continue to utilize various disciplinary approaches in our quest to finding effective treatment and ultimately a cure, by advocating for corporate investments (public & private) to fund our cause in pursuit of a scientific breakthrough.

On behalf of the RKW Foundation, we would like to extend our appreciation and sincere thanks for your participation in this charity event. We are grateful for your generosity in allowing us to bring awareness to the destructive disease Lupus.

We would like to express sincere appreciation to all our Sponsors; your commitment allows our team to focus and work towards the mission.

Once again, thank you all for your committed support. I look forward to sharing some great news in the near future!

*Sincerely,
Marcia Witter-Williams, Chairperson*



Meet **THE BOARD**

The Rosemarie K. Witter Foundation is led by a dynamic group of dedicated professionals who are passionate about pushing the conversation around Lupus forward, and finding a cure.

MARCIA WITTER-WILLIAMS President



Founder, Marcia serves as the Director of the Marketing & Communication Committee as well as the Chair of the Executive Committee. Her professional background is Mortgage Banking. Marcia is currently employed as an executive in the banking industry; in addition she is a Notary Public and participates in her local church as a member of the Session Board. Marcia's eclectic background encompasses Art & Design, Paralegal Studies and Mortgage Banking. Educational background consists of degrees in Fashion Design - F.I.T. (SUNY), Communication from the College of New Rochelle, Paralegal Certificate and currently pursuing an Executive MBA at Hofstra University.

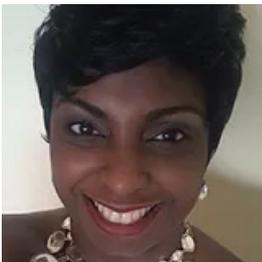


SANTO CIPOLLA Vice President



Santo serves on the Public Relations Committee. He has a background in Communications and works as a litigation paralegal for a major New York City law firm. In addition to working on the Rosemarie K. Witter Foundation, he has been a member of the Queens College Paralegal Studies program for the past 26 years as well as a member of the New Hyde Park Zoning Board of Appeals for the past 20 years.

MALIYA CHERELUS Director



Maliya chairs the Development committee and oversees Event Planning. She has over 25 years experience in banking, as well as 10 years experience in radio broadcasting. Maliya's community involvement extends to other charitable organizations and service projects. She works as a loan servicing officer in a New York-based financial institution.



LORRAINE ALLYSO-GOVAN Director

Lorraine is a native of South Africa, and is a founding director of the Rosemarie K. Witter Foundation. She chairs the Educational Advisory committee. Lorraine's professional background is Social Work, and she has more than 15 years experience in her profession. She holds a degree in Counseling Psychology from the College of New Rochelle.



CHARLENE QUASHIE Secretary

Charlene has been a Lupus survivor for 22 years, and is an entrepreneur in both the Health & Fitness industries as well as Online Marketing. Her professional background includes working as a Legal Secretary, and she is currently the owner of Charlene Quashie Enterprises, LLC. She holds a Bachelor of Science degree in Business Administration.



MARIA MASI Treasurer

Maria has been in the Financial Services Industry for 30 years most of which has been devoted to banking. She holds a Bachelors degree in finance from Hofstra University. Maria has a family member who is a 25 year lupus survivor.



Living with Lupus **BECAUSE I WANT TO LIVE**

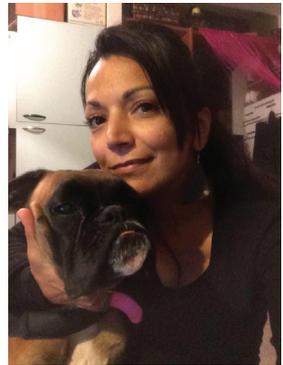


My name is Loredana Maliziola and I was born on June 27, 1973, in a small town in Lazio, Italy called Ceccano. Today I work as a nurse in the psychiatric field, a job which I love and do with great passion.

As a child, I was always in good health. At the age of 15 I suddenly became ill and, in fact, did not even realize I had a disease. A team of doctors in Rome referred to me as a “strange case” and even suspected it was leukemia. For one year I was given

high doses of cortisone (deltacortene strong 100mg per day) which caused the marrow to reproduce so the leukemia had been resolved.

As an emotional 15 year old with a “strange” disease, it surely was not a happy time for me, and of course, in school, my fellow students would tease me. Why? Well the cortisone that the doctors were giving me was causing swelling, weight gain due to an increased appetite, water retention, increased blood sugar levels and I’m sure other side effects. With all that, they ensured me there are many benefits to the course of treatment, when in actuality there were far more problems associated with this especially high dosage remedy they were prescribing to me. The most obvious symptom was petechia, small red or purple spots on my skin caused by bleeding from broken capillary blood vessels, scattered all over my the body and looked almost like bruises. These spots were so bad that my mother thought that someone must have been hurting or beating me. After that torturous period cortisone treatments, the disease lay dormant in my body, not diagnosed and remained latent for 13 years.



At the age of 28, there was a short a period of my life in which I had happiness, but the thought my illness returning was always like a dark cloud on the horizon. At this time, I finally would have my dream come true. I was married and going to have the family I desperately wanted. I was awaiting the birth of my child – a son that we would name Alessio. Unfortunately, during the pregnancy, I developed five thromboses

despite the anticoagulant therapy I was on (I had used warfarin for years). Sadly, the thrombosis had had attached itself to the placenta and affected my son by impeding his breathing. Throughout the pregnancy, we were all aware of the risks and many doctors closely monitored me. Unfortunately, it was not enough for both of us. My son did not survive the pregnancy, and I would find myself in intensive care again fighting for my life. They had uncovered that the cause of the death of my son was my Lupus illness.

Today we know the symptoms and difficulties of the disease, which I have also suffered from, include:

- Persistent exhaustion and weariness
- Photophobia – sensitivity to light/sun
- Irritability
- Renal/Kidney issues and diseases – Glomerulonefrite
- Anemia
- Calcium deficiency
- Circulatory problems
- Blood Pressure issues
- Severe joint pain
- Low-grade fevers
- Persistent Headache
- Chills
- Dry mucous membranes
- Chest pains and coughs – Pleurisy

To this day, I continue my therapy sessions and take a variety of medications including an immune suppressant, which includes anti-rejection drugs used in transplant patients.

Now, at 45 years old, I am fine, mostly because I want to live my life! In the past 10 years I feel blessed, even with this illness. My passions now consist of painting portraits of women and taking in puppies for which I find homes. My puppies are my family, they help me feel better and they are there for me, always keeping me company no matter how I'm feeling. My message to all my fellow Lupus sufferers and friends is to remember to love life and appreciate everything that life has to offer. We are a gift and because of our conviction, tomorrow will always be one more day better for us.



A special thanks to Loredana for allowing us to use one of her paintings for the cover.



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Living With **LUPUS**



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About **ROSEMARIE K. WITTER**



Rosemarie K. Witter was born in Kingston, Jamaica, and grew up in New York City. She earned a degree in Mechanical Engineering, and aspired to study for a law degree. In 2002, her life was cut short by Lupus before she even got a chance to pursue her life's dream. Affectionately known as Rosie, she was a loving and caring individual, and a humanitarian who was passionate about the causes in which she believed.

Had she lived, Rosemarie would have dedicated her life to finding a cure for Lupus and supporting research to identify new therapies. Her family and friends are committed to carrying the torch, and are honored to continue her legacy.





Eva Thomas is the CEO/Founder of ONI-BODI Wellness Beautique a beauty, health and wellness company.

Eva is a Licensed Medical Massage Therapist, Esthetician, Health Science Instructor, Holistic Health Educator, Medicinal/Herbal Tea Consultant, and Philanthropist. She is experienced in providing massage therapy for many clients with diseases and disorders such as parkinson, cervical dystonia, herniated discs, scoliosis, arthritis, osteoporosis, thyroid, multiple sclerosis, fibromyalgia, sickle cell and more.

Eva believes the Holistic Approach to wellness is important because, it is treating the mind, body, and spirit as a "whole" not just the symptoms of a medical condition.

You may also connect with Eva via facebook or instagram at onibodiwellnessbeautique or twitter at HolisticLife7 and www.oni-bodi.com.



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ROSEMARIE K. WITTER FOUNDATION

White Roses for a Lupus Cure

RKW Lupus Research Forum

YOUR STORY MATTERS!

If you are an individual currently living with Lupus or lost a love one to this dreadful disease, then we invite you to join a growing community of empowered survivors, contributing their knowledge and experiences through the RKW Lupus Research Forum. By joining this community, you will bolster the amazing Lupus research of today and provide hope for tomorrow.

You will also have the opportunity to ask questions and get the latest news on the development of treatment for Lupus.

Share your story by completing the anonymous and confidential questionnaire found at the www.rkwfoundation.org website and select the "Research Forum" tab-then select "share your story".

Meet our Distinguished Lupus Research Scientist:

Dr. Barbara J. Vilen

Sat, Nov 17

10:00 AM – 2:00 PM

Landmark Building -St. Mark's Church, 131 E 10th St, New York, NY 10003

Completed questionnaire is required to participate in this event

***Please contact the RKW Team at
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RKW Lupus Forum **SCHEDULE OF EVENTS**

MORNING



10:00 a.m. Registration

10:45 a.m. RKW Welcome: Santo Cipolla
Introduction of Panel and Board Members

11:00 a.m. ONI-BODI: Eva Thomas, CEO/Founder
www.oni-bodi.com

11:30 a.m. Wellcare

AFTERNOON

12:00 p.m. Dr. Vilen, PHD
Microbiology and Immunology, University of
North Carolina at Chapel Hill, Chapel Hill, NC

12:45 p.m. Charla De Lupus (Lupus Support Group)
www.hss.edy/CharladeLupus.asp

1:10 p.m. Lupus Survivor Stories

1:25 p.m. Marina Ovanesyan: RKW Scholarship Recipient

1:45 p.m. Closing Remarks: Marcia Witter-Williams



FOCUS ON LUPUS **BARBARA J. VILEN, PHD**



The goals of my research are to elucidate the mechanisms that regulate B cell responses to self- and foreign-antigen, and to identify how these mechanisms are dysregulated in autoimmunity and host-pathogen responses. My experience studying MHC class II gene expression with Dr. Jenny Ting, and B cell signal transduction with Dr. John Cambier, provided a broad immunology background for studies aimed at achieving these goals. Our recent studies reveal that lupus-prone (MRL/lpr) macrophages harbor defects in lysosomal acidification,

diminishing degradation and promoting the recycling of FcγR-bound IgG-ICs back to the cell surface. Chronic FcγR activation from recycled ICs promotes autoantibody and BAFF secretion, and prolongs intracellular residency of ICs due to their lack of degradation. This induces phagosomes to leak apoptotic antigens and IgG into the cytosol activating AIM2 and TRIM21. Our future goals are to define the upstream events that fail to regulate FcγRI signal transduction and to characterize the events that disrupt lysosome acidification. My experience in studying murine SLE, my background in signal transduction, the established clinical collaboration, creates a strong team, which make us well-suited to carry out future projects.

Barbara J. Vilen is an Associate Professor at the University of North Carolina at Chapel Hill in the Microbiology & Immunology Department.



POSITIONS AND HONORS

Position and Employment

1984-1986	Research Technician-University of Minnesota, Department of Medicine/Hematology, Minneapolis, MN, Laboratory of Phil McGlave MD
1986-1987	Research Technician-Mayo Clinic, Department of Immunology, Rochester, MN, Laboratory of Paul Leibson MD/PhD
1987-1993	Graduate Student-University of North Carolina-Chapel Hill, Chapel Hill, NC Thesis Advisor: Jenny Ting PhD
1994-2000	Postdoctoral fellow-National Jewish Research Center, Denver, CO, Post-doc Mentor: John Cambier PhD
2001-2007	Assistant Professor-Department of Microbiology and Immunology, University of North Carolina, Chapel Hill, NC
2008-present	Associate Professor-Department of Microbiology and Immunology, University of North Carolina, Chapel Hill, NC

Honors and Professional Memberships

1992	Lineberger Predoctoral Fellowship Award
1994	NRSA Postdoctoral Fellowship
1995	Leukemia Society Fellow Award
2000	NIAID Research Scholar Development Award
2008	Arthritis Foundation J.V. Satterfield Research Award
2009-2012	Associate Editor, Journal of Immunology
2012-2015	AAI Program Committee

Contributions to Science

Overview: Our studies focus on B cell innate and adaptive immune responses during immunity and autoimmunity. We elucidated several mechanisms of B cell tolerance and identified how these mechanisms are overcome in murine systemic lupus erythematosus with ongoing studies assessing defects in human disease.

1. During my post-doc and the first years as an assistant professor my research focused on mechanisms of B cell tolerance involving the B cell antigen receptor (BCR). These studies identified that one mechanism of BCR desensitization resulted from dissociation of the Ig- α /Ig- β signal transducing complex from μ -heavy chain.

Subsequent co-aggregation of receptors lacking Ig-a/Ig-b with signal competent receptors attenuated BCR-mediated signaling. Mechanistically, we found that unshoothing of mu-heavy chain was required for clathrin-mediated endocytosis and delivery of antigen to the lysosome for antigen processing/presentation.

2. After my post-doc, my interest in tolerance extended to how autoreactive B cells were regulated during innate immune responses. Although TLR4 activation was known as a polyclonal activator of B cells, it remained unclear how autoreactive B cells maintained unresponsive during TLR4 stimulation since TLR4 is expressed on autoreactive and naïve cells. We found that concurrent TLR4 stimulation of dendritic cells and macrophages induced the secretion of IL-6 and soluble CD40L, which selectively repressed Ig secretion by autoreactive B cells. Mechanistically, chronic BCR signaling limited nuclear translocation of phospho-ERK. Thus, autoreactive B cells remain anergic because of receptor cross-talk between chronic BCR signaling and IL-6 receptor/CD40 signaling to regulate Ig secretion by TLR4. Current studies of B cell tolerance during innate immune activation focus on NLRC3, and its potential role as a negative regulator of Ig secretion upon innate stimulation of autoreactive B cells.
3. B cell memory is an important aspect of humoral immunity and autoreactive memory cells play a role in perpetuating autoimmune response. Our studies of B cell memory responses during immune activation to foreign antigens and pathogens identified that BAFF secretion, elicited by productive antigen-antibody immune complexes, is a key cytokine involved in upregulating Bcl-6 expression in activated T and B cells. We hypothesized that the lack of long-lasting protection following *Staphylococcus aureus* infection is disrupted because Protein A inhibits binding of immune complexes to FcγRs. Instead we found that memory responses formed; however, *S. aureus* Protein A disrupted formation of long-lived plasma cells subsequently leading to a decline in *S. aureus*-specific antibody. This occurred by expanding the short-lived extrafollicular B cell response, and limiting the proliferation of B cells that arrive in the bone marrow but fail to establish in long-lived bone marrow niches.
4. Published work shows that apoptotic debris accumulates on the surface of murine and human hematopoietic cells in SLE. On myeloid cells this represents IgG-immune complexes that promote heightened BAFF secretion, autoantibody, migration of

cells to the kidney and renal disease (SLE phenotypes). Reducing BAFF to levels found in normal mice protects glomeruli from T cell infiltration and prevents renal disease. Mechanistically we find that the accumulation of ICs results from diminished acidification of the lysosome impairing degradation and promoting the recycling of FcγR-bound ICs back to the cell membrane where they accumulate and sustain FcγRI signal transduction. The prolonged intracellular residency of nucleic acid and IgG from internalized IgG-ICs leads to TLR activation and causes the phagosome to leak cargo into the cytosol, promoting activation of AIM2 and TRIM21. Mechanistically, chronic mTOR activation is central to lysosome dysfunction, and mislocalization of mTOR within MRL/lpr macrophages dysregulates caspase1/11 impeding caspase 1 activation and cleavage of Rab39a, a key event in lysosomal maturation. Our current work focuses on defining whether targeting defects in lysosomal acidification through crosslinking FcγRI with FcγRIIb is a possible lupus therapy aimed at attenuating the lysosome defect and chronic FcγRI activation. As part of that goal, we are defining whether human SLE has a similar underlying lysosome defect that might be amenable to a similar targeting strategy and lastly, we are defining how nuclear antigens accumulate on lymphoid cells.





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Hospital for Special Surgery's Charla de Lupus (Lupus Chat)® is a unique national program providing support and education to people with lupus and their loved ones with a focus on diverse communities. Ongoing since 1994, the Charla program provides comprehensive bilingual services which include: the Charla Line, a national telephonic support and education helpline; in-person peer support at four hospital-based rheumatology clinics around New York City, monthly Charla Teen, Young Adult and Parent support Groups and participates in numerous community events and educational presentations to spread lupus awareness.

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GET IN THE **LOOP**

-Raising Awareness for Lupus

Looking back, the first observance for lupus awareness happened back in 1977. The president at the time, Jimmy Carter, signed Public Law 95-72 declaring a week long national lupus observance. This first observance occurred in September, but over the years it was moved to October and lengthened. Then in 2009, the Lupus Foundation of America had the annual Lupus Awareness Month moved to May. The month of May held many more opportunities to promote lupus awareness, so the decision to make the final change was not too difficult. You can also check out the full story on the major Lupus Organizations in America.

Then of course there is World Lupus Day, which takes place on May 10th. This serves as an excellent opportunity for lupus organizations around the world to collaborate and raise awareness. Traditionally people will wear purple or sport a purple ribbon during the month to show support for lupus. The national symbol for lupus is the butterfly. This is representative of one of the more common symptoms of lupus, the butterfly rash, while also representing hope for lupus patients. There is another symbol that is widely used for lupus as well, and that would be the wolf. In Latin, the word "lupus" literally means "wolf". Due to the Latin translation, the wolf has served as an effective symbol for lupus awareness.

WHAT IS LUPUS?

Research has shown that a majority of Americans don't know much about lupus, if anything at all. This is a debilitating disease which claims lives and remains unpredictable, so there is a lot of effort being put into spreading further awareness. Globally, it is estimated that 5 million people are affected by some form of lupus. Shockingly, research has shown that women have been diagnosed with lupus in 90% of all cases! A majority of these women get diagnosed between the ages of 15 to 45 years of age. For most cases of lupus, the doctor makes the diagnosis based on a number of physical symptoms and the results of lab tests. So, the American College of Rheumatology developed a list of criteria which could be used to help diagnose lupus.

TYPES OF LUPUS

Systemic Lupus Erythematosus (SLE): This is the most common

form of lupus making up for around 70% of all cases. SLE ranges in severity, but the severe cases of SLE are as bad as they get. This form of lupus can affect the skin, mouth, kidneys, brain, lungs, and heart. Common symptoms of this disease include fatigue, photosensitivity, swollen joints, mysterious fever, skin rashes, hair loss, and kidney issue.

Cutaneous Lupus Erythematosus (CLE): The word “cutaneous” actually means skin, and CLE tends to primarily affect the skin. This particular condition can cause inflammation and sores which will appear over the the face, ears, scalp, and other areas of the body.

Drug-induced Lupus Erythematosus: This condition is similar to SLE except for one major difference. This type of lupus is the result of a hypersensitive reaction to a medication. Research has shown that Isoniazid, hydralazine, and procainamide are some of the more common medications that have been known to cause drug-induced lupus.

Neonatal Lupus Erythematosus: This is a rare form of lupus which can occur in infants that are born to mothers with lupus. While in the womb, the infant is attacked by the mother’s antibodies. At birth, these infants show some of the symptoms of lupus. These symptoms eventually disappear completely, but some of these infants can develop a rare heart defect.

AVAILABLE TREATMENTS FOR LUPUS

Currently, the treatments that will be prescribed to lupus patients based on the symptoms that they are experiencing. Unfortunately, there is still no cure for lupus. Patients hope to control their symptoms with medication so that they can live a better quality of life. The exact drug prescribed to the lupus patient may change during the course of treatment based on how the disease is reacting. The National Lupus Awareness Month info-graphic lists some of the treatments that are currently being used to treat lupus patients. It is very important that doctor and patient collaborate often to make sure that the treatment plan is working effectively. In some cases, other drugs are needed to treat other conditions like hypertension, which can be linked to lupus. There are some possible side effects related to taking these medications, so do not hesitate to inform your doctor if any should occur.

THE FACES OF LUPUS

This chronic autoimmune disease has affected millions of lives, and there have been a few public figures to come forward with their diagnosis. Music icons like Nick Cannon and Michael Jackson were diagnosed with lupus. In fact, George H.W. Bush's dog Millie may have become the most famous animal with the disease after her diagnosis. These public figures have embraced their disease, and now they work to raise awareness around the world.

CELEBRITIES AFFECTED BY LUPUS



MICHAEL JACKSON

The King of Pop was diagnosed with Lupus in 1986.



SEAL

The singer's famous scars on his face are the result of a childhood bout with discoid lupus.



NICK CANNON

In March of 2012, he announced that he had Lupus Nephritis.



LADY GAGA

In 2010, the performer tested borderline positive for Lupus.



TIM RAINES

This baseball hall of fame candidate was diagnosed with Lupus in 1999.



MILLIE

George H.W. Bush's Springer spaniel is the most famous dog with lupus.

LUPUS ORGANIZATIONS



LUPUS FOUNDATION OF AMERICA (LFA)

Founded in 1977, this is the largest and oldest lupus organization in America. They were the driving force behind the establishment of a National Lupus Awareness Month.



Alliance for Lupus Research
PREVENT. TREAT. CURE.

ALLIANCE FOR LUPUS RESEARCH

This organization was founded in New York right before the turn of the millennium. In their relatively short history, ALR has been able to provide more funding than any other non-governmental agency worldwide for lupus research.



Lupus Research Institute
SINCE 1990

LUPUS RESEARCH INSTITUTE

This National non-profit organization is dedicated to funding brand new lupus research. Their ideology is that the best lupus treatments will only be found through pursuing innovative research.



S.L.E. LUPUS FOUNDATION

The members of this national lupus Organization have devoted themselves to helping lupus patients and their families live a better quality of life. They help thousands of families deal with the day to day complications of life with lupus.

For anyone who might be interested in learning more about the observance of World Lupus Day, please visit www.worldlupusday.org

SOURCES

http://cure4lupus.org/store/index.php?main_page=page&id=153&chapter=2
<http://www.ktul.com/story/18118391/the-state-senate-backs-the-fight-against-lupus>
<http://www.nlm.nih.gov/medlineplus/ency/article/000435.htm>
<http://emedicine.medscape.com/article/1065529-overview>

http://cure4lupus.org/store/index.php?main_page=page&id=148&chapter=2
<http://www.sciencedaily.com/releases/2012/04/120402162555.htm>
<http://www.lupusresearchinstitute.org/news/discoveries/11/11/06/lupus-making-headlines-indicates-new-level-promise%E2%80%A6and-hope>

MAY is NATIONAL LUPUS AWARENESS MONTH



THE BUTTERFLY
symbol for the butterfly rash

SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

MAY 10TH IS WORLD LUPUS DAY



THE WOLF
the word "lupus" in latin means "wolf"

WHAT IS LUPUS?

TYPES

SYSTEMIC LUPUS ERYTHEMATOSUS (SLE):

Most serious form of lupus, which can affect the skin, mouth, kidneys, brain, lungs, and heart. Underlying cause of this disease is still unknown. The highest incidence of SLE is observed in women ages 20 – 40.

CUTANEOUS LUPUS ERYTHEMATOSUS:

This type of lupus primarily affects the skin. This condition causes inflammation and sores around the face, ears, scalp, and other areas of the body.

DRUG-INDUCED LUPUS ERYTHEMATOSUS:

This form of lupus is similar to SLE. Patients develop this condition due to a hypersensitivity reaction to medication. Isoniazid, hydralazine, and procainamide are some of the medications which have been known to cause drug-induced lupus.

NEONATAL LUPUS ERYTHEMATOSUS:

This is a rare form of Lupus which can occur in infants born to mothers who have SLE. These infants show symptoms of lupus at birth, because they are affected by their mother's antibodies in the womb.

DEMOGRAPHICS & STATS

1.5MM { Americans affected by Lupus }

5.0MM { People affected globally by Lupus }



{ About 90% of Lupus cases are diagnosed in women. }



{ 80% of those with Systemic Lupus developed the disease between the ages of 15 to 45 }



{ 70% of lupus cases – systemic or (SLE). }



{ In 20% of lupus patients, a close family member (parent/sibling) has, or will develop, lupus. }

SYMPTOMS

AMERICAN COLLEGE OF RHEUMATOLOGY'S CRITERIA USED TO DIAGNOSE LUPUS:

- Malar Rash
- Discoid rash
- Photosensitivity
- Oral ulcers
- Arthritis
- Serositis
- Kidney Disorder
- Seizures
- Psychosis
- Blood Disorder
- Immunologic Disorder
- Abnormal antinuclear antibody

A Special THANKS

The Rosemarie K. Witter Foundation would like to send a special thanks to the following contributors of today's event.



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Thank you for your very generous donation!

Dear Steven,

We want to express our deepest thanks for your recent donation to Rosemarie K Witter Foundation. Generous gifts from donors like you provide the financial and moral support needed to continue our mission. With your faithful contribution of your time in creating the Lupus Research journal, you have demonstrated your deep commitment to our work of raising funds for Lupus medical research.

Your support has played a key role in our success in helping utilize funds for the Research Forum by creating the 2018 journal. There is no way to fully express our gratitude for your loyalty. We at Rosemarie K Witter Foundation are continually inspired by the dedication and generosity of donors like yourself who answer the call to give again and again.

We look forward to a continuing the partnership with you.

Sincerely,

RKW Foundation Board Members



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Monday & Wednesday
Tuesday, Thursday-Saturday
Sunday

10:00 a.m - 7:30 p.m.
10:00 a.m - 6:00 p.m.
Closed