



*Building awareness, empowering patients
and improving outcomes.*



Faster diagnosis, better care, healthier outcomes.

The Preeclampsia Foundation is a 501(c)(3) non-profit organization whose mission is to reduce maternal and infant illness and death due to preeclampsia. It is dedicated to funding innovative research, raising public awareness, and providing support and education for those whose lives have been touched by preeclampsia and other hypertensive disorders of pregnancy.



In the U.S., 25% of all cases of preeclampsia are categorized as severe.

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A Milestone Year

2007 was a milestone year for the Preeclampsia Foundation! Due largely to the fiscal conservatism exercised over the last two reporting periods, we were able to hire our first experienced executive director. With professional leadership, we initiated several ambitious mission-oriented programs aimed largely at educating and empowering the at-risk population. While these programs were not implemented during this reporting period, much of the preliminary work was done and we anticipate finalizing these programs and reporting on their successes during subsequent reporting periods. Our slate of new programs includes a low health-literacy project aimed at populations largely ignored by mainstream outlets, an educational DVD designed to encourage women to learn more about preeclampsia, a brochure highlighting the link between preeclampsia and cardiovascular disease, and a ramped-up distribution campaign for our informational brochures – all programs that we feel are critical to furthering the Foundation’s important mission.

Operationally, we continued to build on the successes of our two primary fundraisers – the annual Mother’s Day weekend awareness walks and the annual Saving Grace: A Night of Hope benefit dinner, held this year in Boston, MA. We reinstated our Vision Grant program – intended to provide initial funding for innovative ideas which might otherwise not be pursued due to lack of funding – and awarded two \$25,000

grants to young, talented researchers. In addition to encouraging preeclampsia-related research through the award of our Vision Grants, we contributed funds towards the purchase of equipment used in an India-based preeclampsia study sponsored in part by the World Health Organization.

We continued to develop relationships with corporate supporters and remain encouraged and optimistic by the commitment to preeclampsia-related research and development shown by key biotech and pharmaceutical companies. Lastly, our virtual “storefront” – www.preeclampsia.org – continues to flourish. Our forum moderators continued their triage role for site visitors seeking information about preeclampsia, and I am proud to report that, in several instances, our moderators received responses from grateful forum posters thanking them and attributing the birth of a healthy baby to information and encouragement received on our forums.

Despite the success of the Foundation, we must not forget the families for whom we continue to push. Throughout the world, an estimated 76,000 woman and 500,000 babies die annually from preeclampsia and other hypertensive disorders of pregnancy. It is for them – for all of us – that we must continue to advocate and educate about preeclampsia.



Your ongoing support is critical to our mission:
stopping the senseless deaths caused by preeclampsia.

Thank you for your continued support,

Leslie Weeks

What is preeclampsia?

PREECLAMPSIA IS A DISORDER THAT OCCURS ONLY DURING PREGNANCY AND THE POSTPARTUM PERIOD, AND AFFECTS BOTH THE MOTHER AND THE UNBORN BABY.

Affecting at least 5-8% of all pregnancies, it is a rapidly progressive condition characterized by high blood pressure and the presence of protein in the urine. Swelling, sudden weight gain, headaches and changes in vision are important symptoms; however, some women with rapidly advancing disease report few symptoms.

Typically, preeclampsia occurs after 20 weeks gestation (in the late 2nd or 3rd trimesters or middle to late pregnancy), though it can occur earlier. Proper prenatal care is essential to diagnose and manage preeclampsia (sometimes called by its old name, toxemia). Pregnancy Induced Hypertension, HELLP Syndrome, and eclampsia are other manifestations of the syndrome. It is important to note that research shows that more women die from preeclampsia than eclampsia and one is not necessarily more serious than the other.

Preeclampsia and other hypertensive disorders of pregnancy are a leading global cause of maternal and infant illness and death. By conservative estimates, these disorders are responsible for 76,000 maternal and 500,000 infant deaths each year worldwide.



Preeclampsia consistently ranks as one of the top three causes of maternal mortality.



Our Vision

THROUGH RESEARCH, PUBLIC AWARENESS, PROFESSIONAL AND PATIENT EDUCATION AND SUPPORT, THE PREECLAMPSIA FOUNDATION IS DEDICATED TO REDUCING MATERNAL AND INFANT ILLNESS AND DEATH.

RESEARCH – VISION GRANTS

In FY07, the Preeclampsia Foundation resumed its Vision Grant Program by awarding two grants:

- Frauke von Versen-Hoeynck, Dr. med., M.D., Magee Women's Research Institute and Foundation, Pittsburgh, PA

“The role of the hypoxia-inducible signal adenosine in placental amino acid transport”

Changes during the development of the placenta, the tissue that delivers oxygen and nutrients to the baby, can lead to reduced growth of the baby or the development of preeclampsia. The transport of amino acids, nutrients necessary for the production of protein, from the mother to the baby is very important for baby's growth. Reduced oxygen concentrations and the production of several factors such as adenosine might influence the transport of amino acids. The focus of this research is to investigate the role of adenosine in the transport of amino acids in the placenta.

- Francesca Facco, M.D., Northwestern University, Chicago, IL

“Sleep-disordered breathing during pregnancy: relationship with preeclampsia”

Studies have shown that abnormalities in placental blood flow can lead to preeclampsia. Individuals who suffer from certain sleeping disorders, like obstructive sleep apnea, experience transient episodes where they stop breathing and have less oxygen in their blood. During pregnancy we believe that these symptoms can lead to abnormal blood flow and oxygenation of the placenta, which in turn could lead to preeclampsia. The research will study the relationship between abnormal respiration during sleep and preeclampsia.



PUBLIC AWARENESS & EDUCATION

The Preeclampsia Foundation has always been of the opinion that an educated woman is a prepared woman. The more women are aware of the signs and symptoms of the disorder, the more women can be proactive and seek qualified care.

In 2007 the Foundation continued its brochure campaign aimed at putting accurate information about preeclampsia into the hands of every pregnant woman. For women who have already been diagnosed with the illness, this information will help them know what to expect and empower them to ask more questions. For others, this information will help them understand that preeclampsia exists and educate them on the warning signs and symptoms. During this reporting period, thousands of brochures (English and Spanish), *Know the Symptoms* magnets and prescription pads were distributed to doctor's offices, clinics and patients.

Recognizing that public awareness is largely driven by what people see and read in the media, we try to be very responsive to media requests for interviews, data or patient stories. We have also leveraged our volunteers to drive awareness through their local media channels.

A SAMPLING OF OUR MEDIA COVERAGE RECEIVED FOR THIS PERIOD:

- “Preeclampsia Foundation and University of Minnesota Present Professional Education Curriculum via Online Technology,” *PR Newswire delivered by Ascribe, February 27, 2007* – Joint press release issued by the Foundation and the University of MN Deborah E. Powell Center for Women's Health announcing the launch of the jointly sponsored online CME course, “Heart of a Woman: Pregnancy and Beyond.”
- “Achievements,” *NJ Star-Ledger, April 26, 2007* – The Foundation is mentioned in this article recognizing Foundation member and supporter Paul Dorsey for his award-winning survey program designed to further preeclampsia research.
- “Nine Cities Get Moving to Raise Awareness of Preeclampsia,” *PR Newswire delivered by Ascribe, April 27, 2007* – Foundation issued press release announcing 3rd annual Mother's Day weekend walk-a-thon.
- “Friendship, fitness and philanthropy are the foundations of Moms in Motion,” *The San Diego Union Tribune, May 1, 2007* – The Foundation is listed as the charity of choice in this article about the San Diego chapter of Moms

According to recent British studies, a woman who has had preeclampsia is four times more likely to develop chronic hypertension (high blood pressure) and twice as likely to develop heart disease, have a stroke, or suffer life threatening blood clots later in life.

in Motion, an international organization of fitness groups for women.

- “Moms in Motion,” *KUSI News, May 5, 2007* – Foundation member Sandy Finch is featured in this morning show segment highlighting the San Diego chapter of Moms in Motion, an international organization of fitness groups for women.
- “Mother's Day Walk-a-thon Fights Preeclampsia,” *Santa Barbara Independent, May 7, 2007* – One of several walk-a-thon related articles and broadcasts promoting awareness about preeclampsia and the Foundation; the Mother's Day weekend walks are hosted by Foundation members to raise awareness and money to further the Foundation's mission.

- “Campbell’s Scoup,” *The North Scott Press*, May 16, 2007 – Foundation Board member, John Warner, and his wife, Brenda, are featured in this in-depth article about their daughter, Shelly (Warner) Bridgewater, who died in January, 2005 as a result of preeclampsia related complications after delivering the Warner’s first granddaughter.
- “Life on the Edge: High Risk Pregnancy Can Mean High Anxiety,” *Pregnancy Magazine*, June, 2007 – Foundation member Sandy Finch is profiled in the preeclampsia section of this article about high risk pregnancies.
- “Tarpon Tournament Banquet to Support National Health Charity,” *PR Newswire delivered by Ascribe*, June 7, 2007 – Foundation press release announcing the 2nd Annual Silver King Awards Banquet benefiting the Foundation and hosted by Foundation members Doug and Alli Creek.
- “Drug Could Prevent Prenatal Complications,” *News 8 Austin*, July 3, 2007 – The Foundation is cited for occurrence-rate statistics in this article about recent research.
- “How You Can Help Save Mothers’ Lives,” *Newsweek Web Exclusive*, August 7, 2007 – The Foundation is cited as source of additional information in this online story urging global actions to combat maternal mortality.
- “Preeclampsia Foundation Welcomes J. Thomas Viall as Executive Director,” *PR Newswire delivered by Ascribe*, September 4, 2007 – Foundation press release announcing hiring of J. Thomas Viall as Executive Director.
- “Low Vitamin D During Pregnancy Linked to Pre-eclampsia,” *FoodConsumer.org*, September 8, 2007 and *The Hindu*, September 9, 2007 – The Foundation is cited for occurrence-rate statistics in this article about recent research; Foundation Medical Board Member James M. Roberts, M.D. served as senior author of the featured study.
- “Zuras Secures Grant for Preeclampsia Foundation,” *GWAIFA News*, September 2007 – the father of Foundation member and past president, Eleni Z. Tsigas, is recognized for his role in securing grant earmarked by the Foundation to fund production of life-saving educational DVD for national distribution.
- “Foundation Co-Founder Anne Garrett Addison Selected as Honoree in National Volunteer Recognition Program,” *PR Newswire delivered by Ascribe*, October 7, 2007 – Foundation issued press release announcing the

selection of Foundation co-founder Anne Garrett Addison as an award recipient in L’Oreal’s annual Woman of Worth contest.

- “U.S. Ranks 41st in Maternal Mortality,” *Seattle Post-Intelligencer*, October 12, 2007 and *Kansas City Star*, October 13, 2007 – Foundation is cited for preeclampsia occurrence statistics in this article discussing the ranking of countries based on a woman’s risk of dying from pregnancy complications.



- “Foundation Member Jill Siegel’s Radio Interview,” *WBZ AM 1030 – Boston, October 17, 2007* – Informative interview by Foundation supporter Diane Stern of Foundation member and featured speaker at the Foundation’s annual fund-raising gala, *Saving Grace: A Night of Hope*; Stern and Siegel cite to the Foundation for additional information about preeclampsia and invite support for *Saving Grace*.
- “*Saving Grace – A Night of Hope* – Foundation Holds Gala Fundraiser to Lead Fight Against Preeclampsia,” *PR Newswire*



delivered by Ascribe, October 17, 2007 – Foundation issued press release announcing that Dr. Benjamin Sachs, M.D. will deliver the keynote address and Foundation member and NYC Marathon veteran, Jill Siegel, will present a preeclampsia-survivor’s perspective at the 3rd annual “*Saving Grace: A Night of Hope*” benefit gala in Boston, MA on October 27, 2007.

- “2007 Vision Grants Go to Researchers at Northwestern University and University of Pittsburgh,” *PR Newswire delivered by Ascribe, October 17, 2007* – Foundation issued press release announcing that Dr. Francesca Facco of Northwestern University and Dr. Frauke von Versen-Höynck of the University of Pittsburgh are the recipients of the 2007 Vision Grants. The Foundation provides Vision Grants to fund medical research pertaining to the pathophysiology, diagnosis, and treatment of hypertensive disorders of pregnancy.
- “Two Agents Secure Thousands in Grants From MDRT Foundation,” *NYLIC Review, 3rd Quarter 2007* – Additional coverage of grant secured by father of Foundation member and past president, Eleni Z. Tsigas; grant was presented to the Foundation at the 2nd Annual Silver King Banquet organized by Foundation members Alli and Doug Creek.

- “L’Oreal Paris Honors 13 Women of Worth Honorees for Their Outstanding community Achievement,” *L’Oreal Press Release, October 30, 2007* – One of several articles recognizing Foundation co-founder, Anne Garrett Addison, as a Woman of Worth for her role in co-founding the Foundation.
- “BAS Medical Draws \$20M Insider Series C,” *Dow Jones Press Release, November 2, 2007* – The Foundation is cited for occurrence-rate statistics in this article about the restructuring of one of the Foundation’s early corporate supporters.
- “Volunteer Award,” *Fort Wayne News Sentinel, November 12, 2007* – Foundation member Kathy Maguire is featured in this story about her being the recipient of the Foundation’s 2007 Volunteer of the Year award.
- “Heath Tip: Risk Factors for Preeclampsia,” *HealthDay News, various dates* – Foundation is cited for list of common risk factors contributing to increased risk of preeclampsia.

SUPPORT

One of our primary missions is to support women and their families through the impact of preeclampsia. Our toll-free hotline (800-665-9341) and info@preeclampsia.org email address are two channels of communication that are frequently used. We field about 10-12 calls per month from families that have just been diagnosed.

Every day more than 3,000 people visit the Foundation's website, www.preeclampsia.org, to learn more about the illness, ask questions from the experts, share stories of loss and survival and find out how they can get involved. The website's online forum is buzzing with questions, advice and stories from 11,651 members by the close of 2007, including an average of 89,391 hits per day to the website.

Based on the figure of 5 to 8% of all pregnancies in the US developing preeclampsia ... as many as 40 women are diagnosed with preeclampsia every hour of every day.

The Preeclampsia Foundation introduced me to a network of people locally and through the forum that were a huge source of support to my husband and I after we lost our son to Preeclampsia in 2004. I received the support, information on this disease, and comfort I needed in my time of grief, and am now giving back by providing comfort and information on Preeclampsia to others as well as organizing fundraising activities for this incredible foundation.

— Miranda Childers
Minneapolis, MN



History of Achievements

NOVEMBER 1999

Preeclampsia Foundation founded.

FEBRUARY 2000

First strategy meeting with Dr. Gordon Perkin, Bill & Melinda Gates Foundation; \$50,000 anonymous pledge; \$12,000 matching funds received.

JUNE 2000

www.preeclampsia.org launched.

MARCH 2001

Preeclampsia Foundation awards two \$15,000 Vision Grants.

APRIL 2001

Appointed to the National Heart Lung and Blood Institute's (NHLBI) Public Interest Research Task Force to help prioritize preeclampsia funding at NIH.

JUNE 2001

Partnered with NICHD to help develop proposal for genetic study using our registered members and the NIH research facilities.

APRIL 2002

Spoke at U.S. Senate Press Conference to introduce SMART Moms Act (Safe Motherhood Act for Research and Treatment), S. 2328/H.R. 4602.

APRIL 2003

Convened the first International Preeclampsia Summit (IPS) in Seattle with a grant from the Bill & Melinda Gates Foundation.

JULY 2003

Issued the Seattle Mandate, an international call-to-action, arising from the IPS.

JULY 2004

Held 1st Annual Preeclampsia Foundation patient conference in Seattle, WA; Participation began in a joint research study with the National Institute of Health (NIH), National Institute of Child Health & Human Development (NICHD).



NOVEMBER 2004

Participated in patient advocacy panel at the 14th World Congress of the International Society for the Study of Hypertension in Pregnancy, Vienna, Austria.

MAY 2005

Launched inaugural nationwide walk-a-thon (2,000 walkers in 18 cities) Mother's Day weekend to raise awareness and financial support, surpassing initial goal by nearly 300%.

JUNE 2005

Produced patient informational brochure and began distribution to doctors' offices, clinics, patients, etc.; Secured endorsement of Society for Maternal Fetal Medicine for brochure distribution to their membership.

AUGUST 2005

Held 2nd Annual Preeclampsia Foundation patient conference at Oglebay Resort in Wheeling, WV.

SEPTEMBER 2005

Participated in special task force to develop Canadian Perinatal Network, providing early input as a stakeholder, and planning initial and future CPN projects.

NOVEMBER 2005

Successfully launched annual benefit gala – *Saving Grace: A Night of Hope* – to raise awareness and financial support; Co-sponsored Continuing Medical Education (CME) Seminar: *Preeclampsia Update* with the Deborah E. Powell Center for Women's Health at the University of Minnesota.

DECEMBER 2005

Concluded participation in NICHD research study.

JULY 2006

Hosted Leadership Training Conference to provide training and education to volunteers; Presented results of joint research study with the National Institute of Health (NIH) and the National Institute of Child Health & Human Development (NICHD) at the 15th World Congress of the International Society for the Study of Hypertension in Pregnancy in Lisbon, Portugal.

SEPTEMBER 2006

Participated as patient advocacy organization in National Institute of Health (NIH) sponsored research workshop aimed at bringing together the top researchers in the field to present their newest work; formalized an alliance with the March of Dimes (MoD).

OCTOBER 2006

Issued position statement entitled: *Preeclampsia Identifies Women at Risk for Cardiovascular Disease*.

NOVEMBER 2006

Translated patient informational brochures into Spanish; Professional Education Committee identified.



*Saving Grace: A Night of Hope;
Boston, MA (2007)*

2007 Milestones

FEBRUARY 2007

Participated as patient advocacy organization at the 2007 Society of Maternal Fetal Medicine 27th Annual Meeting in San Francisco, California.

MARCH 2007

Co-sponsored free online Continuing Medical Education (CME) course: "Heart of a Woman: Pregnancy and Beyond" with the University of MN Deborah E. Powell Center for Women's Health to educate physicians and nurses about preeclampsia diagnoses, management and the ongoing issues related to cardiovascular disease.

MAY 2007

Held 3rd annual nationwide walk-a-thon Mother's Day weekend to raise awareness and financial support to fund mission-oriented tasks.

JUNE 2007

Co-sponsored the North American Society for the Study of Hypertension in Pregnancy's biennial meeting in San Diego, California.

SEPTEMBER 2007

Hired J. Thomas Viall, the Foundation's first experienced executive director; Foundation contributed to the article, *Preeclampsia – A Pressing Problem: An Executive Summary of a National Institute of Child Health and Human Development Workshop*, John V. Ilekis, Uma M. Reddy and James M. Roberts Reproductive Sciences 2007 – a summary compilation of the NICHD preeclampsia workshop held September, 2006.

OCTOBER 2007

Held 3rd annual benefit gala – *Saving Grace: A Night of Hope* – in Boston, MA to raise awareness and financial support; Awarded two \$25,000 Vision Grants to researchers exploring innovative preeclampsia-related research topics.

NOVEMBER 2007

Participated as patient advocacy organization in the Preeclampsia Integrated Estimate of Risk (PIERS) Study Group in Vancouver, British Columbia.

Throughout 2007 ...

1,154 Members (504 from outside the United States) joined our online Forum in 2007, creating a total of approximately 6,000 members with a total number of postings exceeding 10,000 individual messages. More than 250 calls for support and information were received on the Foundation's hotline.

The primary focus of this period was to identify and adopt ambitious mission-critical program initiatives designed to educate and empower the at-risk population.

Fiscal Responsibility in Pursuit of Mission

Each year, a well run business undergoes an audit to assess not only if its financial records are in order, but also to evaluate the quality of its fiscal management policies.

Once again, I am pleased to report to all our friends, supporters, and donors, that the independent auditing firm of Messerli & Schadow, Certified Public Accountants, has reviewed both our books and procedures and they have found no material deficiencies. Our books are accurate and our management policies sound.

Now I realize that talking about accounting matters may not appear to be the most exciting or stimulating of topics ... but I beg to differ with you. Fiscal responsibility and pursuit of mission are inextricably connected. All the good intentions in the world will not educate one mother-to-be regarding preeclampsia. All the good wishes one can muster will not encourage a young researcher to devote his or her professional career to finding a way to prevent or effectively treat preeclampsia. All the high hopes we might have will not create or sustain the type of “on-line community” the Foundation has created.

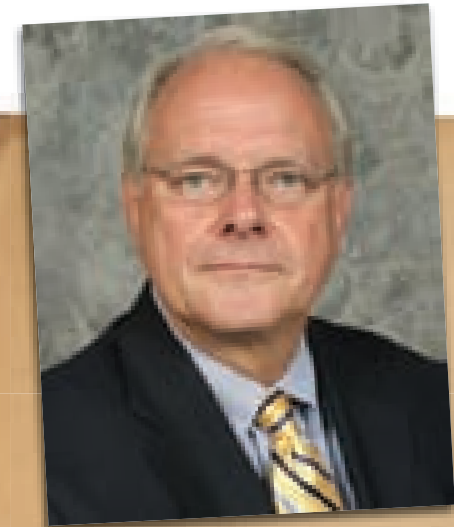
However – effective fundraising and sound fiscal management will make those things happen.

I don't need to review the specific numbers for you, they are clear and indicate a strong cash

position as well as a doubling of program related expenditures. Rather, I would like to use this opportunity to address the concept of “pursuit of mission.” As the Preeclampsia Foundation grows and matures, we must expand our program portfolio in ways that bring us closer to our constituents and offer more proactive outreach. It is for that reason that we have developed proposals to reach out to underserved populations and provide accessible and understandable information about preeclampsia that will change behaviors and build awareness, empower patients, and improve outcomes. In the coming year, the Foundation will build on its strength as a “voice for the patient” and use its position to identify best practices in the diagnosis and treatment of preeclampsia. Such information will surely help build awareness, empower patients, and improve outcomes.

If you care about maternal health, if you care about the hundreds of thousands of women, infants, and families who are threatened each year because of preeclampsia, if you care about building awareness, empowering patients, and improving outcomes ... then you will read these pages with interest and you will be called to action.

I promise that your support will be managed with fiscal responsibility and wisely used in the pursuit of mission.



With all best wishes,

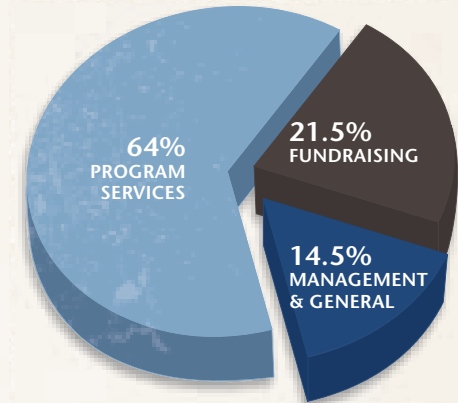
J. Thomas Viall
Executive Director

Statement of Activities

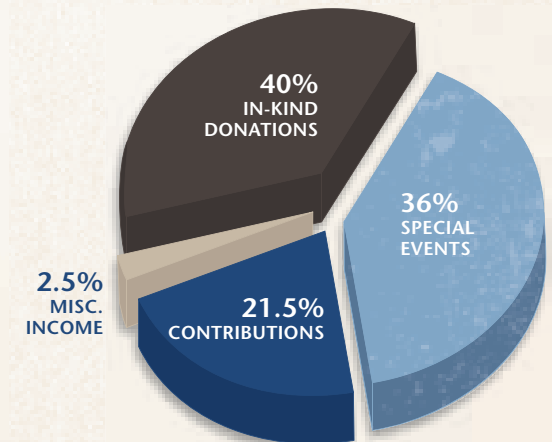
YEAR ENDED DECEMBER 31, 2007

	UNRESTRICTED	TEMPORARILY RESTRICTED	TOTAL
PUBLIC SUPPORT AND REVENUE			
Contributions	\$ 101,173	\$ 30,998	\$ 132,171
Contributed services	\$ 9,380	\$ ~	\$ 9,380
In-kind contributions	\$ 236,972	\$ ~	\$ 236,972
Interest income	\$ 13,141	\$ ~	\$ 13,141
Conference registration	\$ ~	\$ ~	\$ ~
Miscellaneous income	\$ 815	\$ ~	\$ 815
	<u>\$ 361,481</u>	<u>\$ 30,998</u>	<u>\$ 392,479</u>
SPECIAL EVENTS			
Revenue	\$ 52,316	\$ ~	\$ 52,316
Contributions	\$ 146,455	\$ 47,627	\$ 194,082
In-kind contributions	\$ 33,023	\$ ~	\$ 33,023
Event expenses	\$ (59,152)	\$ ~	\$ (59,152)
	<u>\$ 172,642</u>	<u>\$ 47,627</u>	<u>\$ 220,269</u>
NET ASSETS RELEASED FROM RESTRICTION			
Satisfaction of restriction	\$ 8,000	\$ (8,000)	\$ ~
Total support and revenue	<u>\$ 542,123</u>	<u>\$ 70,625</u>	<u>\$ 612,748</u>
FUNCTIONAL EXPENSES			
Program services	\$ 220,798	\$ ~	\$ 220,798
Management and general	\$ 51,213	\$ ~	\$ 51,213
Fundraising	\$ 74,747	\$ ~	\$ 74,747
CHANGES IN NET ASSETS			
	<u>\$ 195,365</u>	<u>\$ 70,625</u>	<u>\$ 265,990</u>
NET ASSETS, BEGINNING OF YEAR			
	<u>\$ 501,495</u>	<u>\$ 23,000</u>	<u>\$ 524,495</u>
NET ASSETS, END OF YEAR			
	<u>\$ 696,860</u>	<u>\$ 93,625</u>	<u>\$ 790,485</u>

FUNCTIONAL EXPENSES



REVENUE SOURCES



Looking Ahead

While it is appropriate and important for an organization to convey its successes to members, friends, and supporters ... no organization can rest on its achievements. Rather, a vibrant and effective organization builds on successes and plans for the future. Following are proposed programmatic initiatives designed to fulfill mission, impact more lives, and extend our international outreach:

- **Professional education and development**
– The “eclampsia drill” is a process of simulation learning. It uses a human model that simulates a seizure and can be implemented at obstetrical units to develop skills at managing serious, but uncommon events. Teamwork and systems issues are usually addressed with an eye toward



- maximizing efficiency when presented with a critical care situation. The Foundation will work collaboratively to seek funding to create a training module that could be replicated in hospital settings here in the U.S. and internationally.
- **Community Outreach** – Low medical literacy has been shown by several studies (including the Foundation's recent on-line survey) to have a significantly negative impact on outcomes. In short, we found that when pregnant women do not know about the signs and symptoms of preeclampsia, the rate of infant mortality doubled. The Foundation has developed a pilot outreach campaign and recruited partners in Chicago to create an education campaign over a three year period to document the salutary effects of awareness. Potential funders are being actively sought.

In 1990, the U.S. Department of Health and Human Services launched its "Healthy People 2000" project with a goal of reducing the maternal mortality rate to 3.3 deaths per 100,000 live births ... only three states met that goal.

- **PIERS Initiative** – The Foundation is working with and supporting our Canadian colleagues in the Preeclampsia Integrated Estimate of Risk (PIERS) initiative. The goal of this program is to identify standard protocols of diagnosis and treatment when certain medical conditions present in a patient. A related component of this initiative, Mini-PIERS, is designed to adapt the diagnostic and treatment protocols for implementation in less developed areas of the world. The Preeclampsia Foundation Board recently voted to enhance its international efforts and this activity fits well within those goals.
- **Vision Grants** – In 2007, the Foundation announced a goal of doubling our Vision grants from two to four in 2008. In keeping with that expansion, the Foundation will seek to continue the growth of the Vision Grant Program in FY09 with a minimum of six grants and ideally doubling again to eight grants.

Saving Grace A NIGHT OF HOPE

The Preeclampsia Foundation's annual benefit, *Saving Grace: A Night of Hope*, was held in Boston on October 27, 2007 with approximately 125 in attendance. The Foundation netted almost \$200,000 from the benefit and accomplished an important secondary goal of personalizing preeclampsia for those in attendance. Preeclampsia Foundation Board Chair Leslie Weeks and Operations Director Jaime Nolan were co-chairs of the event. *Saving Grace* is named in memory of Jaime's daughter, Grace. She was born in February 2004, at 27 weeks, when Jaime developed preeclampsia. Grace lived only eight days.

Highlights from the 2007 fundraiser included:

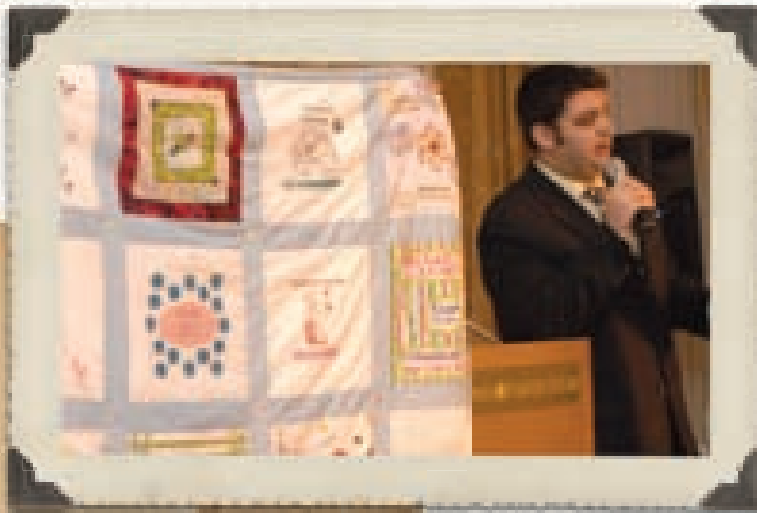
- A moving slideshow tribute showcasing pictures of women, babies and families who have been affected by preeclampsia – many of whom did not survive – while a beautiful rendition of *Amazing Grace* was played by a cellist in the background.
- Foundation member Kathy Maguire received the Volunteer of the Year award in recognition of her dedication and hours of service to the Foundation.
- Two Vision Grant awards of \$25,000 each were awarded to young researchers studying preeclampsia, thus fulfilling an integral part of the Foundation's mission of funding and driving research (see page 5).
- Silent and live auctions, including a live auction of a hand-made quilt, a beautiful compilation of squares submitted by Foundation members in memory of loved ones lost to preeclampsia (see next page).
- Foundation member Jill Siegel delivered an awe-inspiring talk about her near-death experience with preeclampsia and HELLP Syndrome and subsequent New York City Marathon run to raise awareness and money for the Foundation.
- Keynote speaker Dr. Benjamin Sachs, M.D., Chair of the OB-GYN department at Beth Israel Deaconess Medical Center and soon-to-be Senior Vice President of Tulane University and Dean of the Medical School, delivered an eloquent presentation about preeclampsia and medical research. Dr. Sachs is renowned for his work to improve quality control in the delivery of medical care. He has also been instrumental in supporting the groundbreaking research of Foundation Medical Board member Dr. Ananth Karumanchi and his seminal work in discovering genetic markers for preeclampsia.





Saving Grace photos ...

1. *Saving Grace* attendees attention held by Dr. Benjamin Sach's presentation.
2. Foundation Board Member and preeclampsia survivor, Carol Hamilton.
3. 2007 *Saving Grace* co-chairs, Jaime Nolan & Leslie Weeks.
4. Andrew Imholte, professional auctioneer, helps the Foundation raise \$4,500 by auctioning the one-of-a-kind Preeclampsia Foundation quilt.



Early in 2007, an idea was raised on the Preeclampsia Foundation's Forum to create a quilt to be auctioned at the *Saving Grace* event. The purpose of the quilt would be to honor survivors and remember those who lost their lives to preeclampsia. All members were invited to participate by creating a twelve-inch-by-twelve-inch quilt square. Several months later, the finished quilt included twenty squares, each holding a special sentiment and design. No one in their wildest imagination could have predicted the final bid price for the quilt – \$4,500! The auction for the quilt started a bidding war that was ultimately won by Dr. Russ Bell, CSO for Beckman Coulter, Inc. He and other company executives took the quilt around the world to all of their facilities. Dr. Bell stated that the quilt was his way of spreading awareness about preeclampsia and making the cause more personal for everyone he meets.

CHANGES IN VISION

Double vision, blurriness,
flashing lights or auras

Have the symptoms, save yourself

3rd Annual Walk-a-thon

The 3rd Annual Walk-a-thon was a great success and raised more than \$53,000 net with organized walks held in 10 states, many of which were held Mother's Day weekend, May 12, 2007. Walk sites included Phoenix, Arizona; San Diego and Santa Barbara, California; Auburn, and Indianapolis, Indiana; Davenport, Iowa; Shelby Township, Michigan; Minneapolis, Minnesota; Dayton, Ohio; and Madison, Wisconsin.

The purpose of the annual walk-a-thon is to raise awareness of preeclampsia while also raising funds for the Foundation. These funds help to support such programmatic activities as research, professional and patient education, family support, and awareness about the long-term impact of preeclampsia on women's cardiovascular health. All these efforts advance the Foundation's mission which is to reduce the number of maternal and infant deaths and disability that occur as a result of preeclampsia and related hypertensive disorders of pregnancy.



Contributors

THE PREECLAMPSIA FOUNDATION WISHES TO THANK THE FOLLOWING FOR THEIR FINANCIAL SUPPORT:

\$50,000+

Johnson & Johnson

\$25,000+

Beckman Coulter

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After my experience with severe preeclampsia and HELLP Syndrome in 2005, I was so thankful to stumble across the Preeclampsia Foundation's website. It has been such a valuable source of information and support to me after such a difficult and traumatic experience.

— Melissa Avila-Carroll
San Jose, CA

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Preeclampsia is the most common known cause of premature birth and, according to the CDC, premature births are on the rise, having increased by 30% since the early 1980s.

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"I discovered the Preeclampsia Foundation website and forum approximately eight years after my experience with eclampsia, HELLP Syndrome and the loss of my son in 1995. The Foundation offered a place for me to grieve with those who understood my experience, educated me to prepare for a future pregnancy and instilled my hope that having a child after preeclampsia was indeed possible. The Foundation is an organization I am proud to be a part of and thanks to the many volunteers I hope someday we find a cure for those yet to experience pregnancy.

— Kristine Dreher
New London, CT

*ex-offi cio

Medical Board

DR. THOMAS R. EASTERLING

Director, University of Washington School of Medicine

Dr. Easterling received his M.D. from University of North Carolina Medical School. He is a national expert in the field of hypertension in pregnancy. A professor at the University of Washington Medical School joining the staff in 1985, Dr. Easterling has received numerous awards including: the Young Investigator's Award of the International Society for the Study of Hypertension in Pregnancy, the Society Award for the Society of Perinatal Obstetricians for research on the hemodynamics of preeclampsia, and was honored by the journal *Obstetrics & Gynecology* for conducting one of the four most significant studies of 1999 regarding early antihypertensive treatment to prevent preeclampsia. He and his team at the University of Washington are members of the NIH-sponsored Obstetrical Pharmacological Research Unit network investigating the use of medications in pregnancy. Dr. Easterling continues an active clinical and research practice at the University of Washington and is a co-founder of the Preeclampsia Foundation.

DR. PHYLLIS AUGUST

Weill Cornell Medical College

Since 1996, Dr. August has been the Chief of the Division of Hypertension and the Cardiovascular Center and a professor of medicine at Cornell University's Weill Medical College. A 1977 graduate of the Yale Medical School, she did her residency in internal medicine and her fellowship in nephrology and hypertension at the New York Hospital-Cornell Medical Center. She is also a practicing physician who brings much clinical evidence to her study of hypertension in pregnancy.

DR. PETER VON DADELSZEN

MBCbB President, North American Society for the Study of Hypertension in Pregnancy, University of British Columbia

Dr. Peter von Dadelszen is a consulting perinatologist at Children's and Women's Health Centre of British Columbia (CWHC/CBC) and an Assistant Professor of Obstetrics and Gynecology (Maternal-Fetal Medicine) at the University of British Columbia (UBC), where his appointment is as a clinician-scientist, with 60% of his time dedicated to preeclampsia and pregnancy hypertension research – from basic science to clinical epidemiology. He is currently investigating mechanisms involved in the development of preeclampsia, as well as a possible disease-modifying therapy.

Dr. von Dadelszen is currently President of the North American Society for the Study of Hypertension in Pregnancy (NASSHP) and President of ERIPED (Equipede Recherche Interdisciplinaire sur la Pre-Eclampsie et ses Determinants), Canada's preeclampsia research alliance.

DR. ANANTH KARUMANCHI

Beth Israel Deaconess Medical Center, Harvard Medical School

Dr. S. Ananth Karumanchi is Associate Professor of Medicine at Harvard Medical School and an attending physician in the Nephrology and Molecular and Vascular Medicine Divisions at the Beth Israel Deaconess Medical Center. He holds a second appointment as a Senior Scientist with the Department of Obstetrics and Gynecology at the Beth Israel Deaconess Medical Center. He received his M.D. from the University of Madras, Chennai, India. He is a recipient of the Carl W. Gottschalk Research Scholar Award from the American Society of Nephrology, the Hope Award from the Preeclampsia Foundation, the Young Scholar Award from the American Society of Hypertension, and recently (October, 2007) named a Howard Hughes Medical Investigator.

DR. MARSHALL LINDHEIMER

University of Chicago

Dr. Lindheimer, a Board Certified Internist and Nephrologist, is a Professor Emeritus in the Departments of Medicine and Obstetrics and Gynecology at the University of Chicago, where he currently chairs the Advisory Board of its NIH-funded General Clinical Research Center. His clinical interests focus on the management of pregnant women with kidney disease and hypertension, while his research career has stressed renal physiology, volume homeostasis, and blood pressure control in normal and abnormal pregnancy. He is also a consultant to the World Health Organization, participating in their *Global Program to Conquer Preeclampsia*, and advising them in the areas of clinical trials and the implementation of best care policies in developing nations.

Dr. Lindheimer is one of the founders of the International Society for the Study of Hypertension in Pregnancy, and has served both as its secretary-treasurer and president. His 350 plus publications include seminal basic science observations, clinical studies, numerous text chapters and author- or editorship of seven texts, including the most recent editions of Chesley's *Hypertensive Disorders in Pregnancy*, and Barron & Lindheimer's *Medical Disorders During Pregnancy*. Dr. Lindheimer is a recipient of the Chesley Award for Research in Hypertension in Pregnancy.

DR. JAMES N. MARTIN, JR.

Wiser Hospital for Women and Infants University of Mississippi Medical Center

Dr. Martin is a Professor of OB-GYN, Director of the Division of Maternal-Fetal Medicine, and Chief of Obstetrics for the Wiser Hospital for Women and Infants at the University of Mississippi Medical Center. His clinical expertise lies in the management of complicated pregnancies, particularly related to hypertensive disorders. Dr. Martin is the author of more than 400 scientific communications, many which address issues related to preeclampsia-eclampsia and atypical forms of this disease such as HELLP syndrome. He is one of the founders and a past president of The North American Society for the Study of Hypertension in Pregnancy, is past president of the Society for Maternal-Fetal Medicine, and is Secretary of ACOG National. His research in hypertensive disorders of pregnancy began during his residency training at the University of North Carolina Hospitals and continued while completing a fellowship in maternal fetal medicine at Texas Southwestern/ Parkland Hospital in Dallas, Texas.

DR. SUZANNE OPARIL

University of Alabama School of Medicine in Birmingham

Dr. Suzanne Oparil is Professor of Medicine and of Physiology and Biophysics at the University of Alabama School of Medicine in Birmingham, where she is also Director of the Vascular Biology and Hypertension Program.

She is the current President of the American Society of Hypertension, a past-President of the American Heart Association (and still an active volunteer at both the national and affiliate levels), and the first woman past-President of the American Federation for Medical Research. She also has leadership roles in the Association of American Physicians, American Society for Clinical Investigation, Southern Society for Clinical Investigation, American Physiological Society, Clinical Physiology Advisory Committee, and Inter-American Society of Hypertension.

Dr. Oparil has a career interest in the fundamental mechanisms of cardiovascular disease and in using the information to develop novel treatments. She is author and coauthor of more than 1,000 abstracts, book chapters, and journal articles in circulation, *New England Journal of Medicine* and *American Journal of Hypertension*, as well as others.

DR. JOHN T. REPKE

Milton S. Hershey Medical Center Penn State College of Medicine

Dr. Repke is a Professor and Chairman of the Department of Obstetrics and Gynecology at the Penn State College of Medicine – Milton S. Hershey Medical Center. He is a nationally recognized expert in maternal/fetal medicine and is listed in “Best Doctors in America.” His expertise is in the study of prevention and management of hypertension in pregnancy and preeclampsia. In addition to editing a textbook on obstetrics, Dr. Repke has published over 135 research articles in peer-reviewed journals and over 50 review articles and book chapters. He is a past president of the North American Society for the Study of Hypertension in Pregnancy. A 1974 graduate of Georgetown University, Dr. Repke obtained his medical degree in 1978 from New York Medical College. His internship, residency, fellowship and other professional positions have taken him to Johns Hopkins Hospital, Harvard Medical School-Brigham and Women’s Hospital, the University of Nebraska Medical Center, and Penn State.

DR. JAMES M. ROBERTS

Magee-Women’s Research Institute University of Pittsburgh School of Medicine

Dr. Roberts is Professor and Vice Chair for Research in the Department of Obstetrics, Gynecology, and Reproductive Sciences at the University of Pittsburgh School of Medicine, and Director of Magee-Women’s Research Institute. Dr. Roberts has received national and international recognition for his work on preeclampsia. He was the recipient of the Chesley Award for lifetime achievement in the study of hypertension in pregnancy, is the author of more than 160 publications and is a reviewer for numerous medical and scientific journals. He has served on scientific review boards of the National Institutes of Health, the Medical Research Council of Canada, the Food and Drug Administration and the March of Dimes. He has held posts with the NICHD Maternal Fetal Medicine Network, the Canadian Institute of Health Sciences Research, the Perinatal Research Society, the North American Society for the Study of Hypertension in Pregnancy, the Society of Gynecological Investigation and the International Society for the Study of Hypertension in Pregnancy.

DR. BAHA M. SIBAI

University of Cincinnati College of Medicine

Dr. Sibai is Professor and Chairman of the Department of Obstetrics and Gynecology at the University of Cincinnati College of Medicine. His academic leadership and contributions to research in the dissection of the hypertensive diseases of pregnancy and other basic problems associated with obstetrics and gynecology has awarded him national and international recognition in the field of Maternal-Fetal Medicine, particularly in the area of hypertension in pregnancy. His contributions have organized the treatment plans of many physicians. Dr. Sibai’s international notoriety in preeclampsia and eclampsia evolved as a result of his authorship or co-authorship of over 350 peer-reviewed publications in national and internationally circulated publications.

Honorees

THE 2007 HOPE AWARD FOR VOLUNTEER OF THE YEAR

Kathy Maguire

Ms. Maguire began volunteering with the Preeclampsia Foundation in January 2006 after experiencing preeclampsia which resulted in her daughter Amelia's premature birth at 29 weeks. Ms. Maguire now serves in a volunteer role as Director of Volunteer Services and was National Co-chair of the 2007 Preeclampsia Walk-a-thons. Along with her husband Dan, she chaired the Auburn, Indiana Preeclampsia Awareness Walks and Kiwanis "Donut Shop" events to benefit the Preeclampsia Foundation in both 2006 and 2007. Ms. Maguire has also lent her skills to the Foundation on conference planning committees as well as the Executive Director hiring committee. Ms. Maguire is passionate about creating preeclampsia awareness and fundraising to work toward finding treatments and a cure so that other women, children and families do not have to have similar experiences. Ms. Maguire has a Masters degree in Early Childhood Leadership and Advocacy with 18 years in early childhood education. Most recently she worked as a Program Associate and Consultant to child care centers and elementary schools with an emphasis on continuous quality improvement and accreditation attainment. She has also worked as a preschool and kindergarten teacher, a child care center director, and coordinator of after-school programs and summer camps. Currently she is a stay at home mom and lives with her husband and daughter in Auburn, Indiana.



A severe form of preeclampsia (HELLP) may lead to seizures, stroke, and major organ failure.

2007 VISION GRANTS

Vision Grants are small awards and intended to provide initial funding for innovative ideas which might otherwise not be pursued due to lack of funding. Application information for the Vision Grant Program is typically available on the Foundation website (www.preeclampsia.org) after the first of each year, with a mid May deadline for grant submissions. Awards are announced each year at the *Saving Grace* Gala.

Finding the Preeclampsia Foundation has made a big impact on my life following the early delivery of my daughter in 2002 due to severe preeclampsia that remained even post-partum. It was comforting to know there was a place where others could truly relate to what I experienced ... the lack of understanding, the disappointment, the after-effects. It's now a personal mission of mine to help make some difference in support of the Preeclampsia Foundation's purpose.

— Dawn Detweiler
Easton, PA

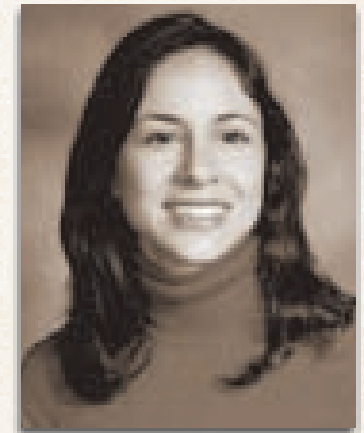
Dr. Franke von Versen-Höynck

Magee-Women's Research Institute and Foundation Dr. von Versen-Höynck is a physician with specialization in the field of maternal-fetal medicine. She completed her medical training in Germany, and started a post-doctoral fellowship at Magee Women's Research Institute at the University of Pittsburgh in late 2005. Dr. von Versen-Höynck's research focus has been centered on understanding conditions and agents that influence amino acid transport in the placenta, and in differences in amino acid transport in different pregnancy outcomes. Her current research project will focus on the role of the hypoxia-inducible factor adenosine in placental amino acid transport.



Dr. Francesca Facco

Dr. Francesca Facco is currently a second year maternal fetal medicine fellow at Northwestern University. As part of her fellowship training she is enrolled in the Masters Degree Program in Clinical Investigation at Northwestern University. She attended Georgetown University for both college and medical school. She completed her residency training in obstetrics and gynecology at Northwestern University in 2008, and was chosen to serve as Chief Administrative Resident. Dr. Facco has been involved in several research projects, with a special interest in sleep disorders in pregnancy and their association with adverse pregnancy outcomes.



Symptoms of Preeclampsia

HIGH BLOOD PRESSURE. 140/90 or higher. A rise in the diastolic (lower number) of 15 or more, or a rise in the systolic (upper number) of 30 or more is cause for concern.

PROTEIN IN YOUR URINE. 300 milligrams in a 24-hour collection or 1+ on the dipstick.

SWELLING IN THE HANDS, FEET OR FACE, especially under the eyes, or if an indentation is left when applying thumb pressure. Some swelling is normal in most pregnant women, but sudden swelling is always suspect.

HEADACHES that just won't go away, even after taking medications for them.

CHANGES IN VISION, double vision, blurriness, flashing lights or auras.

NAUSEA OR UPPER ABDOMINAL PAIN (epigastric) is sometimes mistaken for indigestion, gallbladder pain or the flu. Nausea late in pregnancy is not normal.

SUDDEN WEIGHT GAIN or two pounds or more in one week.

Unfortunately, most women have no symptoms until they are very sick. If you have one of these signs or symptoms, see your doctor or go to an emergency room immediately.





P R E C L A M P S I A

foundation

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