The GI Research Foundation (GIRF) is a 501(c)3 non-profit organization dedicated to raising funds to support the physicians and scientists at the University of Chicago Medicine Digestive Diseases Center in their efforts to provide outstanding care, train future leaders, and perform innovative clinical and laboratory research in order to treat, cure, and prevent digestive diseases.
The GI Research Foundation continues to be inspired by its founder, Dr. Joseph B. Kirsner and center patient outcomes in its research funding.

My principal mission became excellence in the care of the patient; the patient was the goal in everything we did. If we did research, it would eventually evolve into a therapeutic procedure, a better way to take care of a particular problem, and the patient would benefit.

I do want to express my appreciation and respect to the men and women of GIRF, all of them. They are doing this voluntarily... The fact that they are so liberal in their association and support is a great honor for us and I express the sentiments of not only my colleagues in gastroenterology but also the University of Chicago. GIRF is held in the highest regard throughout the country.

JOSEPH B. KIRSNER, MD, PhD
1909-2012
Dear Friends,

When I first gavelled in as Board President in January 2020, the GI Research Foundation began its 59th year of fighting for digestive diseases patients. Our goals were significant, with plans to expand research funding and move closer to finding cures.

Thanks to our steadfast Board of Directors and volunteers, dedicated scientific partners at the University of Chicago Medicine Digestive Diseases Center, and devoted donors and friends, our commitment has never been stronger. Over the past three years, we discovered new opportunities to connect with and grow our community, while sustaining our existing operations.

- Launched CA CURE—a courageous initiative to change how we treat digestive cancers, with a focus on immunotherapies and vaccines.
- Initiated an annual competitive grant process awarding over $1 million to nine novel studies at the University of Chicago Medicine.
- Invested in critical technology and equipment that fuels research breakthroughs.
- Educated our constituents through Moving the Needle—our annual research spotlight event, Visceral—a new GI Research Foundation podcast, and a three-part webinar series.
- Celebrated together with three Balls—two virtual and one hybrid.
- Golfed with sports legends at the Larry A. Pogofsky All Star Challenge.
- And continue unparalleled support of the UChicago Medicine Digestive Diseases Center physician-scientists.

I invite you to read these pages featuring highlights from a successful 2022—achievements made possible with your support.

Reflecting on our accomplishments, I recognize how much work is left to do. I look forward to supporting the GI Research Foundation mission as Board Chairperson and continuing our quest for digestive diseases patients all over the world.

Together, let us continue to change lives.

Katie Chudnovsky
Board President, 2020-2022
1931 “devotion to truth, the
Maynard Hutchins said in
University President Robert
of higher learning with, as
was created as an institution
The University of Chicago
Foundation. It is these
the amazing GI Research
\[...

diseases at the
The ingredients that
have made the Digestive
Diseases programs at the
University of Chicago great
are 1) the University itself, 2) our brilliant and dedicated faculty and staff, and 3) the amazing GI Research Foundation. It is these special ingredients that are the theme of my remarks.

The University of Chicago was created as an institution of higher learning with, as University President Robert Maynard Hutchins said in 1931 “devotion to truth, the
courage to be independent, an
ded enthusiasm interest in
the community and in new
ideas, in intellect rigorously
trained, and being trained.”

Our medical center grew
out of the University and
was developed with the
same principles. The medical
center has been a part of
the campus for almost
100 years, and the core
function of the University of
Chicago Hospitals
required commitment to
the community and patient
care but always emphasized
research to understand the
mysteries of the human
body. Among its first eight
faculty hires was Dr. Walter
Palmer, a physician scientist
and son of a family practice
doctor who had an interest
in GI diseases. Dr. Palmer
focused on research and
discovery of the major GI
problem of the day—peptic
ulcer disease. In 1935,
Palmer was joined by and
then mentored a young
physician, Dr. Joseph Kirsner.
Shortly after starting his
job with Palmer, Kirsner
met a young woman with
ulcerative colitis. A little-
known condition at that
time, she succumbed from
her disease, and this had a
profound impact on Kirsner.
He subsequently devoted
his career to understanding
the causes and treatments
for the inflammatory bowel
diseases.

By now, the legacy of Kirsner
is known to many of you—it
is the reason the GI Research
Foundation came to exist. As
clinicians, we all have learned
how such experiences with
our patients deeply affect us,
every day.

The second ingredient to
our ongoing success is
our UChicago people: Our
amazing Digestive Diseases
Center is now made up
of over 300 physicians,
scientists, trainees, nurses
and staff. In the last year
we have been in more
locations, seen more
patients, performed more
surgeries and published
more scientific papers
than ever before. Under
the co-directorship of Mike
Charlton and John Fung,
our transplant center has
performed more transplants
in multiple organs than in
the history of the institution.

We have a multi-disciplinary
liver tumor clinic led
by Dr. Anjana Pillai, our
multi-disciplinary obesity
initiative led by Dr. Mustafa
Hussain, our cutting-
edge interventional
endoscopy program led
by Dr. Mustafa
Hussain, our cutting-
edge interventional
endoscopy program led
by international leader Dr.
Uzma Siddiqui, and most
recently, our intestinal
ultrasound program, led by
Dr. Noa Krugliak Cleveland
that enables us to assess
inflammation in the bowels
in real time at the bedside.

Our research teams have
been incredibly productive
as well, with over 300
active human subject trials
and hundreds of ongoing
pre-clinical laboratory
experiments, with critical
contributions from Valerie
Abadie, PhD; Luis Barreiro,
PhD; Eugene B. Chang,
MD; Bana Jabri, MD, PhD;
Ed K. McDonald, IV, MD;
Neil Hyman, MD; Sonali
Paul, MD; Joel Pekow,
MD; Carol Semrad, MD;
Benjamin Shogan, MD; and
Kingsley Okorogh-Efut,
MD, among many others,
all of which you learn
about through the GI
Research Foundation’s
communications throughout
the year.

But at the end of the day,
it still comes back to the
individual physician, the
individual scientist, and their
focus on the next individual
patient, in an increasingly
difficult and competitive
environment.

Which brings me to our
third ingredient: The GI
Research Foundation.
You, our friends at the GI
Research Foundation, have
stepped up time and again
to address the needs of the
physicians and scientists,
and in the last 8 years we
have been privileged to work
with you to expand support
to meet the demands of
these times.

An institution like the
University of Chicago and
its multitalented scientists
and experts across different
departments and specialties
is the only place a program
like this can be created and
succeed, and with GIRF’s
help, I know we will.

Your support is critical to our
missions. We appreciate your
dedication and generosity.
Thank you.
For the past several years, under the wise guidance of our scientific advisors, the GI Research Foundation (The Foundation) has honed its approach to research funding. The strategy has become more sophisticated and the dollars for awards have grown. In fiscal year 2022 (July 1, 2021 to June 30, 2022), the Foundation awarded just over $1.5 million in research grants. From July 1 through the end of calendar year 2022, we have awarded over $19 million. This stunning growth is the result of donors like you at all levels of giving: investing in research and directed donations, helping us to launch important new grantmaking initiatives.

The Foundation’s strategy funds research from discovery in the lab to the patient’s bedside. Research is hope. With each grant request, we ask, “How will this, or how could this, improve patient outcomes and eliminate suffering?”

The grantmaking strategy evolves with new scientific breakthroughs and lessons learned, and centers on scientific partnership, especially with our long-time partner, the University of Chicago Digestive Diseases Center.

Carefully stewarding our donor dollars, the Foundation is often a first-in funder, providing critical early support of novel and innovative pilot studies and core support of critical research needs. These early dollars often yield the research results needed to attract more traditional and larger donors.

Connecting our constituents to the research strategy is a key part of the GI Research Foundation’s mission. Understanding research is a journey anyone can take. In this Year in Review, you can begin this journey with us as we introduce you to the incredible science funded over the past year.
Despite centuries of research, treating and curing cancer remains an urgent health research priority. Far too many people at younger and younger ages are diagnosed with fatal cancers, often after living with a digestive disease such as Crohn’s, ulcerative colitis, fatty liver disease, and others. Despite its prevalence, colon cancer research is grossly underfunded.

With extraordinary and transformational support from anonymous donors, the GI Research Foundation launched a bold initiative, CA CURE, to identify and fund research to improve diagnostics, develop immunotherapies and personalized vaccines. In 2022, CA CURE sought projects that might have difficulty attracting funds because they are too experimental or are in the initial stages of development. With a focus on improving patient outcomes, we funded nine rigorously evaluated research projects from across the country. In its initial phase, CA CURE put vital research dollars in the hands of leading scientists. Thanks to the expert scientific review from eight physician-scientists and investigators at the University of Chicago, Yale University Medicine, Weill Cornell Medicine, and MD Anderson, the GI Research Foundation developed a scientifically robust review process.

In just five months, the Foundation awarded $18,421,770 in grants.

This has been an extraordinary team effort, demanding time, expertise, and wisdom from many. The GI Research Foundation is so fortunate to have scientific leaders who care about our success and lay leaders with the passion to immerse themselves in learning complicated research.

The GI Research Foundation looks forward to sharing the results of these projects with you in the coming months and years.

$18,421,770 in Groundbreaking Research
The Promise of Regenerative Medicine

In his acceptance remarks after receiving the Joseph B. Kirsner Award, Dr. Rubin said:

Finally, GIRF has, as they always have, kept their eyes on the bigger picture, and we have worked with them to develop a Regenerative Medicine Program. As mentioned briefly last year during this Ball, regenerative medicine is the study of how tissues develop and mature into different organs, and how tissue injury occurs and changes with age or disease can be repaired or replaced. The potential applications for such a program are incredibly exciting and may include tissue healing in inflammatory bowel disease, organ regeneration in intestinal, liver, or pancreas failure conditions, and ultimately, the discoveries will yield new insights and treatments for GI cancer as well. An institution like the University of Chicago and its multitaled scientists and experts across different departments and specialties is the only place a program like this can be created and succeed, and with GIRF’s help, I know we will.

Delivering on that promise, the Foundation began funding regenerative medicine projects like these.

**Development of Colorectal Organoid Models to Facilitate Better Patient Care**

Christopher Weber, MD, PhD
Le Shen, MB, PhD

The study of organoids – three-dimensional tissue cultures grown relatively inexpensively and quickly from human specimens routinely collected during diagnostic procedures – holds promise in understanding and treating cancer and digestive diseases as organoids can replicate some of the complexity of human organs.

With GI Research Foundation funding, Christopher Weber, MD, PhD, and Le Shen, MB, PhD, aim to answer the question of how often organoids prove predictive of tumor response in colorectal cancer patients. To this end, pathologists, gastroenterologists, and oncologists work together to match drug protocols applied to organoids to standard of care drug protocols administered to patients and then compare the effects of drug protocols on organoids to the effects of the same protocols on patients. This novel study also seeks to optimize and standardize organoid growth approaches and establish a bank and database of colorectal carcinoma organoid lines to support further research.

**Early Development of Immunotherapy for IBD**

Jun Huang, PhD

The ability to create sustained reduction/elimination of inflammation is key to successful treatment and potentially a cure for patients with IBD.

Jun Huang, PhD, and his team at the University of Chicago Pritzker School of Molecular Engineering received support for their research to lay the groundwork for a new immunotherapy for Inflammatory Bowel Diseases (IBD). IBD involves a multi-factor immunological imbalance that drives unhealthy inflammatory response that cause a patient’s symptoms.

Researchers have already identified a specific type of immune cell — T-helper type 17 (Th17) — as an important part of the body’s immune response in intestinal mucosa. In a healthy patient, Th17 cells are kept in check by regulatory T-cells (Tregs), but in IBD patients, these cells are out of balance, which leads to chronic inflammation. Because existing biologic therapies can lose effectiveness or fail altogether over time, discovering a new immunotherapy using the body’s own immune system to correct the imbalance found in IBD could be a gamechanger.

Primarily used today in cancer immunotherapy, chimeric antigen receptor (CAR) T cell therapy uses engineered CARs to target a specific surface protein and trigger specific T cell immune responses. In this study, Jun Huang, PhD, hypothesizes that targeting surface expressed IL-17 on T-helper 17 (Th17) cells, a highly inflammatory cytokine (small proteins important in cell signaling), with a CAR expressed on the surface of regulatory T cells will enable selective, localized production of inhibitory cytokines to suppress the inflammation caused by Th17 cells, thus converting “pro-inflammatory” signals to “anti-inflammatory” responses to eliminate/reduce excessive inflammation in IBD. Because IL-17-mediated inflammation signaling is often observed in the pathogenesis of various autoimmune disorders, such as psoriasis, leading Dr. Huang to believe targeting it can be beneficial in IBD as well.

Understanding research is a journey anyone can take.

Delivering on that promise, the Foundation began funding regenerative medicine projects like these.

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Addressing Community Health & Disparities in Digestive Diseases

With generous support from the GI Research Foundation and others, in 2022, the Digestive Diseases Center established and launched a multifaceted Community Health in Digestive Diseases (CHDD) program. The goal of the program is simple and ambitious: to improve the health of residents on the South Side of Chicago, who are disproportionately affected by chronic disease.

Led by Edwin K. McDonald, MD, IV, Assistant Professor of Medicine at the University of Chicago Digestive Diseases Center and trained chef, along with colleague Jeannine Wise, a chef and partner of world-renowned professional chef Rick Bayless, the CHDD program has established far-reaching roots in the Chicago community.

CHDD has established a curriculum of dietary nutrition and cooking techniques, which are employed in cooking classes for Chicago residents in Englewood, Garfield Park, North Lawndale and many other Chicago neighborhoods. In partnership with the Urban Institute’s Community Champions program, University of Chicago Pritzker School of Medicine residents also learn these techniques, and apply them with patients, to expand access to healthy cooking and nutrition.

Each class includes a nutrition lecture, cooking instruction, and an Ask the Doctor Q&A session. The overall goal of these classes is to help participants learn culinary skills to address health challenges like obesity, colon cancer risk, fatty liver disease, celiac disease, and inflammatory bowel disease. Following each session, participants provide an evaluation and information to further refine the curriculum for the next steps of the Community Health in Digestive Diseases program.

The curriculum is unique, and has been developed with the participants to meet their specific needs and address their specific questions. This curriculum focuses on key components of kitchen health and culinary methods, as well as anatomy and physiology.

For culinary methods, the curriculum includes: kitchen safety and sanitation; knife skills; roasting, braising, sautéing, and steaming as alternatives to frying; soup fundamentals; salad and vinaigrettes; and healthy baking.

The health awareness curriculum covers basic anatomy; the fundamentals of absorption and digestion; how to read a food label; diet and cancer; sodium and high blood pressure; diet and diabetes; gut health and the microbiome; healthy breakfast; and macronutrients.

In the next phase of the program, Dr. McDonald and Chef Jeannine will work with Eugene B. Chang, MD, Martin Boyer Professor of Medicine at the University of Chicago Digestive Diseases Center, to examine the effectiveness of a food and nutrition intervention on the composition of individual patients’ microbiome. This new information will help physicians understand the specific impact that diet and nutrition have on the microbiome, and help establish the role that educational interventions play in supporting digestive health.

Stories about this important work has been featured in both the Chicago Tribune and the Chicago Sun-Times. Contact info@girf.org for more information.

Making a Difference
Cooking Together

With Gene Chang, MD, Ed K. McDonald, MD, IV, and Chef Jeannine Wise lead a GI Research Foundation-supported initiative to better understand the role of nutrition and diet in the function of the body’s microbiome.
Research 2022

Through a competitive grant application process, the GI Research Foundation funded the following novel investigator initiated research programs in 2022.

**Characterizing the effects of ulcerative colitis on rectal structure, function and symptomatology using novel imaging modalities.**

Noa Krugliak Cleveland, MD

Even with resolution of bowel inflammation, many ulcerative colitis patients continue to experience disease symptoms related to stool frequency and urgency. Conversely, absent such symptoms, some patients show bowel inflammation during endoscopy or in histological examination. This study aims to explore what disease factors contribute to persistent bowel discomfort in patients, hypothesizing that structural and functional changes to the rectum resulting from chronic inflammation, rather than active inflammation itself, cause certain symptoms. Additionally, study investigators seek to expand how clinical tools such as MRI, surgical colectomy, and intestinal ultrasound can detect and monitor disease changes over time and evaluate the reversibility of these changes.

**Host and microbial predictors of ileal pouch inflammation in ulcerative colitis patients**

Sushila R. Dalal, MD

J-pouch patients present a unique population to study the development of new inflammation in inflammatory bowel disease. In these patients, the J pouch, acts as a “new rectum”, and often appears normal. However, about 40% of patients develop inflammation in the J-pouch, called pouchitis, over the first two years. When pouchitis doesn’t respond to initial treatment, patients sometimes develop either chronic inflammation or Crohn’s disease-like inflammation in the pouch, requiring them to resume immunosuppressive medications, or require removal of the pouch altogether. However, there currently is no good way to predict who will have a good quality of life with a J pouch and who will develop this inflammation. This study will look at the small intestine immune and microbial metabolite profile at the time of the surgery, in order to determine whether a certain host immune profile or pattern of microbial metabolites can predict J pouch outcomes. This information could yield a way to help make better decisions for patients at the time of surgery.

**Roles of microbiota-derived metabolites in colon cancer development**

Yan Chun Li, PhD

A high-fat, low-fiber Western diet has long been considered a risk factor for the development of colon cancer. This has been attributed to the disruption of the gut microbiota, and the production of short chain fatty acids in the gut, some of which has been thought to be protective against cancer development. However, the presence of one of these short chain fatty acids, acetate, and associated metabolic enzyme Acss2, may encourage the development of neoplastic (cancer) cells in the colon. Parsing these factors will help elucidate how dietary/nutritional factors and gut bacteria interplay to influence colon cancer development, which in turn may help identify new therapeutic targets (such as Acss2) for colorectal cancer treatment.

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Sushila R. Dalal, MD

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**Exploring the neurophysiology of central nervous system involvement in pediatric celiac disease and “brain fog.”**

Rachel Lieberman, Ritu Verma MBBS, Bana Jabri MD, PhD, Martina Williams, MD, MPH, & Julia Kleinhenz, MD

Though anecdotal observation points to a connection between celiac disease and “brain fog,” a cognitive/mood impairment typified by difficulties such as depression and diminished mental acuity, scientists lack the data necessary to explain brain fog as a symptom of celiac disease and to evaluate the impact of a gluten-free diet (the only known treatment for celiac disease) on brain fog. This study follows children newly diagnosed with celiac disease prior to and throughout the first year of their adherence to a gluten-free diet, assessing neurological manifestations of their disease via bloodwork, functional brain MRI, EEG, and psychological testing. In gathering measurable information about brain fog, correlating brain fog symptoms with celiac antibody levels, and tracking brain fog symptom on and off a gluten-free diet, study investigators seek to clarify the specific mechanisms of gut-brain interaction in pediatric celiac disease and its treatment.
Through a competitive grant application process, the GI Research Foundation funded the following investigator initiated research programs in 2022.

**Reprogramming stem cells to treat inflammatory bowel disease**

Cambrian Y. Liu, MD

Myriad medical therapies and surgical treatments treat the inflammation caused by inflammatory bowel disease, but even with effective treatment, for many patients, the underlying disease chronically returns. This study proposes to examine the role that deficient stem cells may play in the chronicity of IBD, and investigate whether “defective” stem cells may serve as an underlying mechanism in the disease state. Novel methods for stem cell research, including three-dimensional modeling of diseased tissue, imaging, lineage tracing, IBD mouse models, stem-cell biology, and bioinformatics and study design that capitalizes on the potential of regenerative medicine could hold the key to unlocking the promise of stem cell treatment for IBD.

**The role of bile acids in colorectal cancer disparities**

Sonia S. Kupfer, MD

African Americans are among the highest risk for colorectal cancer development, but the specific reasons African Americans develop this disease at higher rates than other groups remain unknown. This study will investigate the role that bile acids may play in this disparity, and utilize organoid technology and other cutting-edge techniques to study these population differences. This innovative study has high impact potential: to clarify the interrelated roles of diet, microbiome and host responses in colorectal cancer disparities. This discovery could translate into future intervention trials and new disease markers that ultimately will reduce cancer disparities.

**New diagnostic and therapeutic strategies for perianal Crohn’s disease**

Benjamin McDonald, MD, PhD

Perianal Crohn’s disease is a particularly aggressive form of Crohn’s disease encompassing perianal fistulas, perianal abscesses, anal fissures, and anal strictures. It affects approximately 25% of CD patients and is associated with a more aggressive disease course, a need for more surgical intervention, and significant negative impact on patient quality of life. Once perianal disease develops, current medical and surgical therapies are unable to reverse tissue damage, which leads to worse disease outcomes for patients. This study investigates the use of perianal ultrasound to detect perianal disease before it creates clinical symptoms, and also looks at inflammatory pathways for perianal disease in order to identify new, superior, treatment strategies.

**CRITICAL SUPPORT OF INFRASTRUCTURE**

GI Research Foundation Translational Core Registry

David Rubin, MD, Eugene Chang, MD, and Michael Charlton, MD

Through GIRF’s ongoing investment, the University of Chicago Digestive Disease Center maintains a large registry of over 35,000 biospecimens drawn from over 10,000 patients seen at the University of Chicago subspecialty clinics for IBD, liver disease, pancreatic disease, esophageal disorders, hereditary GI cancers, celiac disease, liver tumors, and obesity. Given the breadth of patient phenotypes, clinic data, and biospecimens available, this translational core database and biosample repository is widely utilized by investigators at the University of Chicago and beyond. Funding support for the research and clinical staff needed to run this registry, and ensures that this resource will continue to be utilized by physician scientists to produce high-quality research studies.

The Translational Core Registry is unique to the University of Chicago Digestive Diseases Center, and critical infrastructure for scientific inquiry, as it is a means of optimizing data collection not just for one study, but for many, and helps to facilitate interdisciplinary research across otherwise siloed areas of expertise.
Each year, the GIRF Associates Board awards early career grants to young investigators, providing a springboard at a critical time in an investigator's scientific career. These were the recipients of the 2022 awards.

**Early Career Award**

**Ankit Malik, PhD, Research Scientist**

**Title:** Role of antigen presentation by intestinal epithelial cells in T-cell immunity  
**Mentor:** Bana Jabri, MD, PhD  
**Type of Research:** Basic/Translational  
**Research Focus:** The sensing of IFN-y during colitis promotes the presentation of self and microbial antigens by the intestinal epithelial cells (IECs), that in turn mediate protective T cell (immune) responses.  
**Study subject:** Animal (mouse)  
**Impact:** Understanding the aberrant immune response to microbes living in the gut and deriving nutrition from their host is key to understanding the development of colitis. The epithelial tissue, or the thin layer of tissue that lines the intestinal tract, plays a role in this interaction. These studies will shed light on the nature of antigens presented by the intestinal epithelial cells, and the function of epithelial IFN-y-R, a specific signaling cascade. These studies use MHCI and MHCII mice genetically developed to help isolate these characteristics in colitis, and will provide important insights into our understanding of how IECs regulate mucosal immunity and inflammation.

**Early Career Award**

**Shabana M. Shaik, PhD, Research Scientist**

**Title:** Characterization of serum metabolites in Alzheimer's mice models with an antibiotic-altered gut microbiome  
**Mentor:** Sam Sisodia, PhD, Dept. of Neurobiology  
**Type of Research:** Basic/Translational  
**Research Focus:** Alterations in gut microbiome can influence integrity of blood-brain barrier and promote transfer of immunomodulatory metabolites through circulation to CNS to effect neuroimmune functions.  
**Study subject:** Animal (mouse)  
**Impact:** Neuroinflammation plays a part in the development of Alzheimer's disease and other forms of dementia. There are also observed sex differences in both the incidence rates of Crohn's disease and ulcerative colitis, as well as the Alzheimer’s disease in IBD patients. This study helps to elucidate the ways that microglia, or immune cells in the brain, are impacted by differences metabolism of and metabolites created by the gut microbiome, and that pathways that connect the gut and the brain.

**Early Career Award**

**Zhenrun J. Zhang, PhD, Postdoctoral Scholar**

**Title:** Impact of lantibiotics on human gut commensals  
**Mentor:** Eric G. Pamer, PhD  
**Research Focus:** Putative lantibiotic resistance systems (LRS) among human gut commensals (gut microbiome) contribute to the gut commensals’ resistance against gut- and food-derived lantibiotics. These dynamics are important in better understanding how to prevent drug resistant intestinal infections.  
**Study subject:** Human gut microbes  
**Type of Research:** Basic/Translational  
**Impact:** Interbacterial defense systems among human gut commensals (bacteria which receive nutrition from the host) are important in mediating resistance to lantibiotics (a kind of antibiotic well known in the production of dairy products, such as cheese). Understanding the structure-activity relationship of lantibiotics, and ecological implications of lantibiotic resistance systems in human gut microbiome in vivo, and better understanding these relationships can help guide development of novel therapeutics against enteric bacterial infections in future work.
2022 GI Research Foundation Annual Ball

The premiere fundraising event of the GI Research Foundation raised over $1.3 million dollars for GI research in 2022.

On Saturday, June 4, 2022, the GI Research Foundation Annual Ball celebrated the courageous patients and devoted physician-scientists fighting to prevent, treat, and cure digestive diseases. Held at The Geraghty, a chic event space in Pilsen, the event marked the triumphant return to an in-person gala experience, and was a smashing success – raising $1.3+ million dollars for research at the University of Chicago Medicine Digestive Diseases Center.

2022 Associates Board Cocktail Party

On Friday, September 23, 2022, the GI Research Foundation Associates Board and supporters came together at the Associates Board Annual Cocktail Party: [Re]United for GI Health.

Held at the Radisson Blu Aqua hotel in downtown Chicago, the cocktail party was the group’s first celebration and fundraising event since the beginning of the Covid-19 pandemic.

Jordan Hirsch, Associates Board President, thanked the energetic crowd and emphasized the importance of the evening, explaining, “We simply cannot fulfill our mission of advancing the science, medicine, and treatment of gastro-intestinal diseases at the University of Chicago Digestive Disease Center without your support. Thank you for meeting the moment with your generosity.”

The evening raised tens of thousands of dollars, funds which will support the Board’s annual grant competition for early career physician-scientists in Spring 2023. Event sponsors included corporate sponsors Home Infusion Options and Janssen; as well as the Huiras, Turban, and Grill families.

As the youngest Associates Board President in the organization’s history, Jordan Hirsch, saw the evening as a smashing success. “Just looking at this room tonight, it feels awesome to say we are here, together, and doing what the Associates Board does—raising money, and giving it away to researchers.”

Ira Hanan, MD
recipient of the 2022 Lifetime Achievement award, with Andrew Aronson, MD

David T. Rubin, MD
recipient of the Joseph B. Kirsner award, with Howard Grill

Karyn Hurwich and Kathy Shafer, Ball Co-Chairs
In 1995, at age 40, Shelly Miller had had rough six months and a series of health setbacks, including an arterial blockage, diabetes, and intestinal bleeding. The bleeding quickly led to her diagnosis of Crohn's disease, and Miller began treatment. When infliximab (Remicade) became provisionally approved for the treatment of Crohn's disease, Miller was one of the first people to receive it for treatment, and her case helped determine dosing intervals for future patients.

Miller had a demanding job as Vice President of Sales and Marketing for an auto parts distributor in Philadelphia. A career move later, Miller found herself in Chicago, in the care of the University of Chicago IBD Center team. Given the severity of her case, her family history of colon cancer, and the medical therapy available at the time, her best treatment option became surgery to remove her colon. When her IBD team recommended ileostomy surgery, Jan Colwell, APN, CWON, head of the Ostomy Care Clinic, stepped in.

"Jan is just amazing... I really credit her for the fact that I'm still alive. I really truly do... She was such an amazing advocate for me when things were really, really bad. We became closer through it, and we're very good friends now. She's just an amazing person," says Miller.

Colwell and the IBD team at the University of Chicago helped Miller transition to life with an ileostomy. While her first surgery, performed by senior colorectal surgeon Roger Hurst, was successful, subsequent complications from gastric sleeve, hernia, and reconstructive surgery necessitated additional treatment to correct stoma irregularities.

"[Post-surgery] A few years went by and I was struggling," explains Miller. "Jan [Colwell], God love her, she just kept sticking with me and advocating for me. She went back and she said, 'We cannot leave this 50-something year old woman, in the prime of her life, and her career, in a place where she can't work again, and she can't live her life.'"

Following corrective surgery for Miller's stoma, she was able to make a full recovery without further complications.

Now retired and residing near sunny Palm Springs, Miller now serves as the Secretary of Friends of Ostomates Worldwide (FOW-USA), an organization which helps to collect and distribute ostomy supplies internationally to patients who need them. For the past 12 years, Miller has served as a Board Member, newsletter editor, Public Relations Chair, and Vice President of FOW-USA.

"It's important for me to give back wherever I can. It's enormously gratifying," says Miller.

Larry A. Pogofsky was a die-hard baseball fan who was also passionate about healthcare research thanks to a life-changing experience at the University of Chicago Medicine Digestive Diseases Center.
STATEMENT OF ACTIVITIES
Year Ended June 30, 2022

REVENUE AND SUPPORT
Fundraising - special events $1,508,206
Donations - unrestricted $211,760
Bequests - unrestricted $579,760
Interest and dividend income $65,635
Realized loss on investments $(1,092)
Unrealized loss on investments $(117,319)
TOTAL REVENUES AND SUPPORT $2,246,950

EXPENSES
PROGRAMS AND SERVICES
Grant awards $1,525,364
Salaries and benefits $210,028
Venues for educational programming $86,673
Newsletter and education $25,587
Program office expenses $14,855
Travel and meetings $4,958
PROGRAMS AND SERVICES TOTAL $1,867,465

GENERAL AND ADMINISTRATION
Salaries and benefits $70,010
Professional fees $12,804
Rent and office expenses $7,353
Meetings $1,486
GENERAL AND ADMINISTRATION TOTAL $91,653

FUNDRAISING
Fundraising event expenses $269,108
Salaries and benefits $70,010
Donation processing fees $20,057
Postage and office expenses $4,951
FUNDRAISING TOTAL $364,126

TOTAL EXPENSES $2,323,244

CHANGE IN NET ASSETS $(76,294)

NET ASSETS, BEGINNING $4,240,989

NET ASSETS, ENDING $4,164,695

For over 60 years, our research investments have contributed to a greater understanding of digestive disease and its treatment options, thanks to the generous support of our donors. We take seriously our responsibility to the digestive disease community, and we work hard to maximize every dollar given to our mission.

Howard Grill, GI Research Foundation Board Member and Vice President Finance/Treasurer

STATEMENT OF FINANCIAL POSITION
Year Ended June 30, 2022

ASSETS
CURRENT ASSETS
Cash and cash equivalents $873,953
Investments $2,946,319
Accounts receivable $338,463
Prepaid expenses $24,000
Total current assets $4,182,735
TOTAL ASSETS $4,182,735

LIABILITIES AND NET ASSETS
CURRENT LIABILITIES
Accounts payable $9,643
Accrued expenses $8,397
TOTAL LIABILITIES $18,040

NET ASSETS
Without donor restrictions $4,164,695
With donor restrictions $4,164,695
TOTAL NET ASSETS $4,164,695

TOTAL LIABILITIES AND NET ASSETS $4,182,735

$1.5M

invested in funded digestive disease research

80% of your support goes directly to research grants and educational programs
Board Leadership 2022

2022 BOARD OF DIRECTORS

OFFICERS
Yekaterina Chudnovsky – President (outgoing); Chairperson (incoming)
Kathryn Karmin Shafer – Executive Vice President (outgoing);
President (incoming)
Howard A. Grill – Vice President of Finance and Treasurer
Mark de Souza – Vice President of Fundraising and Development
Blana Lanson, MD – Vice President of Fundraising and Development
(outgoing); Vice President of Grantmaking (incoming)
Mark A. Waldeck – Vice President of Marketing and Communications
Benjamin Pogofsky – Vice President of Board Development
Brad Peterson – Secretary (incoming)

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Gastroenterology, Hepatology and Nutrition, The University of Chicago Medicine
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Inflammatory Bowel Disease Research Center in the Biological Sciences Division, The University of Chicago Medicine
Michael R. Charlton, MBBS, Professor of Medicine; Director, Center for Liver Diseases; Co-Director, Transplant Institute, The University of Chicago Medicine

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Ralph Kaufmann, deceased
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Aaron Rosdal, Prologis
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Ashley Sidebottom, PhD – Scientific Advisor, Platform Director, Host-Microbe Metabolomics, University of Chicago Duchossois Family Institute

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