



LYNNE COHEN FOUNDATION

CELEBRATING 25 YEARS OF WOMEN'S HEALTH, WELLNESS, AND PREVENTIVE CARE

The Lynne Cohen Foundation has served women and families at increased risk for ovarian and breast cancer for over 25 years, providing them with access to cutting edge, cross-disciplinary medicine at leading cancer centers nationwide.

Lynne Cohen Foundation Preventive Care Programs enable at-risk women to see all the necessary specialists in a single day, including breast oncologists, gynecologic oncologists, research nurses, genetic counselors, and data managers. This is the cancer care and attention we'd all hope to receive and we are so grateful to our supporters for helping us expand this important field. We are always building our LCF and Peony Project communities. Thank you for being a part of this mission. Your commitment inspires us. Past, present, and future.

AMY COHEN EPSTEIN

Co-Founder, Lynne Cohen Foundation

JENNIFER LEWIS Founder, Peony Project



1998

The Lynne Cohen Foundation is established in honor and memory of Lynne Cohen.

Immediately, LCF gifts a \$150k endowment to USC Norris establishing a Fellowship and LCF Clinic.

lynnecohenfoundation.org
peonyproject.org
the-seam.com

@lynnecohenfoundation
@wearetheseam

LADIES' HOME
JOURNAL
June 2000



**FOLLOW-UP:
A MOTHER'S LEGACY**

In 1999, sisters Amy and Erin Cohen and Whitney Rosenson were intrigued by a story in the March issue of *Ladies' Home Journal* about Maurie Markman, M.D., an oncologist who was working with a team of researchers at the Cleveland Clinic Taussig Cancer Center to develop an early-detection blood test for ovarian cancer. The sisters had just started the Lynne Cohen Foundation in memory of their mother, who died of ovarian cancer in 1998, at the age of 53. "One of the reasons ovarian cancer is so deadly is that there are no warning signs," says Amy, 23. Excited by Markman's early detection test, she and her sisters raised \$100,000 for his research.

"We're doing this so others will not have to go through what we did," says Amy. "We hope that no one will lose their mother, sister or aunt to this terrible disease." —Christine Many

"If there had been a simple blood test, doctors could have done something earlier to save our mother," says Erin Cohen, above with Amy and researchers Maurie Markman, M.D., and Yan Xu, Ph.D.

Lynne Cohen

For more about the Lynne Cohen Foundation, call 877-682-7911

20k+

women have visited LCF Preventive Care Programs nationwide since 2001

12k+

cancers detected thanks to LCF Preventive Care Programs

30%

of LCF Preventive Care Clinic patients are uninsured



“THIS FOUNDATION UNDERSTOOD VERY EARLY ON — WHEN MOST PEOPLE DIDN'T GET IT — HOW IMPORTANT IT WAS TO PURSUE THE ISSUE OF GENETICS AND GENOMICS...

THEY UNDERSTOOD THAT YOU COULD USE THIS INFORMATION TO PREVENT CANCERS.”

DR JULIA SMITH, LCF Medical Advisory Board Member and Clinical Director of the Cancer Screening and Prevention Program at the NYU Perlmutter Cancer Institute



1999

Lynne Cohen Foundation grants \$100,000 to the Gynecologic Cancer Program of the Cleveland Clinic to further early detection research for ovarian cancer.



2000

Amy Cohen Epstein and LCF board determine the mission of the Foundation: providing clinical preventive care for at-risk women regardless of their financial status.



2012

Georgia Cord's family establishes the Peony Project in her name, honor, and memory.

The Peony Project becomes the educational branch of the Foundation to expand awareness, grow healthier families, and aid in the fight against women's cancers.





“SOMETHING WE’VE LEARNED OVER THE PAST 40 YEARS IS THAT EXPOSURES CAN HAVE LONG-TERM, DISTAL HEALTH EFFECTS.”

Dr Linda Kahn, PhD, MPH, NYU Department of Population Health



The Series *for*
Education
& Awareness
in Medicine

2018

LCF establishes The SEAM (Series for Education and Awareness in Medicine), a multi-platform initiative providing concrete avenues for education and greater impact in medicine.

THE WORKSHOPS

Drawing from a curated network of professionals and experts, The Seam hosts intimate salons and panels in NYC, LA, and even Abu Dhabi, featuring innovators in the world of wellness, education, technology, and prevention.

THE PODCAST & PLATFORM

Connecting women with stories from the cutting edge of medicine, wellness, and entrepreneurship. The SEAM's online publication and community platform offers practical, expert-backed wellness advice.

THE SEAM PODCAST

We've had the honor of interviewing...



- FDA Director of Generic Drug Policy, Maryll Toufanian
- Holistic Nutritionist and Wellness Expert, Elissa Goodman
- Deloitte's Very First Chief Wellness Officer, Jen Fisher
- Hope for Depression Research Foundation Founder, Audrey Gruss
- Founder of August Period Care, Nadya Okamoto
- Life-Course Epidemiologist, Dr Linda Kahn PhD, MPH of NYU
- HPV Awareness Activist and Actress, Marcia Cross
- Katerina Schneider, Founder and CEO of Ritual
- Bridgett Burrick Brown, Founder of the Beyond Beauty Project
- Suze Schwartz, Founder of Unplug Meditation
- Pre-vivor and Advocate, Tayler LaBellarte
- Gloria Feldt, Former CEO + President of Planned Parenthood
- Jenny Galluzzo, Co-Founder of The Second Shift
- Jenna Blake Jewelry Founder Jenna Grosfeld

And many more!

“WE UNDERESTIMATE THE IMPORTANCE OF TRUTH IN OUR WELLNESS JOURNEY.”

Elissa Goodman, Holistic Nutritionist



2023

Over **20,000 women** have now been served at a Lynne Cohen Preventive Care Clinics, and we are over **30,000 donors** strong!

To date, LCF has raised more than **25 million dollars**, all of which has been dispersed to preventive care programs and research.

LOS ANGELES
NEW YORK
BIRMINGHAM
WASHINGTON DC
NEW CANAAN

ASPEN
BOISE
HOUSTON
SUN VALLEY
ABU DHABI

Our international reach



In Loving Memory

Lynne Cohen's daughters take up her fight against the ovarian cancer that killed her



CRUSADERS
Lynne Cohen, 67, died of ovarian cancer in 2000. Her daughters, Erin, Whitney, and Amy, have formed a support group for women with the disease. They are now raising money for research and awareness.



By Erica Berger



"We know our mom is proud of us," says Amy (center, in her New York City apartment with her sisters Erin, right, and Whitney).

PHOTOGRAPH BY ERICA BERGER/CORBIS OUTLINE



People Magazine Feature, 2000

FOUNDERS' CIRCLE

\$750

Enables two uninsured women to receive mammograms.

\$1,500

Enables six uninsured women to receive potentially life-saving blood tests.

\$5,000

Provides 13+ women with genetic testing for the BRCA mutation.

\$10,000

Provides comprehensive gene sequencing tests to three uninsured women with the support of genetic counselors.

\$25,000

Facilitates cutting edge strategies and cross-institutional collaboration, advancing the field of preventive medicine and early detection in the Lynne Cohen Foundation Preventive Care Clinics.

Joan Abrams
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Bonnie Citron
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Natasha Ellis
Kelly Evans
Renette Ezralow*
Jordy Harris Feldman
Gabrielle Fisher
Nancy Freedman
Amanda Freeman
Jenny Galluzzo
Amy Gordon
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Elizabeth Kivowitz
Amanda Carmel Kramer
Jessica Kruse
Kerri Lauter
Jane Mass
Ally Miller
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JULIA SMITH, M.D.
Clinical Director of the Cancer Screening and Prevention Program at NYU Perlmutter Institute

*In loving memory



THE SEAM PODCAST: IN CONVERSATION WITH DR. JULIA SMITH

Dr. Julia Smith is an icon in the world of women's cancer prevention and gynecologic oncology. Four decades ago, she was the first woman in the NYU MD PhD program. Today, she is the Clinical Director of the Cancer Screening and Prevention Program at the NYU Isaac and Laura Perlmutter Cancer Institute. In this very special interview, Dr. Julia Smith discusses the ever shifting landscape of ovarian cancer prevention, the Lynne Cohen Foundation's outsized impact in the field, and the importance of genetic research in the path forward. Visit the-seam.com to learn more.

AMY COHEN EPSTEIN: I am so excited to be able to speak with you today, Dr. Julia Smith.

Did you always know that you wanted to be a doctor and go into medicine? At what point on that trajectory did you decide to go into oncology?

DR. JULIA SMITH: My father was a surgeon. So, you could say that it was in the family blood...

[And] oncology was perfect for me... This was the 1980s. Oncology combined all my interests in science and in biology and molecular biology and genetics. And then,

of course...Mary-Claire King cloned the BRCA genes. When she cloned the BRCA genes, I knew that I wanted to be involved in cancer prevention. Because once she was able to show that there was a genetic predisposition to cancer, it was clear that the whole field was going to just burst right open.

That was the beginning. And then, it was you and your family, The Lynne Cohen Foundation. This Foundation understood very early on — when most people didn't get it — how important it was to pursue the issue of genetics and genomics. (Genomics is the genetics of the tumor tissue. And genetics usually refers to

what's called germline genetics, which is the genes you're born with).

Lynne Cohen understood that you could use this information to prevent cancers.

ACE: Doctors didn't understand it at the time, but scientists did. What is the distinction?

DR. SMITH: I have a PhD in molecular biology. But most doctors... they understand a lot of science but they're not at the laboratory bench.

They're not looking at the molecular level, or the cellular level at the impact of different maneuvers. Back then, genetics was a whole new concept. You know, nobody believed — not the doctors, not the scientists, not the public — nobody believed that cancer had a genetic basis. And they laughed when, in the '60s or '70s or even the '80s, someone would say there could be a genetic basis.

Nobody doubts the genetic basis now. But it's a hard thing for doctors who are incredibly busy trying to take care of all kinds of difficult problems and trying to be there for their patients. It's not an easy thing to then integrate an entirely new concept and field.

So, it takes time. And some of that is good, because you don't want doctors jumping on bandwagons, which has happened.

ACE: People ask me, when they've had a loved one who has been recently diagnosed with ovarian cancer, "Where should I go? Who should I see?" And I always say, "You need to be at a research institution seeing a doctor who is a scientist and researcher," because their level of knowledge is significantly different from someone who has not been in that kind of setting. Obviously, to be with someone like you, who, in addition, has this incredible patient care, is the best of both worlds.

I had one other thing I'd like to get into with you. My mom talked about this so much, and you know, she passed away over 20 years ago. But it was relevant then, and it's certainly relevant now. Cancer knows no boundaries. It doesn't care how much money you have. It doesn't care the color of your skin. It doesn't care about your background. It doesn't care if you have insurance. It's just one of those things that happens to anybody. It is completely non-discriminatory.

“BEING AT AN ACADEMIC INSTITUTION, EVERYONE’S TRYING TO BE ON THE CUTTING EDGE CLINICALLY AND SCIENTIFICALLY. SO YOU HAVE AN OPPORTUNITY TO TEACH AND TO MENTOR, WHICH IS WONDERFUL, BECAUSE YOU GET TO SEE THE NEXT GENERATION COMING ALONG.”

DR JULIA SMITH, LCF Medical Advisory Board Member and Clinical Director of the Cancer Screening and Prevention Program at the NYU Perlmutter Cancer Institute

My dad came from nothing and worked his whole life to be able to give his family everything that he didn't have. It was the hardest thing for him to have my mom get cancer and then pass away, because it didn't matter how successful he was financially. There was nothing he could do. It really did change him for the rest of his life. That is why it was always so important for us as a foundation to try and offer our preventive care services to all women from all walks of life. And

you've been so involved in that. How can we do that better? How can we better serve the uninsured and minority women who really need these preventive services?

DR. SMITH: This is so important. It's just like women have different biology than men; you can't look at heart disease in men and try to treat women that way. You can't treat every group the same... And that's something, you know, a lot of

