



Foundation of America, Inc.
Texas Gulf Coast Chapter
and El Paso Branch

L.E. Network

L U P U S E R Y T H E M A T O S U S

Volume 16, Number 1

Spring 2004

Houston, Texas

Purple Hats, Butterflies and Just Being a Teen . . .

Purple hats and butterflies call attention to a "mother-daughter" team whose fashion choice has brought curiosity to lupus awareness. One year ago, Tia Harris, now age 13, was diagnosed with lupus after seeing many doctors with complaints of joint and muscle pain, fatigue, and a rash on her face that wouldn't go away.



Tia and Mary with their purple hats and butterflies.

"Being diagnosed with lupus was a scary thing", said Tia. "I didn't know what lupus was...but, I knew that in the past a family member had died from lupus, and now, why me and how did I get this?" Up until then, Tia was doing what normal teenage girls do, making new friends and sharing experiences, being unique and growing up too fast with boundless energy. Now, she was faced with new and difficult challenges, learning how to live with a chronic illness that she knew nothing about.

Tia was not the only one going through changes because of lupus. Mary, Tia's Mom, found that she had much to learn. She moved from, "Oh my God, what is lupus?" to "What do I need to do to take care of my daughter?" Feelings of helplessness turned to taking charge. Mary learned how important it was for her daughter to take responsibility for herself. Tia and her Mom became a team and with each new day, they learn more and more about self-managing and living with chronic illness. "Learn about your medications and how to take them responsibly and learn how to respect your body", is her message to Tia and other young adults with lupus. Together, they went to see a nutritionist to learn about eating well, the right kind of exercise and getting plenty of rest to control lupus.

"I had to get a hold of myself because my pampering was making Tia feel helpless," Mary said when asked about difficulties facing a parent of a child with lupus. "While it is a natural inclination for a parent to become over-protective, I had to learn how to let go from time to time. I am learning to be a good listener. Sometimes, even though Tia may look like she is having a good day, she is not. I have to listen to what is going on inside of her...I have to hear her pain."

What do teens with lupus do? "They keep going, they keep on being teens, but they must learn to make positive decisions that help them live with chronic illness in the best way possible" said Mary. Tia is busy going to school, interacting with her peers, and having fun. She is still learning what she can do and when she needs to set limits. The task at hand is always to minimize painful circumstances, both physically and emotionally. Tia and her Mom work hard to keep a healthy attitude (fragile, yet strong) of "we will work it out".

Tia participates in speech and debate classes and really enjoys speaking, saying it is one of her favorite things to do. "I am good and now I have much to talk about", she says. She is open about her personal experience with lupus, and still defining the need to integrate it into her everyday life. She has no problem telling her friends, peers, and her teachers about lupus. She made the decision to educate herself and others right up front, creating understanding and support and letting go of the need to defend her illness. "I like it when they ask me questions and I want them to know that lupus is not contagious", says Tia.

Tia wants other teens with lupus to know that they can cope and use their teen power to learn about lupus and the self-management skills that they need most for a successful future. Get the facts about lupus, take good care of yourself, and talk about lupus because talking about it makes it feel less threatening. Having lupus is not your fault, it just happens.

Although Tia knows that currently there is no cure for lupus, there is hope (that little spark that nurtures the personal side of lupus). And with that little spark, sunscreens, and purple hats, she will keep going, talking to others about lupus, learning to live with the challenges of this disease, and...just being a teen! ❀

By Sharon Mack

A MESSAGE FROM THE PRESIDENT

Dear Lupus Supporters,

Our Gulf Coast chapter's goals have historically been two-fold: to provide education and support to lupus patients and the community as well raising funds to further the search for a cure. Even with the challenging economic climate of the last couple of years, we've been successful with both goals.

Under the able guidance of our Education Director, Sharon Mack, the chapter has significantly expanded its reach and quality of patient and community services. Furthermore, our chapter's support of national and local research efforts has continued unabated through the on-going support of our members and several generous memorial donations.

On the national level, the Lupus Foundation recently declared 2003 as a watershed year for research and education on lupus. Affecting approximately 1.5 million people, lupus has been the women's health issue that gained little or no attention in previous years. However, in more recent years lupus has begun to attract national attention and resources.

To recognize this progress, the Lupus Foundation of America (LFA) has compiled a list of ten major achievements during 2003 and posted them on the lupus website. These milestones were achieved by a coalition of efforts from researchers, private industry, Congress, federal agencies and the entire LFA organization, including you, the member.

The "top ten" advances in lupus for 2003 are:

- ◆ Studies on genes and blood samples provide insight into the origins of lupus.
- ◆ Scientists discover changes in genes that may be risk factors for rheumatic disease in African American women with lupus.
- ◆ Studies find women with lupus at greater risk for developing heart disease.
- ◆ An existing drug, CellCept, has been shown to be a potential new treatment for lupus kidney disease.
- ◆ Biotechnology and pharmaceutical industries are increasing their investment in lupus research.
- ◆ The Food and Drug Administration (FDA) develops a roadmap to encourage private investment in lupus drug development.
- ◆ The Centers for Disease Control and Prevention (CDC) initiates project to study U.S. incidence and prevalence of lupus.
- ◆ National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIH/NIAMS) launches federal coordinating body to respond to lupus.
- ◆ LFA launches new awareness campaign and national magazine, Lupus Now, to heighten public understanding of lupus.
- ◆ LFA initiates Continuing Medical Education (CME) program to bring the latest science on lupus to physicians.

These top ten breakthroughs are the springboards of hope for every lupus patient and their families. Let us, the members of the Texas Gulf Coast Chapter, be vigilant as we march toward our dual goals in 2004 and to another top ten advances. ☘

Best regards,

Janice Crawford

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EDUCATION

The Latest Advances in Lupus Research and Vacationing in the "Big Apple"

Patient Announcement: The 5th International Patient Congress will be held in New York City May 9th through the 13th. This is the first Congress of this kind to be held in the United States. Comprehensive meetings are planned for lupus patients and interested family and friends and will include topics such as conventional treatments, complimentary and alternative therapies, hormones, genetics, lung and heart disease, brain connections, and poster sessions. The meeting will end with a dinner gala at the Copacabana.



This Congress is being held in conjunction with the Professional Researchers and Clinicians meeting which provides the opportunity to enhance communication among leaders and share the latest scientific advances in lupus research. Patients and professionals from around the world will come together to discuss progress and the future regarding lupus.

If you want to be part of this extraordinary patient and professional gathering, the classical arts, the Broadway Theater, and if you want to explore some of the most excellent cuisine in the world, then plan to visit the "Big Apple" in May. Please call the chapter office to receive a booklet describing the program content, venue, and registration information. ☘

Lupus Foundation of America Appoints Medical Director

In January, the Lupus Foundation of America, named Joan Merrill, M.D. as the organization's first Medical Director. In this consulting position, Dr. Merrill will assist the LFA Board of Directors and professional staff to implement expansion of the organization's programs of biomedical research, professional education, and public policy.

Dr. Merrill is Member and Head of the Clinical Pharmacology Research Program at the Oklahoma Medical Research Foundation (OMRF), a leading center for lupus research in the United States. She also is OMRF Professor of Medicine at the University of Oklahoma Health Sciences Center, and Adjunct Associate Professor of Medicine at New York University Medical Center. Dr. Merrill is a member of the Systemic Lupus International Collaborating Clinics, serves as a consultant to the Arthritis Advisory Committee of the U.S. Food and Drug Administration, is a member of the Clinical Research Subcommittee and the Committee on Research of the American College of Rheumatology, and actively serves on grant review committees at the National Institutes of Health (NIAMS/NIH).

Dr. Merrill received her undergraduate degree from Vassar College and her medical degree from Cornell University Medical College. She is board certified in internal medicine and rheumatology, and is a member of the New York Academy of Science, the American College of Rheumatology, and the Henry Kunkel Society, among other professional associations.

"We are delighted to welcome Dr. Merrill as Medical Director of the Lupus Foundation of America and look forward to working with her to advance the pace of biomedical research on lupus and the national research agenda for this life-diminishing and life-threatening disease," said Sandra C. Raymond, LFA President and CEO. ☘

MARK YOUR CALENDAR

Please join us for the Second Annual Spring Coffee and Fashion Show

Wednesday,
April 21, 2004
10:30 am-12:30 pm

6 Shadder Way
Tickets \$50.00

RSVP
713.529.0126



A rash across the cheeks and nose resembling a "butterfly" can be a symptom of lupus. The butterfly has become the Lupus Foundation of America's national symbol of hope.



ASK THE EXPERT

Lupus and Arthritis

By: Robert Meador, MD

Rheumatologist, Baylor Medical Center of Garland Hospital, and a member of the Board of Directors, LFA North Texas Chapter

Many people with lupus suffer from joint pain. Of the 1.4 million Americans living with this disease, about 88 percent suffer from arthritis. Lupus often affects people in the prime of their lives, causing devastating results in work and personal life. About 90% of those afflicted are women; they are often struck in the childbearing years, between the ages of 15 and 45. Although the cause is largely unknown, we do know that the immune system malfunctions in this disease, mistakenly recognizing normal body tissues as foreign. As such, many parts and systems in the body may be affected; the joints remain one of the most common places of attack.

Lupus affects both the large and small joints, often in a symmetric manner. That is, if one hand is affected, then often the opposite hand is affected as well, not unlike rheumatoid arthritis. As lupus is an immune disease, unregulated inflammation may cause swelling within the capsules of these joints. Frequently the tendons and muscles surrounding these joints are affected as well. Deformities may occur as tendons rupture or develop contractures from long standing inflammation. This can lead to further pain and disability. About 1/3 of those with lupus suffer from recurrent attacks.

There are several warning signs that may signal a true arthritis related to lupus. These include a feeling of warmth or swelling in the joint, pain, and decreased ability to move the joint. Occasionally there may be redness around the joint. These are all signs of an inflammatory condition. It is important to be evaluated promptly by a physician as soon as these signs occur. Other conditions may mimic lupus-induced arthritis. These include osteoarthritis, avascular necrosis, infection, and other types of arthritis. Pain around the joint may signal an associated bursitis or tendonitis. Any joint can be afflicted by lupus, but the fingers, wrists, elbows, knees and hands are most commonly involved.

There are several tests your physician may perform to evaluate what kind of arthritis is present. X-rays in early lupus arthritis are often normal, only showing soft tissue swelling around the joint. An increased sedimentation rate found in blood tests may signal an inflammatory condition. It is important to realize that the presence of an ANA (antinuclear antibody) in the blood does not by itself confirm the

diagnosis of lupus. Many different factors must be taken into account when making this diagnosis. Your physician may perform a joint aspiration; that is, he/she may remove fluid from the joint through a needle and send it for further studies. This is particularly helpful when an infection is being considered.

Although there are no cures for lupus, remission may sometimes be achieved through proper self-care and medications. Remission is characterized as absence of signs or symptoms related to the disease. Treatment for arthritis depends on the severity of the disease. Mild symptoms (i.e. mild joint pain without swelling) may be treated with a combination of rest, ice, heat, and gradual physical activity, all prescribed by your doctor. Moderate symptoms (i.e. stiffness and swelling in large and small joints) may require non-steroidal anti-inflammatory medications, acetaminophen, or a combination of the two. Antimalarials such as hydroxychloroquine (Plaquenil) are often effective long-term treatments, as they modulate the immune system. Severe flares (i.e. disabling pain and swelling interrupting daily activities) often require some form of corticosteroid treatment. Your doctor will attempt to wean steroids to the lowest level that controls your disease, as long-term use of this medicine is fraught with serious potential side effects. Some people with lupus will nevertheless require chronic low doses of steroids to keep the disease in remission. Occasionally other drugs that modify the immune system are used, such as methotrexate. They are also called steroid sparing agents, as they will sometimes help people reduce or eliminate the need for steroids.

It may not be possible to eliminate the signs or symptoms of lupus completely. However, long-term treatment should be balanced with the potential side effects of medications. Your doctor will strive to prevent and treat the most serious complications of lupus, while minimizing the sequelae of pain that comes with long-standing lupus. Further research for possible cures and better treatment is needed and is ongoing. In the meantime, it is important to work with your doctor to achieve a medication balance, minimize stress, and maximize your quality of life. ☞

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PREGUNTELE AL EXPERTO

EL Lupus y la Artritis

Escrito por: **Dr. Robert Meador, MD**

Reumatólogo, Centro Médico de Baylor del Hospital Garland y miembro de la Junta Directiva, LFA, Región Norte de Texas

Muchas personas con lupus sufren de dolores en las articulaciones. El 88 por ciento de las 1.400.000 personas que tienen lupus en los Estados Unidos de América padecen artritis. El lupus por lo general afecta a las personas en las etapas más productivas de sus vidas, causando resultados devastadores en el ámbito laboral y personal. Aproximadamente el 90 por ciento de los afectados son mujeres; muchas comienzan a padecerlo a la edad de tener hijos, entre los 15 y 45 años de edad. Aunque la causa es mayormente desconocida, se sabe que el sistema inmunológico funciona erróneamente y no reconoce como suyos los propios tejidos del cuerpo. Por lo tanto, muchas partes y sistemas del cuerpo pueden verse afectados siendo las articulaciones las que más lo padecen.

El lupus afecta las articulaciones mayores y menores, muchas veces en forma simétrica. Esto quiere decir que si una mano es afectada, por lo general la otra lo es también, similar a lo que sucede en la artritis reumatoide. Como el lupus es una enfermedad inmunológica, suceden inflamaciones que pueden causar inflamación dentro de las cápsulas articulares. Con frecuencia los tendones y músculos que rodean a las articulaciones también se ven afectados. Si la inflamación es de larga duración pueden presentarse deformaciones debido a la ruptura de los tendones o a las contracturas. Esto puede causar mayor dolor y discapacidad. Aproximadamente un tercio de las personas con lupus sufren ataques recurrentes.

Hay varios signos que pueden indicar que la artritis es causada por lupus. Estos incluyen sensación de calor o hinchazón en las articulaciones y disminución en la capacidad de movimiento. En ocasiones se presenta enrojecimiento alrededor de la articulación. Estos son todos signos de inflamación. En estos casos es importante que un médico haga una evaluación lo antes posible. Los síntomas de otras enfermedades pueden semejarse a los de la artritis inducida por lupus. Estas incluyen la osteo-artritis, necrosis avascular, infección y otros tipos de artritis. El dolor alrededor de la articulación puede estar asociado a una bursitis o a una tendinitis. Todas las articulaciones pueden verse afectadas por el lupus pero las que más lo padecen son las de los dedos, muñecas, codos, rodillas y manos.

Hay varias pruebas que el médico puede hacer para evaluar qué tipo de artritis se padece. En pacientes que recién comienzan a padecer artritis causada por lupus muchas veces muestran imágenes radiológicas normales, que muestran solamente inflamación en el tejido blando alrededor de la articulación. El incremento de sedimentos en la sangre también puede indicar que se padece una inflamación. Es importante saber que la presencia de anticuerpos antinucleares (antinuclear antibody, ANA) en la sangre, por sí sólo no constituye una

causa determinante de lupus. Muchos otros factores deben tomarse en consideración cuando se hace un diagnóstico. El médico quizá decida hacer una biopsia por aspiración en la articulación. Para ello se remueve con una aguja líquido de las articulaciones. Esta es una medida importante cuando se presume que hay una infección.

Aunque no existe cura para el lupus, a veces se consigue suprimirlo mediante el cuidado personal y los medicamentos. Se considera que se ha logrado una remisión cuando no se presentan síntomas ni signos de la enfermedad. El tratamiento de la artritis depende de la gravedad del caso. Los síntomas leves, por ejemplo un poco de dolor sin hinchazón, pueden ser tratados con descanso, frío, calor y graduar la actividad física, todo esto prescrito por el doctor. Los síntomas moderados como el endurecimiento y la hinchazón de las articulaciones mayores y menores pueden requerir medicamentos anti inflamatorios no esteroides o acetaminofeno e inclusive la combinación de ambos tipos de drogas. Las drogas contra la malaria como la hidroxycloquina (Plaquenil) son por lo general eficaces para los tratamientos a largo plazo debido a que controlan el sistema inmunológico. Los ataques sorpresivos severos, como por ejemplo el dolor intenso y la hinchazón que obligan a interrumpir las actividades diarias por lo general se tratan con medicamentos córtico-esteroides. El médico por lo general reserva el tratamiento con esteroides sólo para cuando sea indispensable controlar la enfermedad ya que el uso prolongado de esta droga puede tener efectos secundarios muy serios. Sin embargo, algunas personas con lupus requerirán dosis bajas de esteroides para mantener la enfermedad en remisión. En ciertas ocasiones se utilizan otras drogas que modifican al sistema inmunológico, como la metotrexate. Estos también se llaman agentes reemplazantes de los esteroides (steroid sparing agents) ya que reducen o eliminan la necesidad de prescribir esteroides.

Quizá no sea posible eliminar completamente los signos y síntomas del lupus. Sin embargo, debe tenerse en cuenta los potenciales efectos secundarios de los medicamentos si se prescribe un tratamiento a largo plazo. El doctor intentará prevenir y tratar las complicaciones más serias del lupus al mismo tiempo que tratará de minimizar las secuelas del dolor que son características del padecimiento prolongado de esta enfermedad. Es necesario seguir investigando para poder encontrar la cura y los mejores tratamientos contra el lupus. Mientras tanto, es importante que siga las indicaciones de su doctor para lograr un equilibrio entre los medicamentos, la reducción del estrés y la mejora de su calidad de vida. ❧

Re impresión con permiso del boletín de 'LFA North Texas Chapter' del 30 de enero de 2004, Volumen 1, Edición 4

EVENTS

HP Houston Marathon "Run for a Reason" Raises over \$9,000 for Chapter Services.

With carbo-loading as my only training exercise I felt pretty good about my upcoming 5K performance. As you may know the HP Houston Marathon and Half Marathon starts at 7:00 a.m. The 5K starts at 7:20. I arrived on the scene about 6:30 a.m. and could not believe all of the people on a beautiful crisp morning as the sun begins to rise. It really was exciting.

My bib was attached and I quickly discovered the color-coding system that identified me as a 5K entrant. At this point I have to admit feeling like a real lightweight compared to all of the real marathoners, but hey, it was great to be there. The crowds were considerably smaller after the start of the race, because they all ran away! My fellow 5K participants and I took off to the sounds of a marching band. The 5K group was quite a bit more diverse than the marathon group as you might imagine. Young kids, older (at least older than me) folks, of all sizes, runners, joggers, and walkers, many of these folks were doing this for a charity or cause.

While all of the marathoners went west, the 5K group went east and I tried a nice leisurely pace and passed the one-mile mark at 12 minutes, only to see the front of the pack already doubled back and sprinting back towards downtown. Well now we are going through the near east neighborhood of mixed residential and commercial, and around the turn to the way back. There was a group of folks with the marching band pressing up against them to spur them on, followed immediately by a police car (lights flashing). I guess this was a not so subtle way of saying, "get along little doggie".

I can't tell you my time at mile two, because the very competent timer was so mesmerized by the stopwatch, she did not say a word or mention the elapsed time. Finally we are back under highway 59 and into downtown. Another band, and yes, it is only a 5K, but a rush of adrenaline with the combination of the band and seeing the finish line, I am determined at this point to finish in the top 1/2 and to not let anyone pass me.

Oops. We can see the finish line, but we don't get to go there directly. I may have started running too soon. A runner passes me and I pick up the pace. Only 200 more yards and I am considering knocking down old ladies and men with canes to catch up to this runner who obviously didn't know she was not supposed to pass me. I have no idea what I am doing, but running like a man possessed.

I catch up with my "competition" and cross the finish line. What a great time and what an immense respect for those who actually are runners and those who do run a marathon. Most importantly, I want to thank all of you for your generous support of the Lupus Foundation of America, Texas Gulf Coast Chapter. Now it is back to the carbo diet!

Ben Andrews ran the Houston Press/METRO 5-kilometer race on January 18, 2004. He and his wife, Christine Smith raised almost \$2,000. ☘



Ben Andrews crosses the finish line.

Birdies for Charity

For the first time ever, the Texas Gulf Coast Chapter is participating in the Houston Golf Association's *Birdies for Charity* program to be held during the Shell Houston Open, April 19-25 at the Redstone Golf Club.

So how does the *Birdies for Charity* work?

- ◆ First, you (or those you solicit for support) guess the number of birdies you think will be made during the tournament. The person who guesses the correct number of birdies has a chance to win the **Grand Prize of a 2004 Buick Rainier**. It is expected that between 1500-1800 birdies will be made.
- ◆ Then, pledge one cent per birdie to *Birdies for Charity* or make a donation of \$20 or more. The Texas Gulf Coast Chapter receives 100% of your pledge payment.
- ◆ Complete and mail the form (no later than April 14, 2004) to the Lupus Foundation of America.

Please call Phillippa Gard at 713-529-0126 for more information and to get your "*Birdies for Charity*" package. ☘

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We wish to thank the following donors for their generous contributions for the period December 1, 2003 through February 29, 2004. If we have inadvertently omitted your name, please call the office so that we may correct our records

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Landreth Fastener Corp.
Lizabeth Larry
Edwin Lau
Jeffrey little
Carol Logue
Hannah Love
M. B. Loveland
The Lovett Inn
Nancy Luton
Curt Mackey
Sal Maldonado
Barbara Manoussou
John Manoussou
Paul Marvin
James & De Vonne Mattice
Marilyn McKinney
Michael McManus
Chris & Janyth McNeely
Raymond & Margaret McPhail
Deborah Merril
Jennifer Meyers

George & Petra Mijares
Amy Miller
Tom Moore
Joan Myskowski
Mike & Marsha Neesley
Steve Neesley
Donna Nickerson
Peter & Elizabeth Nimmo
Peter O'Connor
Marilyn Ginther Orr
Kathy Orrell
Mary Palmer Bjonfald
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David Peterson
Linda Peterson
Manuel Poupon
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Diana Prise
Alexandra Pruner
Vi Truong & Erica Prendes
Rebecca Quintanilla
Stephanie Ouisenberry
Billy Reed
Eric Reisdorf
Josefina Rendon
Dawn Richter
Shari Rickert
Dianne Robertson
Connie Ribinson
Albert & Christine Roberts
Eve & Jim Rockford
Neil Ryan
Cheryl & Danny Sanders
Carl Schmidt
Philipa Scharz
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Steven Shirk
Ellis Sink
Christine Smith
David Smith
Edward Jacob Smith
Phil Smith
E. J. & Beth Stahl
James & Elizabeth Spreigl
Justin Summy
Ronald Sutterfield
John Sweney
Lisa Teubner
James & Jacqueline
Thompson
Roy Torres
Yvonne Trujillo
Raymond Tucker
Emily Tueting
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Judy Gribble Viebig
Robert & Carmen Wieting
Robert Williams
Valerie Williams
Allen & Lisa Wilson
Gregg Wintner
Christie Wise
Mr. & Mrs. Ronald Woliver
Michael Yates
Michael T. Young

YOUR SUPPORT IS IMPORTANT....

As a non-profit organization we rely on donations to sustain our programs and services. With your help, we can expand our services to support every lupus patient in our service area. Please include us in your charitable giving and help us to continue to provide outstanding services and programs for all lupus patients. With your help, the chapter can be the lupus organization that truly supports all those persons living with lupus.



Texas Gulf Coast Chapter and El Paso Branch
3730 Kirby Drive, Suite 720
Houston, Texas 77098-3927

Foundation of America, Inc.

Mission Statement

The **Lupus Foundation of America** is the nation's leading non-profit voluntary health organization dedicated to lupus. Our mission is to improve the diagnosis and treatment of lupus, support individuals and families affected by the disease, increase awareness of lupus among health professionals and the public, and find the cure.

Calendar of Events

April 19 - 25	2004 Shell Houston Open Birdies For Charity, call the Chapter office for pledge forms.
April 21	2nd Annual Spring Coffee With a Fashion and Jewelry Show
May 8 - 9	LFA 27th Annual Meeting of the National Council Sheraton New York Hotel & Towers
May 9 - 13	5th International Patient Congress Call the Chapter office for program content & general information. Hilton New York Hotel
May 10	World Lupus Day
Coming in June	Lupus Self-Management Symposium
Ongoing	New Patient Orientations Mon - Fri To schedule this free one-on-one-session call Sharon Mack, Patient Services Director 713-529-0126, ext. 113

Mark Your Calendar!

Teens with lupus...you are not alone!
Come to the NEW support group for teens and young adults and get connected.
1st Saturday of the month
Beginning June 5, 2004
12 noon-1:30 pm
3730 Kirby Drive, Suite 720
Houston, TX 77098
Information: 713-529-0126/ 800-458-7870

Opportunities

Does someone in your family have Lupus?

Researchers at the University of Minnesota are currently enrolling both individuals and families with systemic lupus (SLE) for a genetic research study. The overall goal of this project is to identify the genetic factors that predispose people to developing lupus. Study participation is free. Travel to the University of Minnesota is not required. To learn more, please call toll-free 1-800-515-8787 or visit www.lupusstudy.org.

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