

A photograph of a smiling man with a beard and a doctor in the background. The man is wearing a dark sweater over a denim shirt. The doctor is wearing a white coat and glasses.

MURRAY KOFFLER UROLOGIC WELLNESS CENTRE

Life-changing care and research,
powered by you

*See
what
care
can
do.*

A report to our generous donors

April 2021

When people are facing fertility challenges, a urologic cancer diagnosis, chronic pelvic pain or other health issues, many turn to the Murray Koffler Urologic Wellness Centre at Mount Sinai Hospital, part of Sinai Health. The centre's experts are among Canada's best at diagnosing these conditions and treating them with innovative therapies, some of which they have helped develop through their own novel research.

As a generous supporter of the Murray Koffler Centre and its team of clinician scientists, led by Dr. Keith Jarvi, you are also a vital team member. You provide funding that helps the team to offer the latest treatments and to advance care, here and far beyond our walls, through groundbreaking research.

Wonderful examples of this support are the various chairs that our extraordinary donor community has established – or is striving to establish – to fuel the work of our talented people.

For instance, Dr. Jarvi is the Kurtin Family Scientist in Men's Health and holds the more recently established Murray Koffler Professorship in Men's Health Research. The Murray Koffler Centre's internationally renowned director of uro-oncology, Dr. Alexandre Zlotta, will hold a new Chair in Uro-Oncology Research once fundraising is completed. And Dr. Eleftherios Diamandis, the head of clinical biochemistry at Sinai Health and University Health Network, completed his term as the Hold'em for Life Chair in Prostate Cancer Biomarkers in 2019.

These positions enable their holders, and the many colleagues they collaborate with, to pioneer new

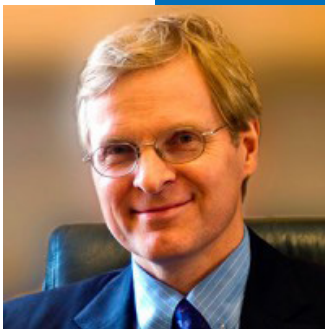
and better approaches for treating a wide range of urologic conditions.

They also support our experts as they apply their talents to unexpected and urgent health crises, such as the COVID-19 pandemic. Dr. Jarvi, for instance, is helping a team of Sinai Health researchers to develop a COVID-19 antibody test that could analyze up to 10,000 patient samples at once. Such a test could shed critical light on the disease's prevalence in Canada and provide information to aid the ongoing development of treatments and vaccines.

Meanwhile, Dr. Zlotta is leading a large clinical trial testing whether an agent used in tuberculosis vaccines and bladder cancer immunotherapy (called Bacille Calmette-Guerin, or BCG) can prevent COVID-19 infection or reduce its severity among frontline workers in Ontario.

Throughout the pandemic, our Murray Koffler Centre team hasn't wavered in its commitment to providing top-notch, supportive care. The team has embraced virtual care delivery – by video, phone or email – wherever possible and sensible to ensure patients continue to receive the same timely support, while also reducing the risk of COVID-19 transmission.

During these turbulent times, your philanthropic investment in our centre and Sinai Health is more important than ever. We are pleased, in this report, to update you on the difference you're making by highlighting some of our team's recent achievements. Thank you for your exceptional support.



“Our Murray Koffler Centre team is fortunate to have a group of generous donors at our side. They impact patients’ lives by giving us the resources to transform urologic care.”

Dr. Keith Jarvi

Director, Murray Koffler Urologic Wellness Centre



Overcoming obstacles to parenthood

The Murray Koffler Centre and its partners at Sinai Health, including Mount Sinai Fertility, are among the best in Canada at helping men overcome fertility challenges. Aided by your generosity, our team excels at uncovering the causes of infertility, providing innovative treatments and advancing the field through leading-edge research.

Getting to the bottom of sperm-related miscarriages

Few things are more frustrating and emotionally devastating than suffering repeated miscarriages. There are a wide range of potential causes, including chromosomal abnormalities in sperm. One such abnormality, called aneuploidy, occurs when a man's sperm contains more or less than the normal number of chromosomes.

Dr. Keith Jarvi has collaborated with Mount Sinai Fertility and Mount Sinai Services to create the first automated lab test in the world that can *determine the likelihood an individual will experience sperm aneuploidy*. The test helps couples to understand why they're experiencing recurrent pregnancy loss and to make family planning decisions. Following additional validation, the test may soon become part of routine care at Sinai Health and beyond.

The next goal that Dr. Jarvi and his collaborators have set their sights on is creating an automated test to *identify*

'It's like nothing extraordinary happened – except it did.'

For many Canadians hoping to become parents, starting a family is often challenging. Infertility affects 15 per cent of couples in this country and male infertility contributes to about half of all cases.

Jordy Mecklinger and his wife, Pam, understood those frustrations only too well. Having no luck conceiving, they began medical testing to determine what was happening. Pam checked out fine but Jordy's semen provided a surprise. "There were no sperm in the sample," he says.

Infertility issues that involve not producing enough healthy sperm or obstruction (where sperm are blocked from getting out) are experienced by one million Canadians. The latter, it turns out, was Jordy's problem.

Unbeknown to him, Jordy had cystic fibrosis (CF), a chronic and often fatal disease of the lungs and digestive system. His version was mild enough not to cause serious symptoms. However, men who carry a CF gene mutation are born without vas deferens, the tubes that carry sperm to the ejaculatory ducts – effectively rendering them infertile.



Jordy and Pam, with their children Hayley and Brandon.

The discovery surprised and alarmed Jordy, and gave rise to all kinds of questions: "How could I be so healthy and have such a serious problem? Would I be able to have kids, and would I be healthy in the future?"

Jordy was referred to our Murray Koffler Centre. While the absence of his vas deferens meant Jordy had no sperm in his semen, tests showed he was still able to produce healthy sperm.

Dr. Keith Jarvi assured Jordy that by using a procedure called testicular sperm aspiration, in which sperm is retrieved directly via a needle, in vitro fertilization

Story continues below

and select aneuploidy-free sperm – a feat that would lead to many more healthy pregnancies around the world.

A test to help prevent unnecessary fertility procedures

In yet another collaboration, Dr. Jarvi teamed up with Dr. Eleftherios Diamandis to develop a diagnostic test that promises to help prevent men from unnecessarily undergoing surgical procedures to retrieve sperm from their testicles.

The in vitro fertilization-related surgical procedures aid men whose semen doesn't contain sperm but whose testicles do. By indicating whether there is a good chance of retrieving sperm, the patented test enables men to make more-informed decisions about going ahead with a surgical retrieval procedure. The test has been licensed by LabCorp, a leading health-care diagnostics company, and could soon help men far beyond Mount Sinai's walls.

Improving access to fertility preservation services for younger cancer patients

For adolescents and younger adults struck by cancer, enduring the physical and emotional toll of treatment is hard enough. That difficulty is multiplied for those whose cancer is treated successfully but learn that treatment has affected their fertility – especially if the possibility of infertility or fertility preservation options weren't discussed. Depression, anxiety and regret are common among the far too many patients who find themselves in this situation.

The Murray Koffler Centre, the Marvella Koffler Breast Centre and other Mount Sinai cancer clinics work closely with Mount Sinai Fertility (MSF) – one of Canada's top fertility centres – to preserve the fertility of cancer patients through sperm and egg banking. Dr. Jarvi and Dr. Kirk Lo of the Murray Koffler Centre, as well as MSF director Dr. Ellen Greenblatt, also collaborate with SickKids Hospital on a specialized fertility preservation program for adolescent and prepubescent cancer patients.

(IVF) would be an option. The procedure turned out to be "fairly easy, like freezing a tooth," Jordy says. One sperm was then injected into each egg harvested from Pam's ovaries.

Happily, Jordy and Pam became the proud parents of healthy twins, Hayley and Brandon. "Now that our kids are more than five years old, it's like nothing extraordinary happened – except it did," he says.

Raising awareness about the prevalence of infertility challenges is a goal shared by Dr. Jarvi and Jordy. "My personal mission," says Jordy, "is to highlight and end the stigma around this issue. Men suffer in silence because they're embarrassed. They often become depressed and relationships fail as a result. By talking about what I went through, though it's difficult, I believe more men will go and get help."

Driving innovation

Jordy has also made it his mission to raise funds in support of cutting-edge reproductive health care and research at Sinai Health. In 2016, he founded the annual **Leadership Sinai Porsche Rally**, one of Toronto's most exhilarating fundraising events. Participants get to drive luxury, high-performing Porsches in a variety of settings, from country roads to highways to an autocross course. They also get to hear from Murray Koffler Centre team members on a range of men's health issues.

The event is presented by Helen Ching-Kircher, Porsche Centre Downtown Toronto and hosted by Leadership Sinai, a group of passionate and ambitious professionals in their thirties and forties who take an active role in fundraising, planning events and connecting their peers through the Leadership Sinai network. From 2016 to 2019, the event raised and contributed a net amount of more than \$125,000 toward state-of-the-art care for families experiencing infertility issues and for novel research to continue advancing the diagnosis and treatment of infertility.

The COVID-19 pandemic forced the event to change gears and move to an online format. Nevertheless, the 2020 Leadership Sinai Virtual Rally was able to surpass its fundraising goal and raise over \$90,000 toward crucial COVID-19 research at Sinai Health, thanks to the generosity of many donors and sponsors. These included matching donations from Larry and Judy Tanenbaum and Helen Ching-Kircher, Porsche Centre Downtown Toronto.

While people in the GTA have relatively easy access to fertility preservation services, the same can't be said for the many cancer patients across the country who live great distances from their nearest fertility clinic. Sinai Health, led by Dr. Greenblatt and supported by Dr. Jarvi and Dr. Lo, has launched a program in Thunder Bay, Ontario, that is striving to improve access for cancer patients in northwestern Ontario and help them realize their dreams of parenthood.

The program involves nurses, based in Thunder Bay, who are trained in cancer treatment and

fertility preservation. They identify patients whose treatment could harm their fertility, and then discuss these risks and offer consultations – via video conference or in person – with fertility preservation experts at MSF and other fertility centres, who in turn facilitate sperm or egg banking if desired. Men are even able to submit semen for banking from the comfort of their homes.

Dr. Greenblatt, Dr. Jarvi and their research collaborators are studying the initiative's effectiveness, with the ultimate aim of spurring change throughout Canada.

Game-changing cancer care and research

With indispensable support from donors, Dr. Alexandre Zlotta and his team have built the Murray Koffler Centre's Uro-Oncology Program into one that is internationally renowned for providing leading-edge care to people with bladder, prostate and other urologic cancers, while also advancing diagnostic tools and treatments through groundbreaking research.

Since being recruited from Belgium in 2006 to lead our Uro-Oncology Program, Dr. Zlotta has grown it into one of Canada's premiere programs, delivering exceptional care to about 10,000 women and men annually and consulting on many complex cases from across North America and beyond.

The program's Multidisciplinary Bladder Cancer Clinic, developed in partnership with Princess Margaret Cancer Centre (where Dr. Zlotta is also a staff surgeon), provides comprehensive care to patients with complex bladder cancers. Through the clinic, Dr. Zlotta and other urologic cancer surgeons, radiation oncologists and medical oncologists work collaboratively to create tailored treatment options

for patients and fully discuss with them the pros and cons of each approach.

Dr. Zlotta, a clinician scientist with Sinai Health's Lunenfeld-



Tanenbaum Research Institute (LTRI), leads or co-leads several large national and international research initiatives focused on bladder and prostate cancer. These initiatives seek, among other things, to transform medicine's ability to distinguish life-threatening tumours from more docile ones. With the help of cutting-edge technology, Dr. Zlotta aims to 'personalize' medicine by reliably predicting whether specific treatments will work for individual patients.

Unmasking aggressive bladder tumours

To determine a bladder cancer's grade, pathologists look at tissue samples from the tumour under a microscope. They assess how different the tumour cells look from normal cells and other features of the tumour, such as the size and shape of its cells and how they are arranged. Knowing the cancer grade helps doctors predict how fast it will grow and how likely it is to spread. Thus, accurately identifying the grade is critical to developing the best treatment strategy.

Determining a cancer's grade is complex, and often pathologists are unable to recognize so-called 'wolves in sheep's clothing' – bladder tumours that



Dr. Alexandre Zlotta

are aggressive but look rather tame. To improve the accuracy of bladder cancer grading, especially the unmasking of wolves masquerading as sheep, Dr. Zlotta and partners are designing a new and more sophisticated bladder cancer grading system.

Dr. Zlotta is working with Sinai Health's Dr. Theodorus van der Kwast, an internationally renowned urologic pathologist, and collaborators in Europe on this initiative, which could enhance bladder cancer care globally.

Investigating bladder-sparing treatment for aggressive tumours

In the past when bladder cancer had grown into the muscles within the bladder wall, the only treatment option was extensive surgery (known as radical cystectomy) accompanied by short-term complications and major lifelong changes.

For men, this includes removal of the bladder, prostate gland and seminal vesicles; for women, removal of the bladder, uterus, ovaries and part of the vagina. For men and women, bladder removal requires a new way of collecting and discarding urine, either through the surgical construction of a tube that empties into an ostomy bag connected to the abdomen or through surgery to create a new bladder.

Thanks to the development of a less-aggressive approach – called tri-modal therapy (TMT) – for treating patients who have just one muscle-invasive bladder tumour, fewer patients are having to shoulder the burden of radical cystectomy. The therapy involves endoscopic surgery to remove individual bladder tumours, followed by chemotherapy and radiation therapy.

In research published in 2017, Dr. Zlotta and collaborators showed that select patients who receive TMT live just as long as those who undergo radical cystectomy.

Building on this research and collaborating with researchers from Harvard University and the University of Southern California (USC), Dr. Zlotta has been co-leading the

'I couldn't be in more comforting, capable hands'

Little did the Honourable Irving Gerstein know in 1985, when he played a seminal role in creating a research institute at Mount Sinai Hospital, that it would one day help attract a talented uro-oncologist from Belgium who would ultimately save his life.

The uro-oncologist was Dr. Alexandre Zlotta, who came to Mount Sinai in 2006 to lead our uro-oncology program. From 1979 to 1986 Irving was chair of the hospital's Board of Directors, and he was pivotal in establishing what is today known as the Lunenfeld-Tanenbaum Research Institute (LTRI), one of the world's top biomedical research institutes.

Fast forward to September 2010 and Irving, a member of the Canadian Senate, noticed blood in his urine while working in Ottawa. "I went back to my office and said to my assistant, 'Get me on the next plane to Toronto,'" recalls Irving, who in that chilling moment wanted to be home in Toronto with his wife, Gail, and to visit the hospital that had always been there for him.



The Honourable Irving Gerstein, C.M., O.Ont.

Gail picked Irving up at the airport and they drove straight to the Schwartz/Reisman Emergency Centre at Mount Sinai, where Irving was diagnosed with a urinary tract infection and was prescribed antibiotics, which cleared up the bleeding quickly. Irving is especially grateful that the emergency doctor strongly urged him to seek follow-up care with his urologist. It would have been tempting, he says, to think that everything was fine when the blood cleared and to simply jump back into his busy life as a senator.

But Irving did follow up with his urologist, and learned that he had several tumours in his bladder. "I knew nothing about this particular form of cancer. However, I learned quickly. There's nothing like hearing the word 'cancer' from the lips of a physician to focus one's mind."

Story continues below

largest study ever to compare the two treatment approaches.

Results of this study, which includes over 500 patients who have been monitored for five years, will be ready soon and could provide the evidence needed to significantly increase TMT's use around the world and transform the care of people with muscle-invasive bladder cancer.

In a separate study that may also influence bladder cancer care globally, Dr. Zlotta and his colleague at USC, Dr. Siamak Daneshmand, are researching whether a new, advanced endoscopic technique for surgically removing bladder tumours leads to better health outcomes, including fewer cases of cancer recurrence.

Searching for biomarkers to enhance bladder cancer care and outcomes

Immunotherapy, which uses drugs to help a person's immune system recognize and destroy cancer cells, can be extremely effective, though unfortunately it doesn't work for all patients. For instance, the main immunotherapy used in patients with non-muscle-invasive bladder cancer (NMIBC), called BCG, is effective at preventing cancer recurrence in about 50% of patients.

It is very challenging to predict which patients will respond to BCG, and there is a relatively narrow window before NMIBC becomes invasive and potentially deadly. Therefore, improving the ability to predict who will respond to BCG would better enable doctors to recommend the most appropriate treatment strategy sooner, possibly bolstering the health outcomes of patients.

In an effort to advance response prediction, Dr. Zlotta is partnering with Sinai Health's Dr. Eleftherios Diamandis and Queen's University in Kingston to uncover biological markers to indicate whether BCG will work for individual patients.

Identifying men at heightened risk of aggressive prostate cancer

In 2017, Dr. Zlotta and colleagues (including Dr. Diamandis, Dr. Laurent Briollais of the

Fortunately, Irving's bladder cancer produced symptoms early on and was not aggressive. His urologist removed most of his tumours via his urethra, but referred him to Dr. Zlotta to remove the more complex ones.

"We hit it off very, very well," Irving says of he and Dr. Zlotta, adding it's a "double blessing" for him that Dr. Zlotta happens to be an extraordinary surgeon and a "terrific person."

It was during their initial meeting that Irving learned the LTRI had been an important factor in drawing Dr. Zlotta, already a highly accomplished clinician scientist, to Mount Sinai. "It brought tears to my eyes," says Irving, whose family has also championed the institute through their generous charitable giving.

Irving's bladder cancer wasn't aggressive, but it did prove to be doggedly persistent. Dr. Zlotta had to remove tumours from his bladder on eight separate occasions between January 2011 and October 2015. Following his last surgery, Irving received a novel treatment that delivered chemotherapy (mitomycin C) and immunotherapy (BCG) directly to his bladder. Dr. Zlotta used a specialized, donor-funded piece of equipment that 'pumps' the chemotherapy deeper into the bladder wall.

Irving's cancer has not returned, and he meets with Dr. Zlotta every six months for routine surveillance and check-ups.

Knowing that Dr. Zlotta is a remarkable surgeon and one of the world's leading urologic cancer researchers, Irving says he "couldn't be in more comforting, capable hands."

LTRI, and Dr. Paul Boutros) made a key breakthrough when they discovered that men who have certain mutations in their KLK6 gene are three times more likely to develop aggressive, potentially deadly prostate cancer than men without the mutations.

The KLK6 gene is located near the KLK3 gene, which is used in the well-known PSA (prostate-specific antigen) test.

Dr. Zlotta and Dr. Boutros, now at the University of California Los Angeles, are spearheading research among thousands of prostate cancer patients in Canada and the U.S. to validate a blood test developed by the LTRI that detects mutations in the KLK6 gene and other genes associated with

aggressive prostate cancer. Through this research, they aim to accelerate the test's adoption by doctors internationally.

Just as the identification of BRCA gene mutations has revolutionized breast cancer prevention and treatment, discovery of the KLK6 gene mutations and development of the LTRI's test could do the same for prostate cancer care.

In particular, the test promises to boost the ability of doctors to identify patients at higher risk of aggressive prostate cancer and recommend the most appropriate treatment.

For men with low-risk prostate cancer, 'treatment' may mean an active surveillance approach, whereby the cancer is vigilantly monitored and treatment may be recommended if the cancer begins to show signs of becoming dangerous.

The PSA test, which is the current standard for prostate cancer screening, is unable to identify a man's risk of having aggressive prostate cancer.

Harnessing artificial intelligence to improve prostate cancer staging

Dr. Zlotta and European collaborators are studying ways of combining computer artificial intelligence with existing diagnostic tools, such as imaging, biopsies and blood tests, in order to diagnose the extent of a patients' prostate cancer more accurately.

The extent, or stage, of a cancer refers to the tumour's size, which parts of an organ have cancer, and if and where the cancer has spread. Determining a cancer's stage is vital for planning the best treatment and providing patients with an accurate prognosis.

In particular, Dr. Zlotta's research could improve prostate cancer staging – and thus treatment selection and patient outcomes – by enhancing the detection of microscopic cancer cells located beyond the prostate gland.



Lowering PSA levels through lifestyle changes

A soon-to-be-published study led by Dr. Zlotta shows that many men with moderately elevated PSA levels can lower them to less-concerning levels by making temporary lifestyle changes. For a significant number of men, lowering their PSA level slightly will put them below the threshold at which a prostate biopsy is typically recommended.

The PSA test is widely used as a screening tool to detect potential prostate cancer in men without symptoms, and as a tool to aid the diagnosis of men with prostate cancer symptoms. The higher a man's PSA level, the more likely it is that he has prostate cancer.

But as noted previously, the PSA test cannot determine a man's risk of having aggressive prostate cancer. It can, however, suggest the presence of cancer when there is none, sometimes leading to what in hindsight prove to be unnecessary biopsies, which can be both anxiety-provoking and painful.

In the study, Dr. Zlotta and his team found that men with moderately elevated PSA levels were often able to lower them within eight weeks by avoiding spicy food, alcohol, coffee and bicycle riding. In fact, 40% of study participants reduced their levels below the limit at which a biopsy is usually advised.

Relieving chronic urologic pain and changing lives

Chronic urologic pain conditions, including pelvic and testicular pain, can affect men's sex lives, disrupt their work and home lives, and make the simple act of urination unbearable. Sometimes the pain's root cause can't be determined, making the situation even more frustrating.

The Murray Koffler Centre brings relief to patients experiencing some of the most challenging cases of urologic pain. In fact, our team cares for more men experiencing urologic pain than any other centre in Canada, with patients visiting from across the country.

Our expertise in care and research prompted a national chronic pain research network – comprised of 11 of Canada's top academic pain centres – to select the Murray Koffler Centre as the lead site for the network's urologic pain research. We are leading multiple studies on treatments for chronic pelvic pain that don't rely on invasive surgery or opioid-based painkillers.

In one of the studies, patients are using a topical cream to relieve pain. While the final results are not

in yet, for some men the cream is working extremely well and has enabled them to quit using opioid-based painkillers, which of course can be addictive and cause numerous side-effects. Dr. Keith Jarvi conceived of testing the cream for chronic pelvic pain after seeing how well it worked for people experiencing shoulder and knee pain.

Cannabis and chronic pelvic pain

In another study that Dr. Jarvi has launched in collaboration with McMaster University researchers, he will assess the safety and effectiveness of cannabis for relief of chronic pelvic pain among men who are already self-medicating with the drug. A significant number of men with this condition are taking it upon themselves to use cannabis to relieve pain, says Dr. Jarvi, but they're not doing so in a systematic way.

Dr. Jarvi is aiming, ultimately, to spearhead a clinical trial where chronic pelvic pain patients will be prescribed either cannabis or a placebo. Such a study would be the most accurate and reliable way to measure cannabis' efficacy for these patients.

Addressing the mental toll of urologic disease

Physical illness, including the range of urologic conditions treated by the Murray Koffler Centre, increases a man's risk of depression, anxiety and other mental health challenges.

The continuing stigma associated with mental illness and the lack of psychiatric services geared to men are barriers to improving men's mental health,

resulting in many men suffering in silence – and in the worst-case scenario, suicide.

Because most men are more likely to seek care for a urologic issue than a mental health concern, urologists play a key role in recognizing unmet mental health care needs among their patients.

That's why the Murray Koffler Centre partnered with Sinai Health's Department of Psychiatry in 2017 to establish Canada's first Urology and Mental Health Program, led by psychiatrist Dr. Benjamin Rosen.

Dr. Rosen has now aided more than 400 patients whose mental health has been affected by issues related to infertility, pelvic pain, cancer and sexual dysfunction.

The program is gaining recognition across Canada and bringing attention to the need for more mental health care and research focused on men with urologic disorders.



Looking to the future

Led by Dr. Keith Jarvi and bolstered by your tremendous support, the Murray Koffler Urologic Wellness Centre is recognized across Canada and beyond for advancing care through groundbreaking research. With investment from our incredible donor community, in the months and years ahead our goal is to expand and secure the centre's research mission, and bring health care fully into the digital age, by:



- **Fully endowing our Chair in Uro-Oncology Research** – Thanks to the generosity of several donors, we have already raised \$2.1 million of the minimum \$3 million required to fully endow this chair. Once fully endowed, it will provide its inaugural holder, Dr. Alexandre Zlotta, with reliable and enduring support at a time when government research grants continue to grow increasingly scarce. In the longer term, the chair will ensure we are able to recruit a dynamic clinician-scientist to build on Dr. Zlotta's legacy of exceptionally impactful uro-oncology research following his eventual retirement.
- **Fully endowing a Murray Koffler Chair in Men's Health Research** – Dr. Jarvi currently holds the Murray Koffler Professorship in Men's Health Research, but to fuel a greater amount of game-changing research annually, our aim is to raise the remaining \$2.1 million required to convert this endowed professorship into a fully endowed chair. The additional resources provided by a fully endowed chair would, for instance, support a major new research initiative that will study the impact that men's health, prior to having children, has on their children's health. Through the study, Dr. Jarvi and colleagues will counsel

men about healthy lifestyle changes and assess the impact of men's health on their entire reproductive journey, from the quality of their sperm to their reproductive outcomes to the health of their children in their early years.

- **Establishing a comprehensive, leading-edge virtual care program** – Even before the pandemic, our Murray Koffler Centre team was focused on giving patients more choice and making care more convenient by developing tools and processes to deliver care virtually. With \$1 million in support from donors, we will be able to develop and launch a trailblazing virtual care program. Through it, patients will be able to submit blood, saliva, semen or urine samples for testing from the comfort of their own homes. They will have access to tailored digital apps where they can get reliable information on a range of urologic health issues and interact with their medical team. They will be able to meet with their doctors 'face-to-face' through high quality video-based appointments. The creation of these and other program components can be accelerated significantly through philanthropic investment.

As a donor, you are vital to the life-changing care and research of our Murray Koffler Urologic Wellness Centre team.

Through philanthropic investment, our team is helping patients overcome fertility-related obstacles to parenthood. We're advancing how doctors around the world diagnose and treat urologic cancers. We're bringing relief to patients experiencing some of the most challenging cases of urologic pain.

Our team is able to do all of this, and more, because of your generosity. Thank you for your essential support.

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