



# CASE STATEMENT



## PRECONCEPTION 2 INFANCY (P2i™)



***Our Mission: To empower women to have healthy, full-term pregnancies, thus reducing the incidence of serious, chronic disorders among their children.***

# A Generation in Jeopardy

The P2i™ vision grows out of a paradigm shift now occurring among scientists who study unsafe pregnancies and chronic childhood health conditions.

**The old paradigm:** many pregnancy issues and childhood chronic health conditions, are unpredictable, random events and/or perhaps genetic in origin.

**Under the new paradigm,** a high incidence of problem pregnancies and serious, chronic disorders among children are in large measure the common result of environmental factors. When women, before and during pregnancy reduce toxins, and follow proper nutrition, the incidence of both poor pregnancy outcomes and chronic disorder among the children is dramatically reduced.

This is the P2i™ Program.



*This Avatar-like image represents the global sense of hope and wonder for today's children and those of future generations. By working with parents today, we are fulfilling our mission to ensure healthy pregnancies. Through this effort, children around the globe will be free from chronic illness.*

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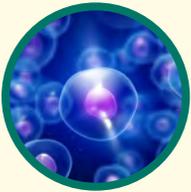
# SUMMARY

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P2i (Preconception to Infancy) is a program that can positively affect the health outcomes of generations of children. Sponsored by the non-profit organization, the Forum, it has the primary objective of ensuring healthy pregnancies to reduce and prevent chronic childhood illnesses that are on the rise across the globe.

We know that 90 percent of chronic illnesses are a result of environmental factors<sup>1</sup>. We also know that complications in pregnancy lead to increased risks for the offspring to develop chronic illness.



The P2i program will use the emerging technology of exposomics to both qualify and quantify environmental exposures of the mother and baby from preconception to infancy. Exposomics is the measurement of all environmental exposure in the body (body burden), enabled with sophisticated measurement equipment that did not exist until recently. The Forum will partner with leading environmental testing laboratories that have been designated as “centers of excellence” by the leading manufacturer of exposomic mass spectrometry testing equipment to conduct the measurements. The P2i program also calls for genetic testing of all infants for certain disorders and conditions that can hinder normal development. The combination of exposomics and genetics will provide a path for understanding chronic diseases in children.



The Forum has launched a public health initiative and has appointed the University of Georgia (UGA) to implement it. The first step in advancing on this path is to establish the initiative in Georgia through UGA’s College of Public Health (CPH), and to create a patient entry point (for patient care and data collection) through a new P2i Center of Excellence (COE) in Atlanta. The COE, set to open 4th Quarter 2016, will play a key role in ensuring safe pregnancies via the P2i Protocol. This P2i facility will be the first private exposome research and treatment facility in the world that will treat women who want to improve their chances of a healthy pregnancy and having a healthy child. By overseeing the P2i research and its collected data through the COE, CPH researchers will have access to data upon which they can develop guidelines for a P2i public health campaign in Georgia. As a result, CPH will

be positioned to lead educational institutions in other states in implementing P2i, thereby establishing it as a national health initiative. Capitalizing on UGA global health programs, P2i will be expanded and launched internationally once it has achieved prominence in the United States.

The Forum’s goal is to enroll 300,000 pregnant women in the P2i program from the U.S. Initially, the P2i treatment protocol will be based on current medical best practices regarding optimal nutrition and avoidance or detoxification practices based on each participant’s exposomic and other physician prescribed clinical laboratory tests. Children born to participants will also participate in the P2i protocol through their first five years of life.

The P2i faculty (See page 11) consists of clinicians and researchers who are leading experts in their disciplines including neonatal and prenatal medicine, pediatrics, pediatric psychiatry, pediatric psychology and behavior analysis, and environmental and toxicology researchers. This prestigious group will guide and develop the research, publish timely results and create a training program for P2i certified medical professionals and researchers.



The Forum is developing a virtual campus/conference center to raise public awareness of the P2i program. The site will host virtual conferences for prospective parents, CME courses for medical professionals, and be a catalyst for a global conversation about improving pregnancy outcomes and childhood health.

Although exposures are a focus of P2i research, there is also a need to explore genetic influences. Through the Forum’s public health alliance with the UGA, every infant born in Georgia (estimated to be 125,000) will be given an advanced heel prick test to include genetic and environmental measurements. This new level of testing will help researchers determine a baseline at birth that will allow them to see in real time the development of disease because all children born to participants will take part in the P2i protocol through their first five years of life. This baseline information will lead to a significant reduction in disease by giving researchers an understanding of how to prevent any chronic disease from developing in the first place.

This program has the power to reach and positively impact all American children - millions of children - who will ultimately be part of the P2i testing protocols. By allowing scientists to study the interplay of genetics with the impact of environmental toxins, we will for the first time have a clear path for studying the origins of disease. Armed with this knowledge, we can then take steps to prevent it from ever developing.

# The Need for P2i



## The Dramatic Increase of Childhood Chronic Conditions

Studies show that chronic illnesses among children have risen such that one out of four children under the age of 18 have special health needs in the U.S.<sup>2</sup>

A large prospective study concluded in 2010 demonstrated that between 1994 and 2006, childhood chronic illnesses among American children (ages two to eight years) more than doubled from 12.8% to 26.8%.<sup>3</sup>

The Centers for Diseases Control and Prevention (CDC) reports that autism rates are now one in 68, more than double from the previous rate of one in 150 in 2000.<sup>4</sup> The overall rate of cancer among children is mounting steadily and the increase for two of the most common childhood malignancies, leukemia and brain tumors, is particularly sharp. Childhood cancer is now the leading cause of death by disease past infancy among children in the U.S.<sup>5</sup> Other childhood chronic illnesses that have sharply increased in the last decade include asthma, developmental disorders, diabetes and obesity.<sup>6</sup>

James M. Perrin, MD, Past President of the American Academy of Pediatrics, powerfully summarizes the dramatic increase in childhood chronic conditions and the need for prevention of these conditions in a JAMA article titled “The Increase of Childhood Chronic Conditions in the U.S.”.

*“This Commentary provides sobering information on major increases in chronic health conditions, especially obesity, asthma, and ADHD, among U.S. children and youth, along with evidence for common pathways to that growth, especially reflecting fundamental changes in the environments of growing children... the epidemic growth of childhood chronic conditions calls for major efforts to understand causation and means of prevention.”\**

### What’s Making Our Children Sick?

Answers to that question will require research in many diverse disciplines of medicine and science. The P2i program will address the connection between the environment and how it affects a child’s health from pregnancy through the age of five. The program is based on the simple premise that environmental factors that affect the health of the parent can also affect the health of the offspring.

*\*JAMA, June 27, 2007—Vol 297, No. 24*

# Your Genes Don't Determine Your Fate: Your Environment Primarily Does (90%).

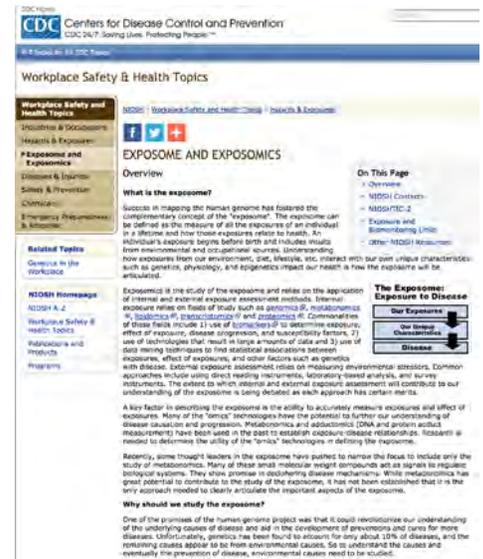
Most people believe that genetics has a greater role than it does in causing disease. In fact, 90 percent of chronic illnesses may be caused by environmental factors, which gives researchers a clear path to look for keys to prediction and prevention of chronic diseases.

In 2013, the CDC issued this statement that confirmed what many scientists and researchers have known for a long time:

*“One of the promises of the human genome project was that it could revolutionize our understanding of the underlying causes of disease and aid in the development of preventions and cures for more diseases.*

*Unfortunately, genetics has been found to account for only about 10% of diseases, and the remaining causes appear to be from environmental causes. So to understand the causes and eventually the prevention of disease, environmental causes need to be studied.”*

If this is true, it means that our fate is not sealed by genetically certain outcomes and that we can eventually predict and prevent chronic diseases before they ever happen.



## The Role of the Epigenome and Genetics

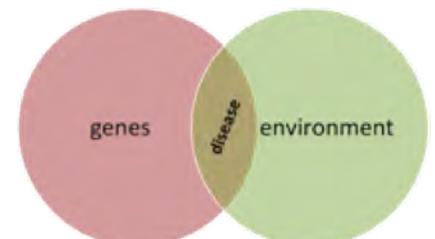
Epigenetics is a relatively new field of science that explores both internal and external environmental factors that turn genes on and off and affect how cells read genes. The combination of changes in gene expression is known as the epigenome.

In the absence of a normal epigenome, disease can occur. We also know that some epigenetic tags remain in place and can be passed from generation to generation.<sup>7</sup>

Alterations in epigenetic pathways have been shown to be implicated in common human diseases such as cancer, aging, neurodevelopmental disorders, cardiovascular diseases, type-2 diabetes, obesity and infertility.<sup>8</sup>

The epigenome can be altered by exposure to certain environmental stimuli. Environmental effects may be direct or indirect. For example:

- An environmental agent, such as a chemical toxin or pesticide, may enter the cells of a tissue and interface directly with the genetic material.
- Alternatively, an environmental condition, such as chronic stress, may stimulate the body to produce its own intrinsic epigenetic factors.
- Studies have also been done that show what we eat and our lifestyle can also affect a person's epigenome.<sup>9</sup>



## *“The Global Action Report”*

by Ban Ki-Moon

The United Nations Secretary-General

“Every year, about 15 million babies are born prematurely — more than one in 10 of all babies born around the world. Prematurity is the world’s single biggest cause of newborn death, and the second leading cause of all child deaths, after pneumonia.



Many of the preterm babies who survive face a lifetime of disability.

These facts should be a call to action. Fortunately, solutions exist — Preconception Care — “Empowering and educating girls as well as providing care to women and couples before and between pregnancies to improve the opportunity for women and couples to have planned pregnancies increases the chances that women and their babies will be healthy and survive.”



### ***FACTS on the tragedy of preterm births:***

- 520,000 preterm babies per year in the U.S. (12%);
- Potential significant loss of IQ points;
- \$26 billion a year total cost in U.S. for preterm births;
- \$50,000 per preterm child in medical costs;
- 10x more likely to have learning disorders;
- 80x more likely to have cerebral palsy.



## *Prenatal Care Affects the Health of Mother and Baby*

The mother's health during pregnancy has a profound affect on the health of her offspring, both in childhood and in later life.

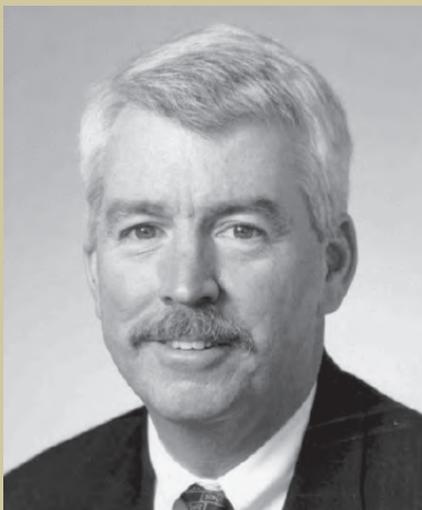
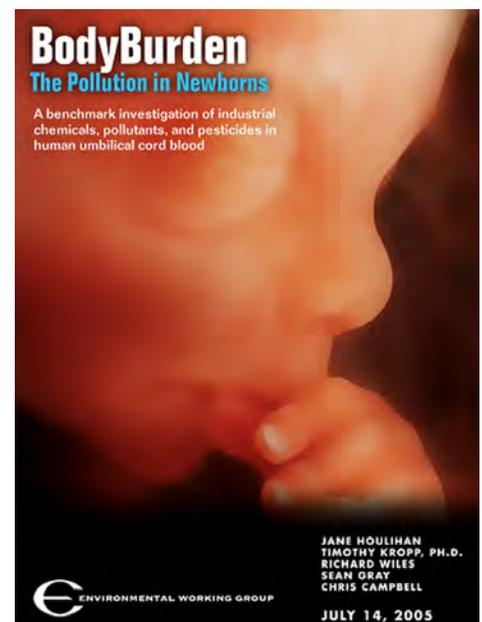
It's common knowledge that smoking during pregnancy can cause a baby to be born with complications. Some of these include low birth weight, prematurity and even death.<sup>10</sup> We also know now that drinking during pregnancy can cause miscarriage, preterm birth, stillbirth and fetal alcohol syndrome.<sup>11</sup> Other environmental factors such as exposure of the mom-to-be to toxic chemicals or poor nutrition can also be passed onto the fetus.

We used to think that the placenta shielded umbilical cord blood – and the developing baby – from most chemicals and pollutants in the environment, but this theory was shattered by the results of a 2005 study by the Environmental Working Group (EWG). The EWG researchers studied umbilical cord blood taken a month before the birth of a group of infants and found 287 chemicals and an average of 200 industrial chemicals and pollutants had passed from mom to baby. Of those chemicals, 180 could cause cancer, 217 were toxic to the brain and nervous system and 208 could cause birth defects or abnormal development in animal tests.<sup>12</sup>

## *Nutrition Affects the Health of Baby and Mother*

The nutritional status of women when becoming pregnant and during pregnancy can have significant influence on both fetal, infant and maternal health outcomes. Micronutrient deficiencies such as calcium, iron, vitamin A and iodine can lead to poor maternal health outcomes and pregnancy complications, which put the mother and baby at risk. Poor maternal weight gain in pregnancy due to an inadequate diet increases the risk of premature delivery, low birth weight and birth defects.<sup>13</sup>

Worldwide, infections are among the leading causes of chronic, developmental disabilities in children, along with and sometimes interacting with genetic and nutritional causes.<sup>14</sup>



“For 80 percent of the common chemicals in everyday use in this country we know almost nothing about whether or not they can damage the brains of children, the immune system, the reproductive system, and the other developing organs,” said Dr. Phil Landrigan. “It’s really a terrible mess we’ve gotten ourselves into.”

*Dr. Phil Landrigan  
Pediatrician and Director  
Children's Environmental Health Center  
Mount Sinai School of Medicine*

## Complications in Pregnancy Can Also Have Long-Term Effects

U.S. statistics regarding complications in pregnancy are dismal, in spite of the fact that the U.S. still leads the world in medical advancements.

Approximately 31% of all conceptions end in miscarriage, usually in the early months of pregnancy and often before women even know they are pregnant.\* Leading causes of miscarriage are environmental factors (i.e. smoking, drug use, malnutrition, toxic substances), chromosomal abnormality, maternal health problems, maternal age and maternal trauma, according to the American Pregnancy Association.<sup>15</sup>

Preterm birth is the leading cause of long-term neurological disabilities in children, according to the CDC. More than 450,000 (one in nine) are born prematurely in the U.S. each year. There are more infant deaths from pre-term related causes than any other single cause.<sup>16</sup>

Approximately one third of all babies born in the U.S. are delivered by cesarean section. According to a new study, published in June 2015 in the British Medical Journal, newborns delivered by C-section face a number of chronic health problems later in life including type 1 diabetes, asthma and obesity.<sup>17</sup>

*\*N Engl J Med. 1988 Jul 28;319(4):189-94*

Before Birth	
Miscarriage	31%*
Preterm Birth	12%
After Birth	
Autism	1 in 50
Asthma	1 in 8
Allergic Eczema	1 in 5
Serious Food Allergies	1 in 12
Celiac Disease	1 in 80
ADHD	1 in 7
Dyspraxia	1 in 12
Bipolar Disorders	1 in 30

*Unhealthy pregnancies and specific chronic childhood conditions are connected to environmental and nutritional problems from preconception to infancy.*

*The chronic conditions also include obesity, cancer, type one diabetes, and many other childhood problems.*

## P2i Connecting the Dots

Can proper prenatal care based on measurements of the mother's body burden and nutritional profile produce healthy babies? Can physicians benefit from these measurements and make more accurate assessments to help a prospective mom strengthen her health profile with proper nutrition, avoidance of negative environmental factors and reduction of body burden? Can physicians benefit from these measurements to better guide medical treatment of a newborn through the first two years of life?

Success in mapping the human genome has fostered the complementary concept of the 'exposome'. The exposome can be defined as the measure of all the exposures of an individual in a lifetime and how those exposures relate to health. An individual's exposure begins before birth and includes insults from environmental and occupational sources. Understanding how exposures from our environment, diet, lifestyle, etc., interact with our own unique characteristics such as genetics, physiology, and epigenetics impact our health is how the exposome will be articulated.

Can the exposome help physicians protect the health of their patients' successors for generations to come? This is the challenge of the P2i Program.

# The P2i 10-Step Program

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- 1 → 300,000 women who are pregnant will be recruited to participate in the program.
- 2 → Participants will be measured for body burden and nutritional status at various times in their pregnancy to track improvements.
- 3 → P2i will use state-of-the-art mass spectrometry (MS) equipment developed to precisely measure participants' exposomes. In addition, the UGA public health initiative will conduct advanced heel prick tests on every infant born in Georgia to include both genetic and environmental measurements.
- 4 → The Forum will collaborate with MS developers to:
  - a. Create new, advanced measurement tools and methods including biomarker testing assays and other critical biomedical measurement technology to establish or better define existing clinical parameters to support the scientific applications of results from the P2i program.
  - b. Ensure that MS development provides medically relevant information.
  - c. Guide the MS developers and clinical laboratories in research and development that utilizes easily tolerated procedures. (For example, a test that uses a small rather than large quantity of blood).
- 5 → The P2i faculty will develop a training program, that will include an online program, for physicians and healthcare practitioners.
- 6 → P2i certified medical professionals enroll participants in the P2i program, practice the P2i protocol, utilize P2i's laboratory measurement systems and contribute to and use the P2i database.
- 7 → A P2i Center will be established in Atlanta, Ga., as a center for treatment and data mining. A former senior CDC official who was part of the agency's pregnancy and preconception program for many years will run this center.
- 8 → Under the leadership of the University of Georgia, a P2i database will be built to utilize the powerful research database, REDCap, to find statistical associations between exposures, effect of exposures and other factors such as the connection between genetics, epigenetics and disease conditions.
- 9 → The P2i faculty will guide and establish P2i protocols.
- 10 → P2i will build a virtual conference center accessible to women, couples, researchers and physicians to expand a global conversation regarding healthy pregnancies, babies, and chronic childhood conditions. This conference center will be used to train both medical professionals and mothers-to-be on P2i protocols.

## P2i Virtual Global Conference

24 hours/day, 7 days/week, 365 days/year on the internet

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*A content and experience-rich website in the form of a relaxed university campus.*

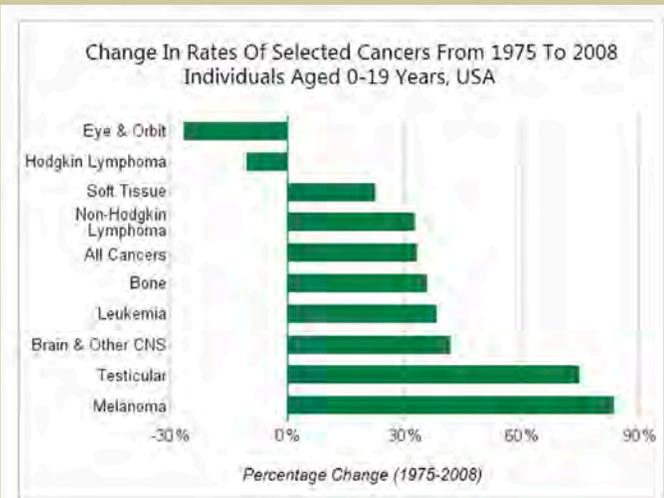


*Live and archived training for health care practitioners and their patients.*



*P2i Global™ Campus with specialized activities.*

## *P2i Exposome & Genetics Project: Preventing Childhood Cancer*



Overall, childhood cancers rates have increased from 12.9 to 17.3 per 100,000 children per year (an increase of 34%). Cancer types that have shown the greatest increases include melanoma, which has increased by 84%, testicular cancer (75% increase), brain cancer (42% increase), and leukaemia (38% increase).

Approximately one in 285 children in the U.S. will be diagnosed with cancer before their 20th birthday.

With more than 90% of the cancers the result of environmental exposures, there is hope that the new science of exposomics and genetics will predict and prevent these tragic events.

We will begin identifying specific environmental contaminants that are causing childhood cancers during pregnancy and early infancy.

There are a number of exposome projects that are identifying the environmental causes of chronic diseases. One of the most promising is the work being done by a group headed by Dr. Steve Rappaport from the University of California at Berkeley. His work has already identified environmental exposures that cause leukemia, such as benzene. Although this work and measurements are in the early stages, the P2i program can benefit from this and other research facilities that are developing exposomic methodologies.



*The news of a cancer diagnosis is never welcome, but may be even more unexpected and difficult when the disease is diagnosed in a child.*

## *What P2i Plans to Accomplish*

The results of the project will help us better understand how various types of exposures interplay with genetic factors to influence our risk of disease. In addition:

- to measure a range of chemical and physical environmental hazards in food, consumer products, water, air, noise, and the environment, in pre and post-natal early-life periods;
- to define multiple exposure patterns and individual exposure variability (temporal, behavioral, toxicokinetic);
- to quantify uncertainty in exposure estimates;
- to determine molecular profiles and biological pathways associated with multiple exposures;
- track the development of childhood diseases by studying genetic information collected through infant heel prick tests;
- follow the progress of participants' children during their first five years of life;
- to obtain exposure-response estimates for multiple exposures and child health;
- to estimate the burden of childhood disease in the U.S. due to multiple environmental exposures;
- to strengthen the knowledge base for U.S. health policies and provide a clear path to reform health care for future generations;
- to globalize the P2i project to reach all children regardless of financial resources.



*The P2i Project will use the powerful government database program to enter in protocol compliance with the 300,000 enrollees. This will result in a powerful set of "big data" that will connect the dots to show which environmental insults are causing chronic childhood diseases.*



## What a Contribution to P2i Can Mean

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Rarely can a donor's contribution create a paradigm shift – especially in the area of human health. A donation in P2i has the potential to help predict and prevent many chronic childhood diseases.

We expect that the initial group of 300,000 women and their children enrolled in the P2i program in the U.S., that follow the P2i protocol, will enjoy a significant reduction in pregnancy complications and very few chronic health conditions for their children. This carefully measured success captured in government databases (RedCAP), will generate a great deal of global interest and P2i, through the University of Georgia alliance, will be incorporated into public health programs worldwide.

Prevention provides an extraordinary rate of return for the donor contribution. For example, the current estimate for successfully treating a child with cancer is \$1 million. Each year 16,000 children are diagnosed with cancer in the U.S (180,000 globally). If the environmental factors that contribute to cancer are mapped, thousands of cases can be prevented in the future. However, the financial savings are not the primary return for contributors. Donations can save future generations of children from the serious chronic diseases that the current generation may have caused.



## CONTACT INFORMATION



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## *The Forum*

The FORUM is authorized to operate as a 501(c)(3) nonprofit organization by the federal government and the state of Oregon. In the decade since its inception, The FORUM has provided services that have dramatically improved the lives of thousands of children with special needs. The Forum is a think-tank designed to bring experts in many fields together to assess the current state of knowledge and to determine the most promising directions for treatment and research for special needs children. The Forum supports high quality, independent research.

## *The Forum's P2i Faculty*

This P2i faculty includes our nation's leading pediatric experts. This distinguished group of scientists and medical doctors developed and presented a CME course for a new medical protocol to significantly reduce the rate of pre-term births and chronic conditions in infants.

It is the first CME course to help women dramatically lower the risk of unsafe pregnancies and children with chronic conditions.

### **Robert L. Hendren, DO – Chair of the Faculty**

Dr. Hendren is Professor of Psychiatry and Behavioral Science; Director of Child and Adolescent Psychiatry, Director of the Autism and Neurodevelopment Program, Co-Director of the Dyslexia Center and Vice Chair of the Department of Psychiatry at U.C. San Francisco. Previously, he was Professor of Psychiatry and Executive Director at the U.C. Davis M.I.N.D. Institute (Medical Investigation of Neurodevelopmental Disorders). He is Past President of the American Academy of Child and Adolescent Psychiatry. He has published four books and 100 scientific papers and has been listed in "The Best Doctors in America" each year since 1996.



### **José F. Cordero, MD, MPH - Director, Atlanta P2i Center of Excellence**

Dr. Cordero is the Patel Distinguished Professor of Public Health, Department Head, and Professor of Epidemiology at the University of Georgia College of Public Health. His current research focuses on the risk factors and prevention of preterm births. Dr. Cordero was an Assistant Surgeon General of the U.S. Public Health Service and the founding director of the National Center on Birth Defects and Developmental Disabilities (NCBDDD) at the Centers for Disease Control and Prevention (CDC). Along with his duties as a faculty member at the University of Georgia, he continues to serve as Co-Principal investigator of the Puerto Rico Testsite for Exploring Contamination Threats (PROTECT). This research program, funded by the National Institutes of Health, Superfund Research Program, examines environmental risk factors for preterm births. He is a Member of the Board of Trustees at the March of Dimes.



### **Jeanne Conry, MD, PhD**

Jeanne Conry, MD, PhD was the 64th President of the American Congress of Obstetricians and Gynecologists, a membership organization representing over 57,000 practicing obstetricians and gynecologists. She has lead guideline development and national policy on the important role of Reproductive Health and the Environment. She is leading the Women's Preventive Services Initiative, a national collaboration to define and implement optimum women's health services across their lifespan. She has led efforts on Quality and Safety in Maternity Care through improved standards and responses in high risk obstetrics.



Dr. Conry was a practicing obstetrician gynecologist at Kaiser Permanente for 28 years, where she served in a leadership capacity, as the Assistant Physician-in-Chief for Kaiser Permanente’s Sacramento Roseville region. She developed the Women and Children’s Center, the largest obstetric delivery service in KP. Dr. Conry currently serves as CEO of the Environmental Health Leadership Foundation, an organization that spearheads efforts to improve the health and well-being of women through systematic changes in health care delivery with a focus on the environment. Dr. Conry earned her medical degree from the University of California, Davis, where she also completed her residency in Obstetrics and Gynecology. She earned a Doctor of Philosophy degree in biology from the University of Colorado. She serves as an Associate Clinical Professor at the University of California, Davis.

### **Brenda Eskenazi, PhD**

Dr. Eskenazi is an expert in reproductive and perinatal epidemiology. She is Professor of Maternal and Child Health and Epidemiology at U.C. Berkeley. Her research has been the effects of toxicants including lead, solvents, tobacco smoke, dioxin, and pesticides and their consequences for human reproduction and child development. She is the Principal Investigator/Director of an NIH/EPA Center for Excellence in Children’s Environmental Health Research and its project, “CHAMACOS,” which investigates the exposure pathways of pesticides and the effects of pesticide exposure.



### **David Berger, MD**

A board-certified pediatrician, Dr. Berger specializes in pediatric primary care with an emphasis on genetic and environmental triggers during pregnancies. More than 500 of his patients over the last 10 years have enjoyed safe pregnancies and healthy children. Specifically, none of the children developed diabetes, just one developed asthma and only one family has recurring ear infections. He is a co-founder and advanced practitioner of the Medical Academy of Pediatric Special Needs (MAPS).



### **Robert Heaney, MD**

Dr. Heaney is Professor of Medicine at Creighton University, where he recently served as Vice President for Research. He has received prestigious awards, including the McCollum Award of the American Society of Nutrition, the Atwater Medal of the Agricultural Research Service (USDA), and the Bartter Award of the American Society for Bone and Mineral Research. He is a Fellow in the American College of Physicians and the American Society for Nutritional Sciences.



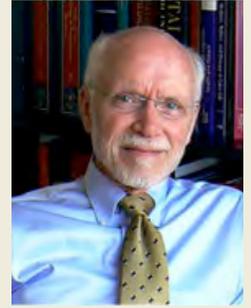
### **Carol L. Wagner, MD**

Dr. Wagner is a board-certified pediatrician and neonatologist. She is a Professor of Pediatrics at the Medical University of South Carolina. She is a member of The International Society for Research in Human Milk and Lactation and a Fellow in the Academy of Breastfeeding Medicine, and is an elected member in the Society for Pediatric Research. She is co-principal investigator of a recently completed NIH/NICHHD-supported vitamin D supplementation trial involving pregnant women and their infants and a similar trial involving lactating women and their infants.



## **Kent Thornburg, PhD**

Dr. Thornburg received his Ph.D. in developmental physiology and studied cardiovascular physiology as an NIH postdoctoral Fellow at Oregon Health & Science University. He is M. Lowell Edwards Chair, Professor of Medicine, and Director of the Center for Developmental Health at the Knight Cardiovascular Institute, and Director of the Bob and Charlee Moore Institute for Nutrition and Wellness. He has expertise in cardiopulmonary physiology and studies the placenta and intrauterine environment as programming agents for adult-onset chronic disease and leads studies on maternal diet and body burden in regulating fetal growth. He is the principal investigator on NIH studies including maternal-fetal signaling, heart development and placental function.



## **Charles Sailey, MD, MS, FCAP**

Dr. Charles Sailey obtained dual master degrees in cell biology and biotechnology before medical training. After obtaining his medical degree from Ross University School of Medicine, he completed residency training in Anatomic & Clinical Pathology at the University of Maryland, followed by fellowship training in Molecular Genetic Pathology at the University of North Carolina. As medical and scientific director of the Molecular Genetic Pathology, Molecular Microbiology, Metabolic Genetics, and Clinical Chemistry laboratories at Arkansas Children's Hospital, he planned, designed, and coordinated the construction of a human genetics laboratory in 2011.



## ***The Forum Board***

### **Gleason Eakin, Board Chair**

Gleason Eakin has been actively involved in the autism community since 1997. He co-founded the Northwest Autism Foundation, was one of the founders of the Autism Treatment Network (ATN) and was a co-founder of The Forum. He currently serves on the Oregon Governor's Commission on Autism. Earlier in his career, he worked in public education. For 15 years he was a teacher, counselor and coach at the high school level, and was a college administrator for 17 years, retiring as the Dean of Students. Gleason is also a successful entrepreneur and has founded and served on the boards of several successful Oregon businesses.

Education: MA, Oregon State University (Counseling) BA, Western Oregon University

### **David Humphrey, Esq., Board President**

David Humphrey is an attorney and CEO of a number of companies. He is a National Board Member of the Northwest Autism Foundation, THE FORUM, ACT Today!, and a co-founder of Autism Treatment Network (ATN), a joint project with 17 top tier-treating hospitals headed by Massachusetts General Hospital. He is the co-founder and Director of the physician training group, Medical Academy of Pediatric Special Needs (MAPS). He was also executive vice chairman and Board Member of the Autism Society of America and the Autism Research Institute. He is also the President and owner of Kirkman Group, Inc., and other companies, including

a pharmaceutical/nutraceutical company, and an environmental laboratory. Mr. Humphrey's environmental laboratory focuses on Mass Spectrometry (MS) that specializes in analytical technique that measures the mass-to-charge ratio of charged particles and for elucidating the chemical structures of molecules. For the past 11 years, Mr. Humphrey has devoted much of his time to the research and study of autism. He is a successful entrepreneur and an attorney who has founded several large companies.

Education: JD, University of Washington School of Law • BS, Lewis & Clark College (Economics)  
BS, Lewis & Clark College (Political Science)

### **Olin Wethington**

Olin Wethington is a nonresident fellow at Atlantic Council's Brent Scowcroft Center on International Security. He is the founder and chairman of Wethington International LLC, an investment and business advisory firm focused on advising institutions on capital investment, financial structure, and business strategy in emerging markets.

He previously served as chairman, AIG Companies in China, with responsibilities for the operation and expansion of AIG's business in China, including the broadening of its financial services platform in China.

Wethington has also held a number of positions in the US government, including: special envoy on China; counselor to the secretary of the US Treasury; director, economic policy, Coalition Provisional Authority (Baghdad, Iraq); assistant secretary for international affairs, US Treasury; special assistant to the President and executive secretary of the Economic Policy Council, White House; and deputy under secretary for International Trade, US Department of Commerce.

Wethington was previously a partner at Steptoe & Johnson (Washington, DC). He is a graduate of Harvard Law School and the University of Pennsylvania. He is a member of the Council on Foreign Relations, the Board of Trustees of the George C. Marshall Foundation, the Board of Directors of the International Republican Institute, and the Council on Global Financial Regulation. He is a recipient of the Alexander Hamilton Award, the highest honor of the US Department of the Treasury.

### **Margaret Bauman, MD**

Dr. Bauman is a distinguished pediatric neurologist and research investigator who has been a pioneer in the study and treatment of autism for the past 25 years. One of the world's foremost physicians in this field, she is highly respected for the outstanding clinical care she provides, as well as for her research and teachings in the domain of developmental disorders. Dr. Bauman's dedicated career is best exemplified in her establishment and development of The Autism Research Foundation (TARF), The Autism Research Consortium (TARC), the Lurie Center for Autism, and The Autism Treatment Network (ATN). The Lurie Center for Autism is a comprehensive diagnostic and therapeutic program for children, adolescents and adults with autism and associated neurological disorders founded by Dr. Bauman in 1981 as LADDERS (Learning and Developmental Disabilities and Rehabilitation Services).

Education: MD, Medical College of Pennsylvania • AB, Smith College

## **David Cheveallier**

David has more than 35 years in senior management of non-profit organizations ranging from \$2 million to \$8.5 million with up to 260 employees. He has a strong background in international business, program development and turn-around management. For the past 15 years, he has served as President and CEO of Easter Seals Oregon. Prior to this role, David was Vice President, Western Region, for Volunteers of America.

Education: MBA, Tulane University

## **John Finnell**

John is a retired business executive and consultant with more than 20 years of experience in international trade with a special focus on China and Hong Kong. In addition, he has extensive experience in senior management of companies in the promotional products industry. His interests in youth, education and human potential dates back to his presidency of the Oregon Youth Council in the 1970s and his appointment to the Oregon Governor's Committee on Children & Youth.

Education: BA, University of Colorado, Boulder

## **Doreen Granpeesheh, PhD**

Dr. Granpeesheh has dedicated over 30 years to helping individuals with autism lead healthy, productive lives. While completing her education at UCLA, Dr. Granpeesheh worked with Dr. Ivar Lovaas on the groundbreaking outcome study published in 1987, which showed a recovery rate of close to 50% among the study's research participants who had been diagnosed with autism. Dr. Granpeesheh built on Dr. Lovaas's work, developing the CARD Model, which is a comprehensive, evidence-based approach to treating autism. In 1990, Dr. Granpeesheh founded the Center for Autism and Related Disorders, also known as CARD. Under Dr. Granpeesheh's leadership, CARD has become one of the world's largest providers of ABA-based treatment for individuals diagnosed with autism spectrum disorder. Today, CARD has nearly 30 locations throughout the U.S. and internationally, employs nearly 1,500 highly skilled employees, and is a leading employer of Board Certified Behavior Analysts (BCBAs).

Education: PhD, UCLA • MA, UCLA (Psychology) • BA, UCLA (Psychology)

## **Lee Grossman – Lee Grossman, Executive Committee**

Along with his role with P2i, Lee is President and CEO of Advance Enterprises, LLC, a global consulting firm specializing in working with corporations to create successful social enterprises and advising health and/or medical related firms on product design and delivery. From 2004-2011, he served as the President and CEO of the Autism Society and was the President of the Autism Society of America Foundation and publisher of the Autism Advocate journal. While at the Autism Society, he oversaw the nation's largest grassroots autism organization, with over 190,000 members and supporters and 160 chapters across the U.S.. In 2007, he initiated strategic partnerships with Easter Seals, the Autism Research Institute, and the Celtic Nations for Autism, the Autism Society of the Philippines and the Autism Society of Parents in Hong Kong to deal with disability services issues. Prior to his position at the Autism Society, Lee owned a business for 25 years that specialized in consulting to the medical industry.

Education: MBA, Georgetown University • BA, Hawaii Pacific University

### **Judi A. Rees**

Judi is a longtime supporter of many children's charities in the Bay Area. She is actively involved as a board member for the Bay Area Make-A-Wish Foundation and Ronald McDonald House of Palo Alto. She is also a major donor for the Lucile Packard Children's Hospital affiliated with Stanford University.

Judi's past nonprofit roles include serving as Vice Chair of RettSyndrome.org and as Founder and President of the Adalyn Jay Foundation, an organization dedicated to children's issues. She was also a board member of the Giaretto Institute and ReSurge International (formerly Interplast), a pioneer in providing reconstructive surgical care to some of the poorest regions of the world. During her professional career, she served as president of JMB Services, a trade show and meeting planning business with clients primarily focused in the technology sector.

Education: University of Hawaii

### **Steve Mulhall - Technical Advisor to The Forum**

Steve is a successful global sales and marketing executive with expertise in virtual engagement solutions and technology operations management. Since 2011, he has served as the Director of Sales for Intercall, the world's largest conferencing provider. Its key services include offering increased audio, web and video conferencing solutions for effective business communications. As Technical Advisor for P2i, Steve brings strategic planning, strong C-level business development, sales and operations management expertise. Prior to joining Intercall, Steve honed his skills in business development and leadership through management positions with 6Connex, BScaler, Inc., Ximeta, Inc., and Zen Research Inc.

Education: MBA, University of Tampa • BA, National University

### **Frank Rudolph**

Frank brings many years of fiscal management to his role as a Forum board member. As the Vice President and Wealth Advisor for Wells Fargo Private Bank, Frank oversees client assets throughout the company's Nevada region. His areas of expertise include wealth management, portfolio management, commercial lending and investments. Prior to joining Wells Fargo, Frank worked in sales management positions spanning 21 years for Columbia Management Investment Advisors, LLC.

Education: JD, University of Tennessee College of Law • BA, University of Cincinnati

## ***P2i Staff & Advisory Support***

### **John DeHoney, Executive Director**

John has worked in the field of nonprofit and association management for more than three decades. Earlier in his career, he served as a legislative advocate for the California Chamber of Commerce, which later led to a role as Executive Director of the California Economic Development Commission. Several years later, John and a colleague formed Turner DeHoney Associates with a focus on real estate investing. The firm's main client was the Construction Laborers Pension Fund of Southern California, a \$200 million investment portfolio where John served as Real Estate Investment Manager. John later relocated to Oregon and was hired as the President and Executive Director of the Autism Treatment Network. After several years with ATN, John was offered the opportunity to lead The Forum as its first Executive Director, a position he has held since 2007. John's passion for finding solutions to chronic illnesses within the autism spectrum led him to his work as a long-time volunteer board member for the Northwest Autism Foundation.

Education: California State University, Fullerton

### **Jonathan Staebler - Legal Counsel to The Forum**

Jonathan is a seasoned business lawyer who brings a wealth of big firm and corporate experience to his role as legal counsel for The Forum. Since 1999 he has been the principal of Jonathan Staebler, International Business Law based in Bethesda, Maryland. His scope of work includes corporate law, mergers and acquisitions, contract negotiation, corporate governance, litigation and licensing. Prior to 1999, he was a partner at Wilkinson & Staebler, (international manufacturing); Special Counsel for Nexsen Pruet Jacobs & Pollard, a large-scale real estate development firm; and Vice President, Division Counsel and Senior Transactor for Citicorp Investment Bank.

Education: JD, Columbia Law School • BA, Princeton University



## CONTACT INFORMATION

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