On April 29, 2014, Stanford University Medical Center Development held a reception for donors to Stanford Medicine and its annual funds—Hospital Partners, Med Fund, and Cancer Discovery Fund—at Sharon Heights Golf & Country Club in Menlo Park. The focus of the evening was to thank our generous Partners in Medicine donors for their support, and to share Stanford Medicine’s aim to lead the biomedical revolution.

Host and featured speaker Lloyd B. Minor, MD, the Carl and Elizabeth Naumann Dean of the School of Medicine, welcomed more than 100 guests with appreciation for their abiding generosity to Stanford Medicine. He also applauded the Stanford teams he has worked with since assuming the role one and a half years ago.

“The students, physicians, and staff supported by your donations to Stanford Medicine bring a unique spirit of optimism, enthusiasm, and engagement to our shared challenges and opportunities,” he said.

Minor then shared his perspectives on how Stanford Medicine—composed of Stanford University School of Medicine (SOM), Stanford Hospitals & Clinics (SHC), and Lucile Packard Children’s Hospital (LPCH)—intends to lead the biomedical revolution. “This is the century of biomedicine,” he stated, explaining that an unprecedented convergence of multiple disciplines—empowered by technologies ranging from imaging to data science—is reshaping medicine.

While acknowledging that “pre-eminence is an audacious goal,” Minor outlined the four mission areas that will drive Stanford Medicine toward that goal: fundamental research, translational research, teaching and training leaders, and taking care of patients.

“To lead we must be pre-eminent. To be pre-eminent, we must be excellent across all our mission areas,” Minor said.

Recalling how the SOM moved from San Francisco to Silicon Valley in 1959 to be closer to the scientists and engineers flocking to the region, Minor characterized fundamental research as an area of strength for Stanford Medicine. By facilitating interdisciplinary work, “we’ve nurtured creativity and innovation,” he said. He referenced Stanford Neurosciences Institute, which fosters collaboration between not only biomedical and physical scientists, but also among experts in economics, law, psychology, and other social sciences.

Minor defined the second mission area, translational research, as “bringing advances from the lab to patients.” While recognizing the track record of both fundamental and translational research in cancer, heart, and neurosciences, Minor acknowledged that translational research is “a newer area” for Stanford Medicine overall. “We must leverage the power of fundamental research in new and innovative ways,” he said, and described how the discipline of population health sciences is being ramped up to help SHC implement a learning health-care system.

“Population health science means learning what we can about our patients and how they respond to treatment, then using those insights to drive ever-more patient-centered care,” he explained. Stanford’s expertise in bioinformatics, which uses quantitative and computational methods to amplify the outcomes of basic and clinical research, will also help the SOM accelerate its excellence in this area.
Turning to the third mission area, teaching and training, Minor shared that the SOM had received more than 7,500 applications for approximately 95 slots. “That demand enables us to attract the very best to our medical school, just as it does for the PhD and residency programs, and for our fellowships,” he observed. He described some daunting conditions facing today’s medical school students, including the median age at which physicians receive their first award (40 years old) and declining rates of funding from the National Institutes of Health.

Minor credited the university broadly for its role in empowering Stanford Medicine to engage and inspire future leaders of the biomedical revolution. “We contribute to and benefit from the enormous intellectual resources that exist at this great university,” he said.

To further catalyze teaching and training, SOM aims to grow the MD/PhD program, which Minor noted attracts candidates with “a special level of dedication.”

“Delivering care to patients is where research, translation, and training are brought to fruition for the benefit of patients,” Minor said of the final mission area. “And our goal is to provide patient-centered care that is unparalleled.” Cancer was called out as a disease particularly vulnerable to “discontinuities” in care given its persistent complexity and the typical length of treatment, including a lifetime of follow up. “We want to change that,” Minor emphasized, and briefly outlined a key deliverable of the Transforming Patient Care initiative led by the Stanford Cancer Institute. An oncology nurse and lead physician are now assigned to each and every cancer patient treated at SHC. “There may be five to eight physicians involved in delivering care to a single patient, but there will be a single doctor coordinating that care,” Minor explained, “and a nurse always available for questions from patients and families.”

After opening the floor for questions, Minor addressed issues ranging from the discouraging cost of pursuing FDA approval for therapeutics, to the impact of the Affordable Care Act, and the status of construction on the two hospitals.

He acknowledged both the challenges and opportunities unique to Stanford Medicine when he observed that “unlike our law school, which isn’t running a major law firm; unlike our business school, which isn’t running a consulting practice—we run a large, complex health-care delivery system.” Yet, citing his close collaboration with Amir Dan Rubin and Christopher Dawes, president and CEO of SHC and LPCH, respectively, Minor promised that patients, staff, and supporters alike could expect to see increased cooperation and connectivity across the entities that comprise Stanford Medicine.

He closed the event by again thanking the guests for their partnership with Stanford Medicine.

For more details about this evening, please contact Leadership Giving at stanfordmedicine@stanford.edu.