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The Spirit of St. Luke's

St. Luke’s wages high tech war on cancer

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Cover
Photo on left: Evelyn Vettel holding a photo of her son Bill, one of the earliest patients to undergo immunotherapy at St. Luke’s, and his two daughters. Standing behind Evelyn are her three daughters and Bill’s sisters—Betty, Barbara, and Priscilla.
Top right: John P. Hanson, Jr., M.D., the oncologist who pioneered immunotherapy at St. Luke’s, talking with a patient. Bottom right: Robert Petit, Ph.D., director of the St. Luke’s Immunotherapy Lab.
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St. Luke’s wages high tech war on cancer

This is a story about an inspiring and courageous man who died. His story has all the ingredients of several spellbinding screenplays rolled into one. All at once, it is a futuristic high-tech thriller, a family saga that taps into our deepest emotions, and an adventure story about risk takers who dare to challenge the most deadly of enemies. You may not be familiar with the cast of characters in this story, but once you learn about them, they will not be easy to forget.

The hero is William (Bill) Vettel, an ordinary man in some ways, but actually a very special human being (he could be your brother, your father, your son, or your next-door neighbor) who was thrust without warning against an enemy that he met head on and fought valiantly. The enemy is cancer and the battleground is Bill’s body. The risktakers are the scientists and medical professionals at St. Luke’s Medical Center in Milwaukee whose research is giving people devastated by the most deadly of cancers—people like Bill Vettel—new, highly effective weapons to fight this battle of all battles and sometimes win. The supporting actors are Bill’s family members and friends who helped give him the strength and fortitude to continue fighting despite the overwhelming odds against him.

Whether Bill won his battle or not is a question that will be asked. His mother feels he won. His daughters feel he won. His sisters and brother feel he won. His physician, Dr. John P. Hanson Jr., the St. Luke’s oncologist who led Bill’s battle, feels he won. Bill himself, though very aware of his impending death, felt he won. Readers of this article will have to decide for themselves.

Bill’s family: his first line of defense
Bill’s mother, Evelyn Vettel, lives in a spacious, beautifully decorated upper flat in Wauwatosa, next door to the house in which she and her husband raised their six children. Her life has been full of the joys of a close, large family and also the inevitable sorrow that comes with loving and losing people you cherish. In addition to losing Bill last September, her husband John died three years ago and another son, Robb, died 13 years ago.

Her remaining children are talented, active, and compassionate. They are obviously devoted to their mother, who at a very young-looking 81 years, is attractive, vibrant, and much involved in her family (which now includes 12 grandchildren). The entire family agrees that Bill’s struggle created a closeness among them that could have been achieved only through such an intense and extraordinary experience.
Bill was never sick. He had an extremely high energy level and was always on the move. He approached everything he did—from his family, to his 50-hour per week business schedule, to his athletic endeavors—with dedication and enthusiasm.”

On a midwinter Sunday afternoon with sun streaming in the apartment’s many windows, Bill’s three younger sisters, Priscilla and twins Betty and Barbara, gathered in their mother’s living room to discuss their brother’s life and death. (Bill’s older brother, John, Jr., was not present because he lives in Lake Tahoe, but he and his wife were very much part of the family support system that went into gear when Bill became sick.) It was an afternoon punctuated with laughter and tears, reflecting the surprising joy and acute pain of the story they were telling.

Bill’s battle begins

Bill’s sisters describe him with all the admiration typically reserved for big brothers. He was a devoted father to his two daughters, Claudia, now 18, and Lauren, now 14. (Claudia and Lauren live with their mother, from whom Bill was divorced.) He was a successful lawyer with his own practice, and an avid athlete and runner who relished the outdoors. Fun-loving and personable, Bill had many friends and an active social life which included his very close friend, Karen Ellenbecker. Bill had been a paratrooper stationed in Germany during the Vietnam War, but nothing in his past had prepared him for the battle he was about to fight.

Priscilla says, “Bill was never sick. He had an extremely high energy level and was always on the move. He approached everything he did—from his family, to his 50-hour per week business schedule, to his athletic endeavors—with dedication and enthusiasm.”

Claudia and Lauren, Bill’s daughters, remember their father as warm, non-judgmental, and a great listener. Both girls attribute their strong-willed natures to their father. They will always think of him as optimistic and very youthful. Lauren recalls that when a close friend learned how old her dad was, she was astounded and said, “You’ve got to be kidding. Your dad’s not 51. Your dad’s hot!”

Because of his strong personality and robust good health, his illness came as a complete surprise, not only to Bill but to everyone who knew him. His mother remembers that Bill had been feeling tired for some time before he agreed to see her internist. He continued to lead his fast-paced life while the doctor put him through all sorts of tests. In January 1989, by the time a suspicious mole on his back was finally discovered, removed, and diagnosed as melanoma, his disease was extremely serious.

Melanoma can usually be stopped if caught in an early stage, but Bill’s disease had progressed to the fourth out of four possible stages. His situation
was particularly dire because metastatic melanoma, with a survival rate of about 1 percent over a 12 month period, is an especially aggressive, devastating cancer and is difficult to treat. Surgery is usually the initial treatment in local melanoma that does not deeply invade the tissue. However, deeply invasive melanoma, despite the best therapy, has a high tendency to recur. Metastatic melanoma responds poorly to radiation therapy, somewhat to chemotherapy, and best to immunotherapy. Consequently, most people diagnosed with later-stage melanoma are told that their life expectancy is very limited.

In his typical, independent “I-can-handle-this-myself” fashion, Bill didn’t tell his family at first how serious his condition was. However, he quickly realized that this was a battle he would not be able to fight alone. At one point, he said to his sister Priscilla, “It’s not your problem. It’s my problem.” Her quick response was, “No, Bill, this is the entire family’s problem. We’re going to fight this with you the whole way.” And they did. His mother, his sisters, his brother, his daughters, and Karen were with him through every moment of his monumental struggle. Not only did they provide emotional support, but they questioned and investigated every possible treatment for his disease.

**Bill finds St. Luke’s Immunotherapy Program**

Bill’s initial medical treatment was at another hospital; however, he found his way to St. Luke’s through the National Cancer Institutes (NCI). One of his sisters had heard a public radio report about immunotherapy, a new and still developing therapy for cancer that uses the body’s own immune system to attack the disease. She called the NCI, which recommended Dr. John Hanson and the immunotherapy lab at St. Luke’s Medical Center in Milwaukee. The family still feels very fortunate that Bill did not have to fight this battle on foreign territory. Priscilla remembers the staff person at the NCI in Washington, D.C., saying to her, “Why go to the East Coast when the best treatment available is right there in your hometown—at St. Luke’s in Milwaukee?” Bill learned more about St. Luke’s Immunotherapy Program through his good friend, Dr. William Levis from New York. Dr. Levis had worked at the NCI for ten years and was familiar with the cutting-edge research taking place there. Dr. Levis was an important source of information and support for Bill as his illness progressed.

Bill’s mother remembers, “There was a bond between Dr. Hanson and Bill from the very beginning. Bill knew, and we all
knew, that Dr. Hanson would do absolutely everything possible to save Bill’s life—and that St. Luke’s had the most advanced tools to fight cancer available anywhere. The most important part of going to St. Luke’s though, was that Dr. Hanson and his Immunotherapy Program gave Bill hope.”

However, by the time Bill went to St. Luke’s, his disease had metastasized into the lymph system and the lungs. Melissa Walker, RN, an oncology research specialist in the Immunotherapy Program, met with Bill and his family to discuss his treatment options.

The decision to participate in the program was Bill’s. Melissa Walker points out that some patients choose not to participate in the Immunotherapy Program. There are potential side effects but immunotherapy is the most effective treatment for metastatic melanoma. With TIL therapy (explained in more detail later), approximately 50 percent of patients exhibit cancer remission, and the cancer completely disappears in approximately 10 percent. She emphasizes that it is impossible to use the word “cure,” as it is for some cancers. However, tumors have completely vanished for years in significant numbers of patients who have undergone immunotherapy. The side effects of TIL therapy are as manageable as the side effects of other complex cancer therapies such as chemotherapy.

This past December, Vincent T. DeVita, Jr., M.D., physician-in-chief, Sloan-Kettering Memorial Cancer Center, who spoke at St. Luke’s Medical Center said that TIL therapy is clearly the best for metastatic melanoma.

When making his decision about whether or not to participate in TIL therapy, Bill wanted to hear about one survivor. Was there anyone in the country whose cancer had metastasized to the lungs who was treated by immunotherapy and was alive today? The answer was “yes.” That was all Bill needed to move ahead.

**Immunotherapy: at the frontier of cancer research**

One cannot comprehend Bill’s experience without understanding the highly complex treatments he received. Robert Petit, Ph.D., the director of St. Luke’s Immunotherapy Lab, explains the procedure in language that the average person can understand. He begins with the following basic description of cancer and its history of treatment:

“Cancer is the uncontrolled growth of an abnormal cell. It’s the growth that is the problem since cancer cells don’t grow like trees where one cell gets bigger and bigger. When they grow, they divide to make more cells and the process snowballs. Surgery is the oldest and still the best treatment for cancers that haven’t metastasized. When cancer has spread throughout the body, treatment becomes more difficult. Radiation therapy and chemo-
therapy are approaches to treating cancer throughout the system, but they have their limitations, primarily because normal cells are damaged during the procedures. What we haven’t been able to develop until now is a cancer treatment that kills cancer cells but doesn’t harm normal cells. This has been very difficult because cancer cells and normal cells really aren’t much different.

“Within the last ten years, scientists have discovered that certain cells in our immune system appeared to have the ability to distinguish between normal cells and cancer cells. Some can kill the cancer cells while leaving normal ones unharmed. These cells may actually be attacking cancer cells on a regular basis, making up a “cancer defense” force that finds and eliminates cancer cells as they arrive. However, sometimes the cancer cells are too strong, and then they win the battle with the immune cells. This appears to happen more frequently as we age and our immune system weakens at the same time more abnormal cells are being produced.

“Our cancer therapy at St. Luke’s uses this knowledge of the immune system and is actually very simple in concept but complex in application. What we do is amplify the body’s own ability to fight cancer. We obtain these cancer-fighting immune cells from somewhere in the patient’s body and treat them with a drug called Interleukin-2 (IL-2), a blood protein which causes the cells to multiply and increase their cancer-fighting ability. Then we put the increased number of activated cells back into the patient, hopefully giving them a highly increased capacity to fight cancer.”

LAK and TIL therapies
The St. Luke’s Immunotherapy Program is now using two approaches to fighting cancer by amplifying the body’s natural immune cells—LAK therapy and TIL therapy. These treatments are currently being tested in nearly all types of tumors. Of particular interest are skin cancer and kidney cancer because they are among the most lethal, and they do not respond well to radiation or chemotherapy. These cancers are also particularly responsive to the cancer-killing cells which are already part of the body’s natural immune system. Researchers are studying how well these therapies may work with bladder, lung, breast, and colon cancer.

LAK stands for “lymphotoxin activated killer cell.” During LAK therapy, IL-2 is injected into the patient’s bloodstream, causing the natural cancer-fighting cells to multiply; however, the body has certain pre-set limits for the number of LAK cells that can be generated in the body. Consequently, the increased LAK cells are filtered out of the bloodstream by a specific machine designed for this purpose. Those cells are then stimulated for about a week in a laboratory culture.
The results of LAK and TIL therapy can be miraculous. Bill underwent LAK therapy at St. Luke’s in November 1989 and came through the treatment well. His sister Betty remembers, “Bill felt he was going to make it. Our hopes were so high. The support he received at St. Luke’s was tremendous. We were all very well prepared by St. Luke’s for what to expect.”

The results were not immediate. While Bill was still in the hospital, a growth appeared on his back. This was not a good sign, but cells were taken from this tumor to prepare for the TIL treatment which had just been initiated at St. Luke’s. Bill became progressively worse in December and his family remembers thinking that they were watching him die. It appeared that the LAK treatment had failed. He was placed on oxygen and could hardly take a step without gasping for breath because of the cancer in his lungs. His mother moved into his Fox Point home to care for him.

In an effort to buy time until TIL therapy could be initiated, Dr. Hanson prescribed chemotherapy. Suddenly Bill made a complete turn-around. His sister Priscilla says, “We felt that the LAK therapy was finally taking hold and, in combination with the chemotherapy, the cancer was being successfully attacked. Within a week, he was taken off oxygen and there was a 50 percent reduction in the number of tumors throughout his body.”

Bill Vettel’s spirits soared. In early March, he actually went skiing at Lake Tahoe. Then he returned to St. Luke’s for TIL therapy. The cells taken from the tumor on his back had multiplied enough to be used. He responded dramatically. By early May, almost no cancer could be

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The enemy retreats

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—Dr. John P. Hanson, Jr.
detected with CT scans. Priscilla says, “We truly felt our prayers had been answered. We felt he had been snatched from the jaws of death and had miraculously recovered.”

Dr. Petit says, “Bill Vettel is a dramatic representation of the potential of this therapy.”

St. Luke’s key role
Dr. Hanson says, “Immunotherapy will have a major impact on the treatment of cancer. The changes it can produce are remarkable. Immunotherapy is man’s best new hope in the fight against cancer since chemotherapy was discovered in the 1940s.”

He goes on to point out that St. Luke’s has made an institutional commitment to launch and maintain the Immunotherapy Program. He says, “The presence of the Immunotherapy Lab at St. Luke’s reflects the hospital’s commitment to provide state-of-the-art cancer care. St. Luke’s is one of only a few approved centers across the country offering TIL therapy.”

Dr. Hanson emphasizes, “This program would not exist without the commitment and vision of a group of donors from the Milwaukee community who recognized the tremendous potential of this research and have put their dollars and support behind this program. Because of this kind of community support St. Luke’s is creating a distinguished facility for the treatment of cancer.”

Dr. Petit adds, “The people of Milwaukee built this laboratory. They made these miracles possible. They equipped the lab and bought the incubators that we grew Bill Vettel’s cells in.”

There is no doubt in Dr. Hanson’s mind that immunotherapy prolonged Bill Vettel’s life. He says, “Bill was given more time—a positive time, a hopeful time.”

Cutting-edge research in a supportive setting
One of the unique aspects of the Immunotherapy Lab at St. Luke’s is that it exists within a community hospital setting. Melissa Walker says, “Patients at St. Luke’s are able to take advantage of the best technology in the nation to treat cancer while also benefiting from the support of our professional staff.”

Melissa Walker and the other two oncology research specialists working with immunotherapy patients, Carla Rohlf, RN, and Carol Rausch, RN, feel that their roles are to educate and advocate for patients and their families. Melissa Walker says, “We take a caring approach to the patient and his or her family. I believe patients need to be aware of the best therapies available so they can make informed decisions. One of the first steps we take is to clear up any misconceptions people may have about their disease and treatment options. They may have been told that there is no hope for their cancer and then suddenly we say there is
hope. We educate them about the available therapies, side effects, and rates of response. Quality of life is an important consideration when patients are making decisions about cancer therapies. These short-term immunotherapy treatments are associated with temporary side effects that allow patients to resume normal living."

Melissa also puts patients in touch with others who have gone through immunotherapy. Priscilla remembers that she and Bill spent quite a bit of time with a woman who had gone through St. Luke’s LAK program successfully. The woman gave Bill hope and also helped prepare him for the procedure and the side effects he might encounter.

Bill was especially fortunate to be able to have his treatment in Milwaukee where he could be close to his family and friends.

The battle isn’t over
For a time, it seemed as if Bill’s battle was won. The doctors were extremely pleased. His family was ecstatic. Bill’s mother moved back into her own apartment. Periodic tissue checks indicated no recurrence of cancer. Bill’s family feels that this time was a gift. He felt he had conquered cancer and could conquer the world. This was quality time for Bill and his family. He was back at work, running again, and enjoying the onset of summer.

His daughters remember this as a very special time with their dad. It was a time when he could revel in their accomplishments. Claudia was designated as “all state” in soccer and Lauren was selected to be the only freshman on her high school’s varsity cross-country team—honors that their athletic father was particularly proud of. Both girls felt especially close to their father during this time. They had been through a lot with him and had really grown to appreciate how important they were in one another’s lives. Claudia says, “We became more spiritual and really talked to each other in ways we had not done before.”

His good friend Karen also saw in Bill a much deeper appreciation of his friends, his family and his own life. She says, “The extra time Bill had before he died allowed him to reach a harmony with those around him and with the world that was truly beautiful. He let people into his life in a way that hadn’t happened before. He was also in much closer touch with himself. This period of introspection was very important to Bill and to the people who cared about him. I feel he gave us a special opportunity for personal growth that we would never have had without him. There was so much in this experience that is hopeful.”

Then—just when things were going so well—the enemy crept silently in. Bill started to have minor headaches. Tests revealed the cancer had reappeared in his brain. In all likelihood, cancer cells had metastasized there before his immunotherapy treatments began. More
LAK and TIL treatments were not an alternative because they are not effective against cancer in the brain. This time Bill declined very quickly. The cancer spread. He had had a joyous reprieve, but the end was now in sight.

**The battle ends in peace**

Bill wanted to die at home. With the help of St. Luke's, his family brought him home from the hospital in early September and took care of him around the clock. His many friends visited. He was positive and courageous throughout. His daughter Claudia remembers, “He never complained and he never gave up.”

And he retained his sense of humor. Betty remembers how badly she felt when she was moving her family from one home to another and was unable to be with Bill one weekend when he was so sick. Her sister Barbara said to Bill, “Betty wanted you to know how much she would like to be here but she’s moving this weekend.” Adrift in pain and the effects of medication, Bill smiled and responded, “Tell her to save the heavy stuff for me.”

The family remembers that St. Luke's and Dr. Hanson were with them until the very end—concerned not just about Bill but about the whole family. Barbara says, “Dr. Hanson was continually available whenever we had questions about how to care for Bill or what to expect. Thanks to him we were able to anticipate Bill’s death and gather the whole family together to be with him.”

The day Bill died in late September was very much like the day in late January when his sisters and mother remembered his life and death. Sun streamed through the windows. Classical music played softly in the background. He died in the arms of those who loved him, after fighting a courageous and difficult battle—a battle with many victories along the way—a battle that called up all the human and technological resources available to man.

Bill’s family members feel that immunotherapy gave him another year of quality time, time to reflect, and time to come to peace with himself. Everyone agrees that Bill died in peace. He was in and out of consciousness during the last hours of his life, but his family remembers that at one point he opened his eyes with complete awareness and said, “Life is good.”
The Vettel family wrote the following letter to Dr. Hanson after Bill’s death.

October 18, 1990

Dear Dr. Hanson:

Your lovely bouquet of red roses for Bill’s formal send off touched us all.

The kindness, compassion, and encouragement you gave to our loved one, and to every member of the family will always be remembered. It is more than a small consolation to know that Bill had over the past year the best medical care, at the finest medical facility under your expertise and guidance. Without your care, Dr. Hanson, Bill would have died many months ago. Precious moments for Bill, friends, and family would have been lost, never known. Bill had the chance to grow in spirit, love, and understanding. Because of your care, he had time to better prepare for his death and life to come.

I’d like to share Bill’s death at home with you, should others who are considering home care for a dying loved one seek your advice.

Although the last days of caring for Bill at his home were difficult, even with the 24-hour help of skilled aides, they were also filled with a special kind of beauty. Close friends and family came and went to share their love for Bill in the privacy and comfort of his living room, where the bed was placed. Bill recognized everyone, and was thankful. Classical and contemporary CDs were played low, and the windows were often open, allowing Bill to feel and smell the fresh breezes of the last summer days. (He loved to be out-of-doors.) In his last hours, Bill didn’t seem to have any pain. Moments before he died, Bill opened his eyes to look at us and saw the beyond. We saw some of the light reflected in him. He was literally enveloped in love: his mother, daughters, sisters, and girlfriend all held him as he gently hemorrhaged and passed on. We gave to Bill and Bill gave to us, a peace in his dying beyond understanding.

This much we know: all of us are less afraid of death now and see death more as a natural part of the life process. Not without the pain of loss, but also not without meaning.

We are enclosing a cashier’s check for memorial contributions donated to a so-called St. Luke’s Cancer Research Foundation. We rather doubt there is such an endowment, but the Research Foundation was our way of publicly giving you and the St. Luke’s staff the special recognition we feel you deserve for the state-of-the-art experimental treatments and programs that offer so much hope to the terminally ill.

Please use your judgment as to where the money may best be used—new books for the 8th floor library, towards new medical equipment, the Clinic, wherever.

Peace and love be with you.

Evelyn (Mrs.), Claudia, Lauren, and John Vettel, Priscilla, Betty, Barb, and the entire Vettel family
Life income gifts: A practical way to make a gift and retain the income

Most of us are aware of the tremendous changes that have occurred in our federal income, gift, and estate tax laws in recent years. In some cases, the lowering of taxes has lessened their importance in financial planning. In many others, the effect has been to make effective tax planning more important than ever in a sound estate plan.

St. Luke’s Medical Center’s Planned Giving Program offers several ways for an individual to make a gift to the hospital and at the same time retain income for personal use and for the use of another beneficiary.

Benefits will vary, but all of these arrangements share the following attractive features:

- Income for life is paid to you and/or a designated beneficiary.
- You may receive a federal income tax deduction immediately for a portion of the gift value.
- The capital gains tax is eliminated if the gift is in the form of stock or real estate that has appreciated in value. However, if the gift is a large one, the appreciation element is a tax preference item for the purposes of the Alternative Minimum Tax (AMT). The rules are complicated, so you will want to check with your tax attorney or accountant. (Often there is no AMT, or only a minor one, and we would be pleased to do preliminary computations.)
- You will reduce or eliminate federal and state estate taxes and state inheritance taxes.

There are a number of life income plans to choose from when making a gift to St. Luke’s Medical Center. The Life Income Plan we will discuss here is known as a Pooled Income Fund (PIF) Gift. St. Luke’s Medical Center has two separate Pooled Income Funds.

The Pooled Income Fund is designed to provide income, paid at least annually, to one or more individuals. Upon the death of the donor or beneficiary, the amount remaining in the fund is then transferred to St. Luke’s Medical Center.

The Pooled Income Fund is an investment pool that works like a mutual fund. It co-mingles the contributions of many donors and pays the individual beneficiaries a proportionate share of all the income earned each year.

You can give cash or stocks to the Fund. Your gift is irrevocable, but in turn we agree to pay you and/or your beneficiary an income for the rest of your life (lives). You can benefit even more when you donate appreciated securities: the gain is not taxable to you unless you’re subject to the AMT.

The objective of the PIF is to provide a high level of current income to the donor. For example: Mr. and Mrs. Donor are both 65 and in the 28 percent income tax bracket. They own stock worth $50,000, which they bought for $5,000 and which currently pays an annual dividend of $1,000. The Donors would like to sell the stock to diversify their investments but hesitate to do so because of the $12,600 capital gains tax they would have to pay (28 percent tax on the $45,000 appreciation). Above all they want to make a gift to St. Luke’s and be recognized for their gift.

By transferring this stock to St. Luke’s Medical Center’s Pooled Income Fund, Mr. and Mrs. Donor will increase their annual income from it to $4,000 and diversify their investments at no capital gains tax cost. Moreover, the Donors will receive an immediate tax deduction of $8,955.

A contribution to St. Luke’s Medical Center’s Pooled Income Fund will allow you to make a significant gift to the hospital and still receive an annual income from your gift. You’ll diversify your investment through participation in a large and professionally managed fund, eliminating the responsibilities, worries, and costs of personal involvement. At the same time, a Pooled Income Fund gift will benefit others who come to St. Luke’s for their health care. Additionally, you may realize the benefit of a significant tax deduction.

Your tax attorney or financial advisors should always be consulted with regard to any of the life income plans available.

For further information please contact Mr. Brad Holmes, Vice President, St. Luke’s Medical Center/Foundation at (414) 649-7126.
Partners in Philanthropy

Classifications:
Benefactor gifts begin at $5,000 ▼ Patron at $1,000 ▼ Partner at $500 ▼ Sponsor at $100 ▼ Contributor at $25

November through December, 1990

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At all the times you can,
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You have more wealth of a different kind."
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