

Lifelines

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Join Us to Unite to Cure

During the Fourth International Vatican Conference: Unite to Cure - How Science, Technology and 21st Century Medicine Will Impact Culture and Society, which was held on April 26th – 28th, 2018, many people from around the world participated in and joined the Unite to Cure global health care movement. We built bridges to create a healthier global society focusing on enabling tools to Prevent, Repair and Cure disease. We implemented a media campaign that resulted in 3.4 billion combined social and traditional media impressions and 2,829 stories. We shared pivotal knowledge on breakthrough technologies that hold the promise to transform health care. We considered the cultural, religious, ethical and societal implications of emerging knowledge and anticipated the downstream effects of our actions to ensure the safety of humanity. The spirit of global collaboration and exchange of creative ideas that was cultivated during the conference continues to spread, and we invite others to join the mission.

Of course, none of this would be possible without the support of our benefactors and sponsors. I thank all of you for your generous investment of time, energy and dollars. May we all be driving forces for innovation and positive change in each of our communities around the globe. With your commitment, we will see greater access and awareness around emerging therapies, more cutting-edge research and scientific development and increased knowledge-sharing across sectors. We look forward to reconvening in Rome on May 7th – 9th, 2020, for the Fifth International Vatican Conference where we can update one another on the progress we have made.

Dr. Robin L. Smith

Founder and President of the Cura Foundation, and Vice President of STOQ Foundation







UNITE TO CURE CONFERENCE HIGHLIGHTS



*The WNT pathway is in charge of all stem cell proliferation and differentiation. As we age, the WNT signaling levels start drifting out of balance. Every time that happens, there is a disease associated with it. Our approach is that we go after natural targets in the body, and we use the body's own machinery — both hardware and software. We are able to bring the specific WNT levels back into a healthy range, at which point we are able to eliminate the various diseases and restore the health of specific tissues.

By doing that, we are able to live younger while improving the quality of life and

healthspan, eliminating one disease after another."

Osman Kibar, PhD, Samumed



*The science of cell-based ischemic tissue repair is now established. The possibility of clinical tissue repair and regeneration means this will unburden patients of their disease allowing them to lead more healthy and productive lives and restoring health will be more cost-effective than managing disease and good for society as a whole."

Douglas Losordo, MD, Caladrius Biosciences



"No one should be getting stem cell therapy without asking: 'Who is going to collect my data?' and 'Is my data going to be meaningful?' Because without that we're not going to move this field forward and ultimately medicine is driven by data and that's what we need."

Marc Penn, MD, PhD, Black Beret Life Sciences "If you can extend your life by 25 years and the goal of all this, of course, is extend your life 25 years and more, but extend your healthspan to equal your lifespan, so we call it the Seagull Project. The seagull is an animal whose lifespan equals his healthspan. So the last dive of that seagull to get a fish, he dies on that dive. So he was functional until the day he dies. Human beings are not that way."

W. E. "Ed" Bosarge, PhD, Bosarge Family Foundation





"We're at the leading edge of treating MS with stem cell therapy, but we don't have a roadmap. With time we will learn from our patients if this this a remission or a cure. We don't have history to give us that answer today. I've showed you data up to five years, which looks really positive, and we have patients that were treated over 10 years ago who have stayed in complete remission with no new lesions in their MRIs or clinical symptoms. They improved neurologically and continue to do well. So, time will tell."

Richard K. Burt, MD, Northwestern University Feinberg School of Medicine



"Without patients and people in underserved communities being in the conversation, it still remains a very first-world, 1% and mostly US and European-focused conversation. We need to make sure that emergent players with disruptive and innovative ideas are in the conversation right from the beginning. Diversity is critical to creating a future health landscape that works for the many, not just the few. We need to see this as a global conversation and a global collaboration. We do need to find more creative, modern ways of engaging right from the beginning and throughout the evolution of health in these extraordinary times."

Desirée Cox, MD, PhD, The HEALinc Future Health Incubator and the National Stem Cell Ethics Committee of The Bahamas