The Lynne Cohen Foundation has served women and families at increased risk for ovarian and breast cancer for over 25 years, providing them with access to cutting edge, cross-disciplinary medicine at leading cancer centers nationwide.

Lynne Cohen Foundation Preventive Care Programs enable at-risk women to see all the necessary specialists in a single day, including breast oncologists, gynecologic oncologists, research nurses, genetic counselors, and data managers. This is the cancer care and attention we’d all hope to receive and we are so grateful to our supporters for helping us expand this important field. We are always building our LCF and Peony Project communities. Thank you for being a part of this mission. Your commitment inspires us.

Past, present, and future.

AMY COHEN EPSTEIN
Co-Founder, Lynne Cohen Foundation

JENNIFER LEWIS  Founder, Peony Project

The Lynne Cohen Foundation is established in honor and memory of Lynne Cohen.

Immediately, LCF gifts a $150k endowment to USC Norris establishing a Fellowship and LCF Clinic.

CELEBRATING 25 YEARS OF WOMEN’S HEALTH, WELLNESS, AND PREVENTIVE CARE
**FOLLOW-UP: A MOTHER’S LEGACY**

In 2000, sisters Amy and Erin Cohen and Whitney Roos were included in a story in the March issue of Ladies’ Home Journal about Maurie Markman, M.D., an oncologist who was working with a team of researchers at the Cleveland Clinic Taussig Cancer Center to develop an early-detection blood test for ovarian cancer.

The sisters had just started the Lynne Cohen Foundation in memory of their mother, who died of ovarian cancer in 1996, at the age of 53. “One of the reasons ovarian cancer is so deadly is that there are no warning signs,” says Amy. “We’re excited by Markman’s early detection test. She and her clinc have raised $100,000 for this research.”

“We’re doing this so others will not have to go through what we did,” says Amy. “We hope that no one will lose their mothers, sisters or aunt to this terrible disease.”

**DR JULIA SMITH**, LCF Medical Advisory Board Member and Clinical Director of the Cancer Screening and Prevention Program at the NYU Perlmutter Cancer Institute

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**Ladies’ Home Journal**

June 2000

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20k+

women have visited LCF Preventive Care Programs nationwide since 2001

12k+
cancers detected thanks to LCF Preventive Care Programs

30%
of LCF Preventive Care Clinic patients are uninsured

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**“THIS FOUNDATION UNDERSTOOD VERY EARLY ON — WHEN MOST PEOPLE DIDN’T GET IT — HOW IMPORTANT IT WAS TO PURSUE THE ISSUE OF GENETICS AND GENOMICS... THEY UNDERSTOOD THAT YOU COULD USE THIS INFORMATION TO PREVENT CANCERS.”**

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1999

Lynne Cohen Foundation grants $100,000 to the Gynecologic Cancer Program of the Cleveland Clinic to further early detection research for ovarian cancer.

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2000

Amy Cohen Epstein and LCF board determine the mission of the Foundation: providing clinical preventive care for at-risk women regardless of their financial status.

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2012

Georgia Cord’s family establishes the Peony Project in her name, honor, and memory.

The Peony Project becomes the educational branch of the Foundation to expand awareness, grow healthier families, and aid in the fight against women’s cancers.
"SOMETHING WE'VE LEARNED OVER THE PAST 40 YEARS IS THAT EXPOSURES CAN HAVE LONG-TERM, DISTAL HEALTH EFFECTS."
Dr. Linda Kahn, PhD, MPH, NYU Department of Population Health

2018

LCF establishes The SEAM (Series for Education and Awareness in Medicine), a multi-platform initiative providing concrete avenues for education and greater impact in medicine.

THE WORKSHOPS
Drawing from a curated network of professionals and experts, The Seam hosts intimate salons and panels in NYC, LA, and even Abu Dhabi, featuring innovators in the world of wellness, education, technology, and prevention.

THE PODCAST & PLATFORM
Connecting women with stories from the cutting edge of medicine, wellness, and entrepreneurship. The SEAM’s online publication and community platform offers practical, expert-backed wellness advice.

THE SEAM PODCAST
We’ve had the honor of interviewing...

- FDA Director of Generic Drug Policy, Maryl Toufani
- Holistic Nutritionist and Wellness Expert, Elissa Goodman
- Deloitte’s Very First Chief Wellness Officer, Jen Fisher
- Hope for Depression Research Foundation Founder, Audrey Gruss
- Founder of August Period Care, Nadia Okamoto
- Life-Course Epidemiologist, Dr. Linda Kahn PhD, MPH of NYU
- HPV Awareness Activist and Actress, Marcia Cross
- Katerina Schneider, Founder and CEO of Ritual
- Bridgett Burrick Brown, Founder of the Beyond Beauty Project
- Suze Schwartz, Founder of Unplug Meditation
- Pre-visor and Advocate, Tayler LaBella
t - Gloria Feldt, Former CEO + President of Planned Parenthood
- Jenny Galluzzo, Co-Founder of The Second Shift
- Jenna Blake Jewelry Founder Jenna Grosfeld

And many more!

2023

Over 20,000 women have now been served at a Lynne Cohen Preventive Care Clinics, and we are over 30,000 donors strong!

To date, LCF has raised more than 25 million dollars, all of which has been dispersed to preventive care programs and research.

LOS ANGELES
NEW YORK
BIRMINGHAM
WASHINGTON DC
NEW CANAAN
ASPEN
BOISE
HOUSTON
SUN VALLEY
ABU DHABI

Our international reach

"WE UNDERESTIMATE THE IMPORTANCE OF TRUTH IN OUR WELLNESS JOURNEY."
Elissa Goodman, Holistic Nutritionist
In Loving Memory

Lynne Cohen’s daughters take up her fight against the ovarian cancer that killed her.

“We know our mom is proud of us,” says Amy (center, in her New York City apartment with her sisters Erin, right, and Whitney).
**$750**
Enables two uninsured women to receive mammograms.

**$1,500**
Enables six uninsured women to receive potentially life-saving blood tests.

**$5,000**
Provides 13+ women with genetic testing for the BRCA mutation.

**$10,000**
Provides comprehensive gene sequencing tests to three uninsured women with the support of genetic counselors.

**$25,000**
Facilitates cutting edge strategies and cross-institutional collaboration, advancing the field of preventive medicine and early detection in the Lynne Cohen Foundation Preventive Care Clinics.

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Clinical Director of the Cancer Screening and Prevention Program at NYU Perlmutter Institute

*In loving memory
AMY COHEN EPSTEIN: I am so excited to be able to speak with you today, Dr. Julia Smith.

Did you always know that you wanted to be a doctor and go into medicine? At what point on that trajectory did you decide to go into oncology?

DR. JULIA SMITH: My father was a surgeon. So, you could say that it was in the family blood...

[And] oncology was perfect for me... This was the 1980s. Oncology combined all my interests in science and in biology and molecular biology and genetics. And then, of course...Mary-Claire King cloned the BRCA genes. When she cloned the BRCA genes, I knew that I wanted to be involved in cancer prevention. Because once she was able to show that there was a genetic predisposition to cancer, it was clear that the whole field was going to just burst right open.

That was the beginning. And then, it was you and your family, The Lynne Cohen Foundation. This Foundation understood very early on — when most people didn’t get it — how important it was to pursue the issue of genetics and genomics. (Genomics is the genetics of the tumor tissue. And genetics usually refers to...
what's called germline genetics, which is the genes you're born with).

Lynne Cohen understood that you could use this information to prevent cancers.

ACE: Doctors didn't understand it at the time, but scientists did. What is the distinction?

DR. SMITH: I have a PhD in molecular biology. But most doctors... they understand a lot of science but they're not at the laboratory bench.

They're not looking at the molecular level, or the cellular level at the impact of different maneuvers. Back then, genetics was a whole new concept. You know, nobody believed — not the doctors, not the scientists, not the public — nobody believed that cancer had a genetic basis. And they laughed when, in the '60s or '70s or even the '80s, someone would say there could be a genetic basis.

Nobody doubts the genetic basis now. But it's a hard thing for doctors who are incredibly busy trying to take care of all kinds of difficult problems and trying to be there for their patients. It's not an easy thing to then integrate an entirely new concept and field.

So, it takes time. And some of that is good, because you don't want doctors jumping on bandwagons, which has happened.

ACE: People ask me, when they've had a loved one who has been recently diagnosed with ovarian cancer, “Where should I go? Who should I see?” And I always say, “You need to be at a research institution seeing a doctor who is a scientist and researcher,” because their level of knowledge is significantly different from someone who has not been in that kind of setting. Obviously, to be with someone like you, who, in addition, has this incredible patient care, is the best of both worlds.

I had one other thing I'd like to get into with you. My mom talked about this so much, and you know, she passed away over 20 years ago. But it was relevant then, and it's certainly relevant now. Cancer knows no boundaries. It doesn't care how much money you have. It doesn't care the color of your skin. It doesn't care about your background. It doesn't care if you have insurance. It's just one of those things that happens to anybody. It is completely non-discriminatory.

My dad came from nothing and worked his whole life to be able to give his family everything that he didn't have. It was the hardest thing for him to have my mom get cancer and then pass away, because it didn't matter how successful he was financially. There was nothing he could do. It really did change him for the rest of his life. That is why it was always so important for us as a foundation to try and offer our preventive care services to all women from all walks of life. And you've been so involved in that. How can we do that better? How can we better serve the uninsured and minority women who really need these preventive services?

DR. SMITH: This is so important. It's just like women have different biology than men; you can't look at heart disease in men and try to treat women that way. You can't treat every group the same...

And that's something, you know, a lot of
women don’t know. They’re like, “Wait, what? I’m an Ashkenazi Jew so I’m at greater risk for breast or ovarian cancer? I didn’t know that.” My hope is that when we focus on other other communities, that maybe there are other things that come out.

At NYU, every week, we have what’s called the multidisciplinary conference. And everybody’s there who could be involved in a case. So, you know, the medical oncologists are there, the surgeons, the breast surgeons are there, the gynecologic surgeons are there, the radiologists, the radiation therapists, the radiation oncologist, the pathologists are there. Everyone who could have a role in this woman’s care shows up. The majority of doctors who are at this conference are women. I don’t know if this is true, at every institution, but it’s true at NYU.

ACE: Are you a mentor to other young women in medicine?

DR. SMITH: Yes.

ACE: They’re so lucky.

DR. SMITH: I think that has always appealed to me about being at an academic. Being at an academic institution, everyone’s trying to be on the cutting edge clinically and scientifically. So you have an opportunity to teach and to mentor, which is wonderful, because you get to see the next generation coming along.

ACE: Are you hopeful for the future of preventive care with ovarian cancer?

DR. SMITH: Yes, I really am. I think what we’re going to see for all cancers is that once you can understand genetically what’s going on in the tumor and in the patient, you will have a target.... You hear a lot about immunotherapy checkpoint inhibitors.

You don’t have to worry about whether the cancer started in the lung, in the ovary, in the breast, in the pancreas. All you need to do is find out, in that case, in that cancer, what went wrong in the cell that allows them to divide and proliferate and then target that defect.

This next decade is going to change the way cancer is treated.