
From: Ting, Jess [REDACTED]
Sent: Tuesday, February 19, 2013 10:30 PM
To: Jeffrey Epstein
Subject: Re: Research

Our research is based on the hypothesis that it is the micro-environment (e.g., the "normal" breast tissue surrounding a breast cancer in the case of breast cancer) that enables tumors to metastasize - rather than something intrinsic to the tumors. There is much anecdotal evidence to support this and it also explains several paradoxes about breast cancer - for example, why-extrirpative surgery for breast cancer seems to cause a paradoxical rise in cancer activity. This theory which is known as the "seed and soil" hypothesis=has been purely theoretical in the past because until now there was never a way to study the microenvironment around these tumors without killing the host or killing the tissue itself.

We came up with the idea to use fluid that is routinely collected (but thrown away) for 1-2 weeks after breast surgery as a proxy for the microenvironment around the tumor. Let me explain - after breast surgery to remove a cancerous breast, we routinely place a plastic drainage tube in the wound bed which exits the skin and drains excess blood and wound fluid into small plastic reservoirs. This prevents buildup of unwanted blood and fluid after surgery. This fluid is thrown away. The drains are kept in for a week or two. Our idea was that this fluid contains all the proteins, growth factors, cytokines, DNA transcription factors etc that are secreted by the cells around a cancer and would make an ideal way of studying the microenvironment in vivo.

For the last three years, we have been collecting wound fluid for the first 48 hours after breast cancer surgery. We compare fluid in the same patient=from the cancerous breast to the non-cancerous breast and from the cancerous breast to the abdomen. In certain surgeries the opposite non-cancerous breast is removed as a precaution or tissue from the abdomen is used to reconstruct the removed breast which is why we have access this fluid from these sites as well. This "normal" fluid is used as a control for the fluid from the cancerous breast.

We have found differences in this fluid in both test tubes and in mice. Our=preliminary results are positive and show that this idea has validity. We want to continue to characterize this fluid from cancerous breasts and to collect more specimens. If we are successful, this will be a major advance in understanding the mechanisms of cancer.

I supported this work with my own personal research fund.

I have spent \$200,000 of my research fund (given to me patients) to pay for a full time lab tech devoted to this project and for all of the supplies over the last three years. But my fund is down to \$10,000. I have another donation of \$100,000 coming into my fund that I will devote to this project but not until the end of the year. In the meantime, we would have to fire the lab tech and stop collecting fluid specimens.

To bridge the period until my research fund will be replenished with the expected \$100,000 grant coming at the end of the year, we would need \$50,000 ideally more for a full-court press). It could even be in the form of a loan that is repaid with the future contribution.

Thanks for your consideration.

Jess Ting

On Feb 19, 2013, at 4:56 PM, "Jeffrey Epstein" <jeevacation@gmail.com<mailto:jeevacation@gmail.com>> wrote:

send more details

On Tue, Feb 19, 2013 at 4:51 PM, Ting, Jess [REDACTED] wrote:
Jeffrey, besides being a plastic surgeon, I also do basic science research =n breast cancer. My lab uses a novel approach that no one else in the worl= is doing. Our preliminary results are promising but we need funding to co=tinue to the next phase.

Would you consider financially supporting us?

I hope I haven't offended you by being too direct. If I have, I apologize p=ofusely.

But if this is something that interests you, my lab partner and I would lov= to tell you more about it. I promise you would find it intellectually sti=ulating and interesting.

Warmest regards,

Jess Ting

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