

# NEW THINKING ABOUT THINKING

| SUMMER 2026 |

 Cleveland Clinic  
Lou Ruvo Center for Brain Health

30 YEARS OF LOVE  
POWER  
LOVE  
GALA



**THREE DECADES.  
ONE ICONIC NIGHT.**



I chose to become a neuropsychiatrist because I knew the mysteries of the brain would continue to intrigue and inspire me throughout my career in medicine, and I've not been disappointed. Yet, in my 16 years at Cleveland Clinic Lou Ruvo Center for Brain Health as a physician and educator, as I talk about brain health with patients and trainees alike, I find one component is most often overlooked: The connection between the brain and general health.

Chronic health conditions aren't just tough on your body; they can also be a drain on your brain. Many common medical conditions left untreated can accelerate mental decline and dementia. That's why it's ideal to embrace general preventive health measures in collaboration with a primary care physician who makes time for longer health conversations focused on optimizing your long-term wellness. Cleveland Clinic Nevada now offers that, right here in Las Vegas, beginning in 2025 with Concierge Medicine — your year-round health quarterback (see page 19),

and expanding later this year with Executive Health — a thorough, comprehensive evaluation in a single visit (see page 3).

In January 2026, we welcomed a new colleague, Dr. Sandra Darling, to expand our reach in Las Vegas and Ohio among women seeking personalized plans for reducing risk for Alzheimer's disease by up to 45% (see page 27).

For families noticing early memory changes in a loved one, our cognitive disorders neurology team has never had more to offer to slow the progression of Alzheimer's disease, with anti-amyloid therapy now available for at-home injections as an adjunctive to infusions (see page 5). At the same time, our movement disorders (see page 11) and multiple sclerosis teams (see page 7) also continue to publish research on promising new investigational therapies.

Everything we know about the brain was revealed by research, which is why we

convened in March to thank our clinical research study participants who volunteer their time — and their brains — to help us expand our knowledge (see page 9).

Fittingly, earlier this year on Valentine's Day, we celebrated the 30<sup>th</sup> anniversary of the Power of Love®, the annual gala that makes possible the extra love Cleveland Clinic Lou Ruvo Center for Brain Health shows patients, families and our community. (see page 29).

On their behalf, I thank you for your ongoing support and encourage you to help us plan for our future as you plan for yours (see page 26).

**DYLAN WINT, MD, FAAN**

*Medical Director*

*Camille and Larry Ruvo Chair  
for Brain Health*

*Director, Education*

*Las Vegas Legacy*

*Chair for Neuroscience Education*

**Cleveland Clinic Nevada**

**FEATURES**

- 3 Executive Health Delivers One-Day Care with Long-Term Impact Coming Soon to Las Vegas
- 5 Alzheimer’s Disease Nears an Inflection Point in Diagnosis and Care

**CLINICAL RESEARCH UPDATE**

- 7 Nevada’s Role in Shaping the Future of Treatment for Individuals with PPMS
- 9 Recognizing More Than a Decade of Community Collaboration and Research
- 11 TEMPO-3 Study Offers New Hope for “ON Time” in Parkinson’s
- 12 Using Functional MRI to Study the Brain: How Cleveland Clinic Nevada Is Advancing Parkinson’s Research

**WORLD CLASS CLINICAL CARE**

- 13 Shared Medical Appointments Help Patients Navigate Treatment Goals, Logistics, Risks and Benefits
- 15 Learning What Really Works: How Real World Research Helps People with Multiple Sclerosis
- 16 Advanced Neuroimaging and Clinical Perseverance Make Sense of Progressive Symptoms
- 17 Imaging from Head to Toe: An Inside Look
- 19 A Phone Call Away for Members and Community
- 21 Activating Wellness

**CARING FOR CARE PARTNERS**

- 23 When Sleep Is Hard for Both of You

**PHILANTHROPY AT WORK**

- 24 Recognized for Excellence
- 25 Caregivers Collaborate on Sustained Community Investment
- 26 Gift Planning: How You Can Support Cleveland Clinic’s Mission
- 27 A Meet-Up for Women Addressing Health Across the Generations
- 28 Meet Dr. Sandra Darling, a Role Model in Protecting Women’s Brain Health

**ON THE SCENE**

- 29 30 Year of Love: Power of Love® Gala
- 31 Power of Love® Honoree Michael Meldman
- 33 Emerging Science Award Program

**KEEP MEMORY ALIVE COLLECTION**

**100% of every dollar spent with the LAGOS Keep Memory Alive collection benefits Cleveland Clinic Lou Ruvo Center for Brain Health.**



[lagos.com/keepmemoryalive](https://lagos.com/keepmemoryalive)

**On the cover:**

Camille and Larry Ruvo hosted the 2026 Power of Love Gala on February 14, 2026.



**NEW THINKING ABOUT THINKING**

| SUMMER 2026 |



702.483.6000 | [clevelandclinic.org/nevada](https://clevelandclinic.org/nevada)

**Research, treatment and education for patients and families living with brain disorders**

- |                         |                          |                     |
|-------------------------|--------------------------|---------------------|
| ALZHEIMER’S DISEASE     | HUNTINGTON’S DISEASE     | MULTIPLE SCLEROSIS  |
| FRONTOTEMPORAL DEMENTIA | PARKINSON’S DISEASE      | AND NEUROIMMUNOLOGY |
| LEWY BODY DEMENTIA      | ATAXIA AND               |                     |
| AND OTHER DEMENTIAS     | OTHER MOVEMENT DISORDERS |                     |

# Executive Health Delivers One-Day Care with Long-Term Impact

## Coming Soon to Las Vegas

*What if you could get most of the care you need in a single, convenient appointment? And from an expert team of providers focused entirely on you? By the end of 2026, we'll be making that happen right here in Las Vegas with Cleveland Clinic's Executive Health Program.*

With this streamlined preventive medicine and wellness program, you'll get a thorough, comprehensive physical exam and we'll help you craft a customized plan for the future. It's an innovative and efficient way to make sure you stay at the top of your game.

In 2024, Las Vegans Cheryl and Terry Holden traveled to Cleveland Clinic's main campus in Ohio for a physical through the Executive Health Program, which he says

was "kind of like getting a second opinion on my overall wellness from the best in the world."

Although Terry describes the couple's lifestyle as ahead of the curve in regard to diet and exercise, his visit with Raul Seballos, MD, Director of Executive Health, was inspiring.

"I thought I was at my target weight, and he moved my target another 10 to 15 pounds," says Terry. "Dr. Seballos talked about my weight in a logical manner, the pluses and minuses. It was my respect for him that motivated me to act."

### MAINTENANCE PROMOTES WELLBEING

Terry owned and operated a large portfolio of apartments across four states and used to drill into his property managers the importance of "maintenance, maintenance, maintenance. We can't wait for things to break. To create customer satisfaction and quality of life for our tenants, we must be proactive and make sure things are taken care of up front."

The Holdens have always been attentive to their health maintenance, too. "We're highly proactive, but not hypochondriacs," says Cheryl.

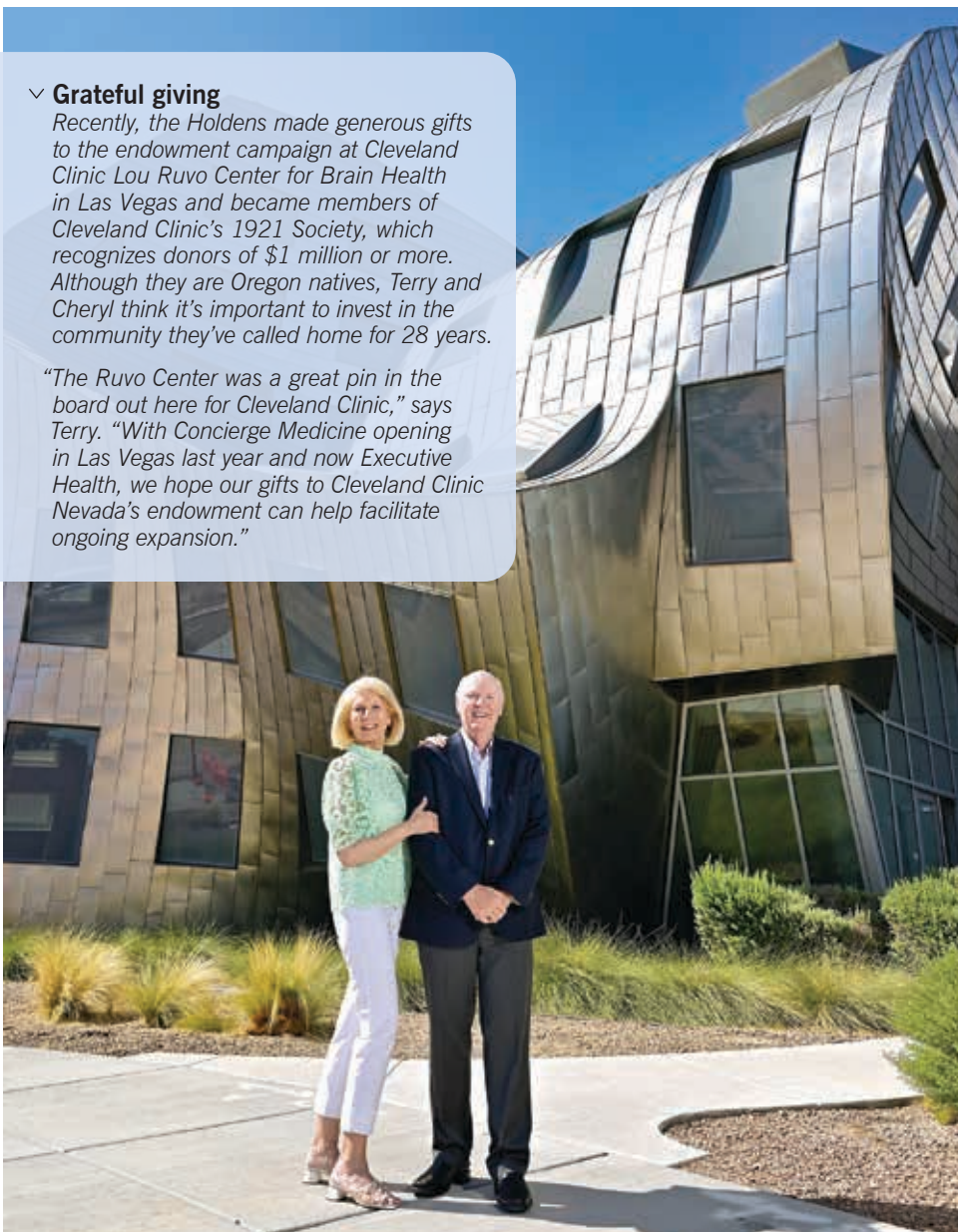
The proactive approach was key to uncovering Terry's atrial flutter. "I wouldn't have known about this heart condition if I hadn't had a thorough, comprehensive physical," he says.

When Cleveland Clinic opened Concierge Medicine in Las Vegas in August 2025, the Holdens were among the first to join the membership-based primary care program (see page 19). "It makes the utmost sense to have as much of our care as possible near home," says Terry. "Our Concierge primary care doctor is on top of everything here, but if we had something major that required a procedure or a specialist, it's easy to connect with the experts in Ohio. After all, it's the same health system."

#### Grateful giving

*Recently, the Holdens made generous gifts to the endowment campaign at Cleveland Clinic Lou Ruvo Center for Brain Health in Las Vegas and became members of Cleveland Clinic's 1921 Society, which recognizes donors of \$1 million or more. Although they are Oregon natives, Terry and Cheryl think it's important to invest in the community they've called home for 28 years.*

*"The Ruvo Center was a great pin in the board out here for Cleveland Clinic," says Terry. "With Concierge Medicine opening in Las Vegas last year and now Executive Health, we hope our gifts to Cleveland Clinic Nevada's endowment can help facilitate ongoing expansion."*



## INTRODUCING DR. BLACKWELL

Nearly 20 years after completing his family medicine residency, Derrick Blackwell, DO, finds himself “in that golden space as a physician. I have seen a lot, but I’m young enough to adapt to new technology and approaches to care.”

His new role as director of Cleveland Clinic’s Executive Health program in Las Vegas “consolidates all my experience in evidence-based, relationship-based medicine into delivering exceedingly thorough one-day physicals.”

### TEAM “WE”

Dr. Blackwell strives to make the Executive Health physical exam an experience his patients look forward to each year, not another task on their to-do list.

He remembers a patient years ago who needed a physical for work but couldn’t complete the stress test due to physical limitations. The doctor-patient pair talked about lifestyle factors, what the individual was and wasn’t doing, and how he could improve. Dr. Blackwell explained, “I’m not here to embarrass you or to make you feel badly about your current health. Let’s talk about the barriers you’re feeling, the changes we can consider together.”

Dr. Blackwell often uses the term “we” with patients, a habit he attributes to his background playing soccer. “We’re a team. If you’re not meeting the objectives we set out, part of that is on me as a physician. I have to improve how I communicate with you to better deliver the how and the why.”

As for that patient who failed the stress test, Dr. Blackwell says, “Nothing could have made me happier than when that same individual entered the exam room a year later saying, ‘Doc, I can’t wait to tell you all I’ve accomplished!’”

### A ONE-DAY VISIT WITH ONE YEAR OF NEXT STEPS

The executive health physical starts with highly detailed labs completed in advance. During the appointment, Dr. Blackwell says, “We check under the hood. See what’s going on.” Then the executive health physician prepares a visit report and wellness plan to be executed by the patient and their primary care provider.

“In one day, I talk about prevention, risk reduction, wellness. The patient’s primary care provider, including those in our Concierge Medicine program, address these



^ Derrick Blackwell, DO

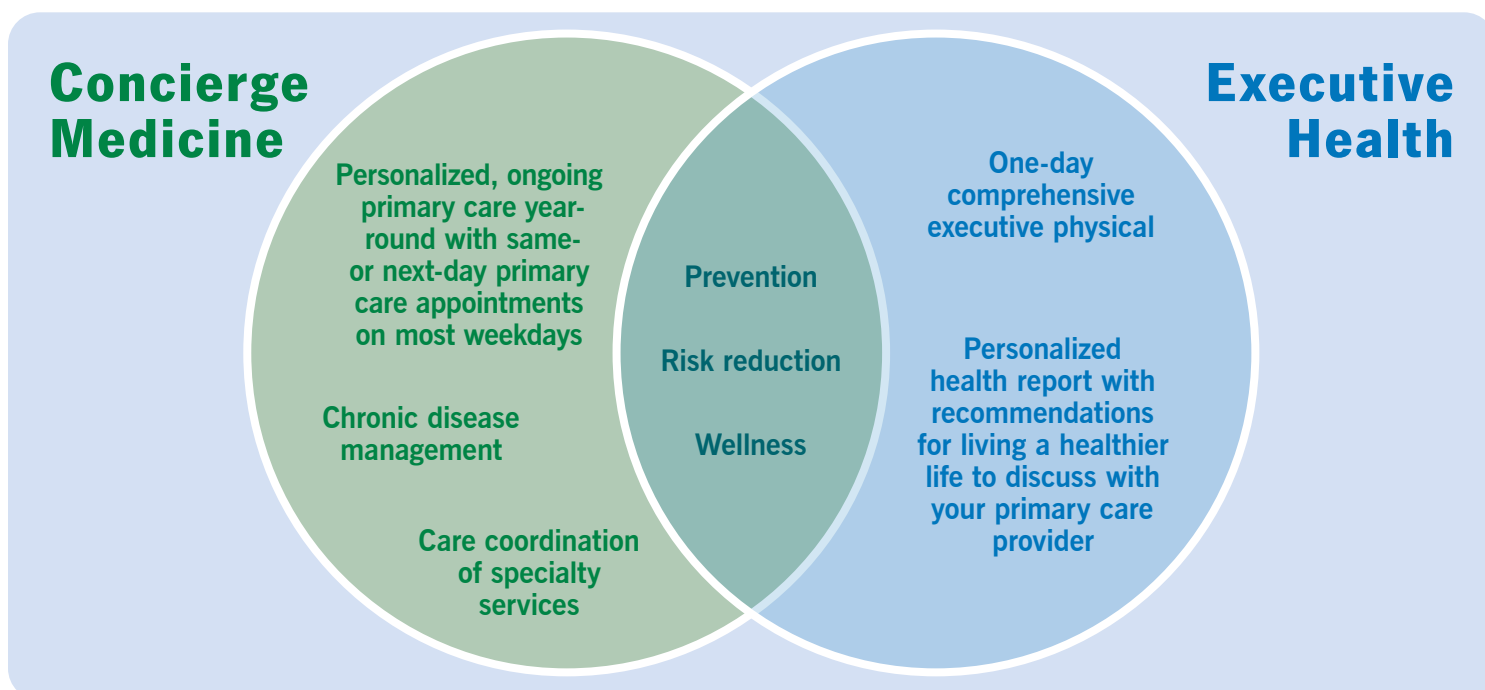
important topics with the patient on a routine basis throughout the year,” he says.

Dr. Blackwell likes to remind his patients: “You’re doing all these things as an investment in your health. But the return on investment is in the future: What you do now will pay dividends down the road for you and your family.”

### START YOUR PATH TO WELLNESS NOW. GET YOUR NAME ON THE LIST

While Executive Health doesn’t open until late 2026, you can get your name on the interest list now.

[clevelandclinic.org/ehnt](http://clevelandclinic.org/ehnt)



# Alzheimer's Disease Nears an Inflection Point in Diagnosis and Care

*Alzheimer's disease (AD) has reached a milestone that would have been difficult to imagine just a decade ago.*

Blood-based diagnostic tests have entered clinical use. Amyloid-targeting therapies are slowing disease progression in early-stage patients. And experts are debating whether AD should be defined biologically, before symptoms ever appear, and whether it might soon be thought of as a chronic, manageable condition.

Yet for all this momentum, two Cleveland Clinic Lou Ruvo Center for Brain Health neurologists believe that the field has not fully reached a new era. Instead, it stands on the threshold of one.

“There’s been more action over the last five years than there’s been for a long

time,” says Charles Bernick, MD, MPH, Senior Director, Cognitive Disorders, and a veteran AD researcher. “We’re probably very close to changing how we think about things. The paradigm shift may occur relatively soon.”

What clinicians and patients are seeing now is the culmination of decades of work, says Dylan Wint, MD, Medical Director of Cleveland Clinic Nevada.

“The things they’ve been hearing about over the past five to 10 years in studies and the research lab are now actually able to touch them in the clinic,” Dr. Wint says. “There’s a sense out there of hope, and a real shift. We’re on the verge of a breakthrough in our understanding of, and ability to manage, this disease.”

True transformation, however, hinges on what happens next.

Both physicians caution that major challenges must be overcome if AD is to be screened for and prevented, and for progression in diagnosed patients to be halted rather than delayed.

## CHANGING DIAGNOSTIC CAPABILITIES

One of the most significant changes underway involves how AD is defined, and how and when it can be diagnosed.

Until relatively recently, an AD diagnosis was based solely on clinical evaluation — medical history-taking, cognitive testing and the elimination of other potential causes of changes in cognition. Confirmation of AD was only possible after death with the identification of characteristic biomarkers or hallmarks of disease — amyloid plaques

and tau neurofibrillary tangles — in autopsied brain tissue.

Within the last two decades, the advent of brain amyloid imaging using positron emission tomography (PET) to visualize disease-related protein deposits and the development of cerebrospinal fluid (CSF) biomarkers that indirectly measure amyloid plaque levels made an AD diagnosis possible in specialized neurology clinical settings like the Lou Ruvo Center for Brain Health.

In the last five years, several blood-based biomarker (BBM) tests have become commercially available to detect or rule out AD-associated amyloid in patients exhibiting mild cognitive impairment. They are less invasive and expensive than PET and CSF testing and can be administered in primary care offices. However, the less accurate BBMs are intended to be used as triaging tests, with positive results requiring confirmation via PET or CSF testing.

This evolution in diagnostic capabilities is reshaping how clinicians — and patients — think about the disease.

“From the clinical standpoint, we now have the availability of things we’re used to dealing with, such as imaging tests, blood tests and disease-modifying medications like we have for so many other conditions,” Dr. Wint says. “It’s demystifying AD somewhat for both the average neurologist and the primary care doctor.”



^ Dr. Charles Bernick

**+** CONTINUE THE STORY ONLINE:  
[clevelandclinic.org/adinflexion](https://clevelandclinic.org/adinflexion)

▼ Dr. Dylan Wint

## A BIOLOGY-BASED DEFINITION OF AD

The development of BBMs was a powerful catalyst for an Alzheimer's Association workgroup of researchers and clinicians to recommend in 2024 that AD be redefined.

Instead of basing diagnosis on the appearance of symptoms of cognitive decline, they reframed AD as a biological process that begins well before symptoms arise.

But a biology-based definition of AD has some important caveats and introduces new complexities. Importantly, an amyloid-positive BBM finding in an asymptomatic individual isn't necessarily a predictor of outcome.

"I think it is true that if you have the biology of the disease, you have the disease," Dr. Bernick says. "But the implications are different for different age groups. If you're 60 and have amyloid plaque, you have a high risk over your remaining lifetime of becoming symptomatic. If you're 80 and have plaque, you may never" progress to symptoms in your lifetime.

## THE IMPACT OF AMYLOID-TARGETING DRUGS

Today, the availability of disease-modifying drugs creates a clear rationale for earlier and more precise AD diagnosis. The arrival of the anti-amyloid therapies lecanemab (2023) and donanemab (2024) represents an important step forward, but one that requires careful framing and patient communication (see [page 13](#)).

At present, these treatments are only approved for patients with early AD who already show signs of mild cognitive impairment, as a means of delaying — but not preventing — progression. They are



used initially for approximately 18 months to reduce or eliminate plaque burden.

Lecanemab is approved for additional maintenance usage — either by in-clinic intravenous infusion or as recently as 2026, via at-home self-administered injections — to prolong the benefit of therapy and continue slowing disease progression.

Of Cleveland Clinic patients eligible for maintenance lecanemab therapy, most have opted to stay with monthly clinical infusion rather than weekly at-home self-injection. "My experience has been that because the infusions have turned out to be much less burdensome than people imagined, they choose to continue," Dr. Wint says.

## WHAT THE NEAR FUTURE MIGHT LOOK LIKE

For now, AD remains a progressive illness with limited though meaningful tools to slow its course. But a more hopeful future is coming into focus.

In the next decade or so, Drs. Bernick and Wint foresee an array of developments that will improve treatment, edging closer to a manageable chronic condition, like

diabetes or high blood pressure, and perhaps laying the groundwork for preventive strategies. They include:

- A fuller understanding of the disease process that incorporates the interplay between protein accumulation, neuroinflammation, neurodegeneration, genetics, lifestyle, race, socioeconomic factors and other factors
- Combination therapies that target multiple AD components, not just amyloid
- Additional biomarkers that can characterize levels of tau protein, neuroinflammation and neurodegeneration
- Refined clinical trials that leverage biomarkers to ensure participants have actionable therapeutic targets and to determine if the intended intervention is affecting the target
- Better predictors of an individual's risk of developing AD and improved means of reducing that risk

"It's the nature of science to want to make a discovery and to make a change," Dr. Wint says. "But I think uncovering new questions is at least as valuable. There are very few final answers."

## Nevada's Role in Shaping the Future of Treatment for Individuals with PPMS

*For people living with primary progressive multiple sclerosis (PPMS), imagine the convenience of taking a pill at home instead of traveling to an infusion center every few months. For many, that simple change could make a meaningful difference in daily life and open up a new class of treatment.*

New research findings from the Phase 3 FENtrepid study presented in February 2026 at the Americas Committee for Treatment and Research in Multiple Sclerosis (ACTRIMS®) Forum suggest this may one day be possible. The study evaluated fenebrutinib, an oral medication being investigated for PPMS, a form of multiple sclerosis that affects about 10% of people with MS and is especially challenging to treat.

Currently, the treatment for PPMS is ocrelizumab, which received FDA approval in 2017 and is given by intravenous infusion. While effective for some patients, it requires twice-yearly visits to an infusion center and does not always slow disability progression as much as patients and physicians would like.

The FENtrepid study compared fenebrutinib to ocrelizumab in nearly 1,000 adults with PPMS. Researchers found that fenebrutinib was noninferior, meaning it worked at least as well as the existing therapy in slowing disability progression over time. Importantly, fenebrutinib was associated with a 12% reduction in the risk of disability progression, making it the first oral medication to show this level of effectiveness in PPMS research.

Le Hua, MD, who served as primary investigator for the FENtrepid trial at Cleveland Clinic Nevada, emphasized why this comparison matters for patients. The goal, she explained, is to measure new therapies against the current standard of care to be sure patients are not giving up effectiveness when considering new options. Fenebrutinib met that standard, offering what she

described as “more options, more availability” for people with PPMS.

Fenebrutinib is a Bruton's tyrosine kinase (BTK) inhibitor, an emerging class of MS therapies. BTK inhibitors target both B cells and microglia — immune cells believed to play a role in progressive MS within the brain. According to Robert J. Fox, MD, Vice-Chair of Research at Cleveland Clinic's Neurological Institute and Staff Neurologist at Cleveland Clinic Nevada, the current treatments do not affect microglia, which may explain why slowing progression has been so difficult in PPMS.

When Patty Joyce was diagnosed with PPMS in 2021 and Dr. Hua shared that

few treatments were available, Joyce jumped on the opportunity to help researchers find another effective option. “Being in the FENtrepid trial was a very hands-on way for me to do something positive with this diagnosis,” says Joyce. “I would highly encourage others to participate in research. It's empowering, knowing you might help us all better understand neurological disorders and how they can be treated.”

While fenebrutinib is not yet FDA approved for PPMS and more research is needed, the FENtrepid findings represent an important step forward. They point to a future where effective treatment may also be more personalized and less disruptive to everyday life.

~ Dr. Le Hua



### LEARN MORE ABOUT RESEARCH OPPORTUNITIES

Cleveland Clinic Nevada offers opportunities to participate in neurological research studies. Learn more at [clevelandclinic.org/nevadaresearchnt](https://clevelandclinic.org/nevadaresearchnt) or contact us at 702.701.7944 or [healthybrains@ccf.org](mailto:healthybrains@ccf.org).

**+** CONTINUE THE STORY ONLINE: [clevelandclinic.org/FoxBTK](https://clevelandclinic.org/FoxBTK)



**Here,  
the best minds  
are working  
for the health  
of yours.**

**Centrally located in downtown Las Vegas, when you need specialized neurological care, Cleveland Clinic Lou Ruvo Center for Brain Health is here for you with:**

- Comprehensive diagnostics and advanced imaging
- Evidenced-based treatments, including 8 newly FDA-approved therapies studied at our center for Alzheimer's disease, Parkinson's disease and multiple sclerosis
- Complementary approaches spanning physical, occupational, and music therapies; behavioral medicine and social work
- Clinical research participation offering access to potential new treatments
- No-cost education and support programming for families



For Every Care in the World

**Access nationally-ranked neurological care right here in our community.**  
702.483.6000 or [clevelandclinic.org/nevada](https://clevelandclinic.org/nevada)



## Recognizing More Than a Decade of Community Collaboration and Research

*In 2015, Cleveland Clinic Lou Ruvo Center for Brain Health secured an \$11.1 million grant from the National Institutes of Health (NIH) to establish a Center of Biomedical Research Excellence (COBRE) with University of Nevada, Las Vegas (UNLV). In 2022, the two organizations were granted a five-year, \$11.3 million COBRE renewal.*

Through collaboration among Cleveland Clinic, UNLV and community members who participate in the research, the goals are to increase understanding of degenerative brain diseases like Alzheimer's and to grow research resources, infrastructure and capability in southern Nevada. The COBRE is funded by an Institutional Development Award (IDeA) from the NIH.

### A LUCKY DAY

Superstition aside, Friday, March 13, 2026, proved to be a lucky day for the 22 COBRE study participants who joined Robert J. Fox, MD, COBRE Co-Principal Investigator, to hear about the impact of their participation.

Study volunteers participate for two years. During annual research visits, participants undergo a standardized neurological examination, comprehensive cognitive testing, blood sampling and brain imaging. Then, blood is directed to Dr. Kinney, while data gathered via MRI scanning goes to Drs. Cordes, Bender and Cieri. (See sidebar, *Meet the COBRE Investigators.*)

"The relevance of the COBRE study is the convergence of clinical assessment,

imaging and fluid biomarkers, which when collected together and followed in individuals over time can shed new light on changes in the brain," says Dr. Jefferson Kinney.

### A PROMISE TO PUBLISH

"Each paper we publish is a distillation of some aspect of the study: clinical, imaging or fluid biomarkers. That's how we share results," says Dr. Fox. "In the final research appointment, we also share with each participant how their data has shifted during their two years in the study."

Beyond funding, one of the greatest benefits of COBRE is its longitudinal nature. "It's only by having people return multiple times that we can observe change, so we appreciate you," Dr. Bender told COBRE participants. "Change is what dementia is about. Change is what aging is about. And with your help, we can learn more."

### NO REGRETS

"As a family, we are lucky to have faces and bodies that don't look our age. But we want brains that look as good as we do," says Georgie Rucker, 83, the oldest of five children whose mother passed

away from Alzheimer's disease. When Rucker heard of COBRE, she asked her sister, Rosetta Saunders, 80, to be her study partner, a role that involves sharing observations of the study participant's brain function over time.

In an unexpected turn of events, while Rucker learned from researchers that her brain function is normal for her age, she began noticing lapses in memory in her sister, who subsequently enrolled in COBRE as a participant and received a recommendation to see a neurologist near her home in Inglewood, California.

"I'm glad Rosetta and I did this study because sharing our results with our siblings might help them decide if they need to take action," says Rucker. "Despite shared family history, we know the five of us are different people, so some may develop Alzheimer's and some may not."

To find out if you're a fit for COBRE or other ongoing clinical research studies at Cleveland Clinic Lou Ruvo Center for Brain Health, contact our research recruitment coordinator at 702.701.7944 or [HealthyBrains@ccf.org](mailto:HealthyBrains@ccf.org).

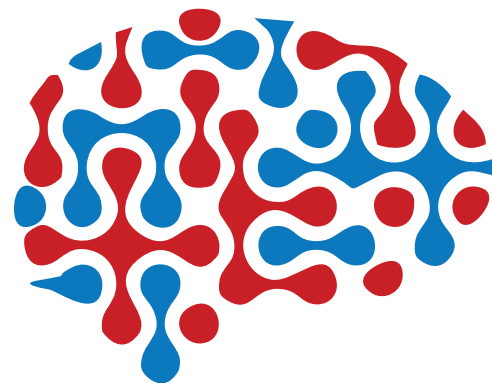
### COBRE Participant Impact Since 2016

**362**  
SCREENINGS

**359**  
PET SCANS

**173**  
PUBLICATIONS

**778**  
PARTICIPANT VISITS



## MEET THE COBRE INVESTIGATORS



**DR. ROBERT FOX**  
Co-Principal Investigator

Robert J. Fox, MD, serves as vice-chair of research at Cleveland Clinic's Neurological Institute across all of its locations, including the Lou Ruvo Center for Brain Health in Las Vegas.



**DR. JEFFERSON KINNEY**  
Co-Principal Investigator and Biomarker Core Lead

Jefferson Kinney, PhD, a cell-molecular neurobiologist at UNLV, is hoping to build greater understanding of the mechanisms of Alzheimer's and track the disease's progression. "My team is evaluating blood samples for known biomarkers, as well as to identify new and better ones," says Dr. Kinney.



**DR. CHARLES BERNICK**  
Clinical Core Lead

"As we follow people, sometimes we do see changes," says Charles Bernick, MD, a neurologist at the Lou Ruvo Center for Brain Health. "Then, we're able to offer opportunities for action, perhaps joining one of our prevention trials or seeking clinical care in our cognitive disorders clinic or via their preferred provider."



**DR. SHEHROO PUDUMJEE**  
Clinical Core Lead

Shehroo B. Pudumjee, PhD, a neuropsychologist at the Lou Ruvo Center for Brain Health, leads a team that guides research participation, including providing participants with findings from the research exams they undergo — data that are made available for use by other research organizations. As of March 2026, there have been 115 requests from COBRE data from across the United States, Canada, Italy, Germany, The Netherlands and Australia.



**DR. DIETMAR CORDES**  
Imaging Core Lead

Dietmar Cordes, PhD, a medical physicist at the Lou Ruvo Center for Brain Health, leads a team innovating the use of mathematical models to better assess, classify and predict neurodegenerative disorders at the individual level.



**DR. ANDREW BENDER**  
Project Lead

Andrew Bender, PhD, a cognitive neuroscientist and psychologist at the Lou Ruvo Center for Brain Health, uses advanced methods of working with MRI to focus on cognitive resilience. He is currently examining why some people have a measurable amount of amyloid in the brain — believed to be a biomarker or indicator of Alzheimer's disease — but aren't showing the expected cognitive decline. Dr. Bender says, "The hope is that by integrating neuropsychological testing with PET imaging of the brain, we can develop a better prediction at an individual level of when someone is likely to experience cognitive decline."



**DR. FILIPPO CIERI**  
Project Lead

Filippo Cieri PhD, PsyD, a staff researcher in cognitive neuroscience at the Lou Ruvo Center for Brain Health, focuses on factors that can protect brain health. His research examines what kind, when and how activities can protect the brain. While science can't yet rank the benefit of specific activities, it does offer some insight into which cognitive domains are most impacted. So far, Dr. Cieri's research indicates that physical and cognitive activities in childhood and middle age seem among the most important factors based on the Dynamic Neurocognitive Assessment (dNA) that he developed, which is currently used in more than 10 sites worldwide.



**DR. SAMANTHA JOHN**  
Outreach

**KAT HARTLEY**  
Outreach Consultant

UNLV's Samantha John, PhD, conducts community outreach while Kat Hartley maintains a Community Advisory Board that she developed in 2016 to share insight into outreach venues and strategies, meeting prospective participants where they are in the Las Vegas community via engaging, no-cost education activities.



## TEMPO-3 Study Offers New Hope for “ON Time” in Parkinson’s Cleveland Clinic Helped Lead the Way

*A large international research study has delivered encouraging results for people living with Parkinson’s disease who take levodopa but still have motor fluctuations — times when symptoms are better and times when they return. Results from the TEMPO-3 randomized clinical trial were published online March 20, 2026, in JAMA Neurology, a highly respected medical journal.*

In TEMPO-3, researchers studied tavapadon, a once-daily investigational oral (pill) therapy. When used in addition to levodopa as an adjunct or additional treatment, tavapadon increased daily “good ON time” — periods of improved mobility without troublesome involuntary movements or dyskinesia — and reduced daily OFF time. Compared with placebo, tavapadon led to a +1.10 hours/day increase in good ON time and a 0.94 hours/day reduction in OFF time.

The study also found an overall safety profile consistent with earlier studies. Side effects were reported more often with tavapadon than placebo (71.7% vs 55.1%) and stopping the drug due to adverse events was more common (17.1% vs 9.1%). Importantly, most side effects were mild to moderate — classified as not serious — and occurred mainly while the dose was being adjusted. The most common side effects included nausea, dyskinesia and dizziness.

Cleveland Clinic played a leading role in this study. Hubert Fernandez, MD, Director of the Center for Neurological Restoration at Cleveland Clinic’s Neurological Institute, served as global principal investigator for the TEMPO-3 clinical program and oversaw Cleveland Clinic’s Ohio site. Cleveland Clinic was

among the 148 participating sites across 14 countries. Cleveland Clinic Nevada’s study team, under the direction of Principal Site Investigator Zoltan Mari, MD, enrolled the most patients of any TEMPO-3 site worldwide. Drs. Fernandez and Mari served as the lead and senior authors respectively when the study results were published in *JAMA Neurology* in March 2026.

Dr. Mari hopes for a future where “tavapadon could allow clinicians worldwide to better individualize therapy, improving motor control while minimizing adverse effects that often force difficult trade-offs.”

### **CAN I GET A PRESCRIPTION FOR TAVAPADON TODAY?**

While publication in *JAMA Neurology* is an important step forward in the development of tavapadon, the drug has not yet received approval from the U.S. Food and Drug Administration (FDA). That means tavapadon is not available for routine clinical use.

Studies like TEMPO-3 are how new treatments for neurological disorders are discovered, tested and improved. They only happen because research participants choose to take part — and because expert teams carefully run these trials with patient safety in mind.



^ Dr. Zoltan Mari

**To learn more about participating in clinical research at Cleveland Clinic Nevada, contact our research team at 702.701.7944 or [healthybrains@ccf.org](mailto:healthybrains@ccf.org), or visit [clevelandclinic.org/nevadaresearchnt](http://clevelandclinic.org/nevadaresearchnt).**

**+ CONTINUE THE STORY ONLINE: [clevelandclinic.org/tempoCQD](http://clevelandclinic.org/tempoCQD)**

## Using Functional MRI to Study the Brain: How Cleveland Clinic Nevada Is Advancing Parkinson's Research

*Parkinson's disease is often known for movement problems like shaking or stiffness. But it can also affect how people think, feel and see things. At Cleveland Clinic Nevada, researchers are studying these changes in the brain through a project called PATHPDP.*

The goal of the PATHPDP research study is to better understand how Parkinson's disease affects the brain, especially in people who have psychosis. Psychosis is a mental condition where people have impaired perceptions or reality: They may see or hear things that are not there, which can be frightening and confusing for both patients and their families. Doctors still do not fully understand why this happens.

PATHPDP uses functional MRI (fMRI), a type of scan that illustrates how different parts of the brain are working. Researchers look at how the brain handles emotions and visual images. PATHPDP compares people with Parkinson's who have psychosis to those who do not.

"We're hoping to develop a better understanding of these pathways, leading to better understanding of these conditions and, ultimately, better care," explains Odinachi Oguh, MD, a movement disorders neurologist at Cleveland Clinic Nevada.

The study includes two visits over 60 days. During the visits, participants:

- Complete memory and thinking tests
- Review their medical history
- Have an fMRI brain scan

PATHPDP does not include any treatment.

The study is currently enrolling adults ages 50 to 75 including:

- People with Parkinson's disease
- People with Parkinson's-related psychosis
- People without Parkinson's (healthy volunteers)



### BE PART OF RESEARCH

To learn more about participating in PATH PDP or other studies at Cleveland Clinic Nevada, contact our research team at 702.701.7944 or [healthybrains@ccf.org](mailto:healthybrains@ccf.org).



^ Dr. Odinachi Oguh

# Shared Medical Appointments Help Patients Navigate Treatment Goals, Logistics, Risks and Benefits



^ Dr. Maileen Ulep



^ Dr. Lakeshia Gibson

*Cleveland Clinic Nevada began offering lecanemab amyloid beta-directed antibody infusions in 2023, several months after the FDA granted full approval for the new treatment to slow progression of early-stage Alzheimer’s disease. Patients considering anti-amyloid therapy have one-on-one conversations with their primary neurology providers at Cleveland Clinic Lou Ruvo Center for Brain Health in Las Vegas, but as the volume of infusions increased, providers wanted another way to educate patients.*

“We began receiving more MyChart® messages from patients,” says Maileen Ulep, PhD, APRN, FNP-BC, who runs the center’s twice-weekly anti-amyloid clinic for patients during their 18-month treatment cycle. “We thought that a shared medical appointment would be an efficient venue for patients to ask similar questions.”

The Lou Ruvo Center for Brain Health launched “Navigating Anti-Amyloid Therapy,” a monthly online shared medical appointment (SMA), in early 2024 for patients and their care partners to discuss goals, logistics, risks and benefits of the treatment.

### PROVIDING CLEAR CONTENT AND TIME FOR Q&AS

During the 90-minute virtual SMAs, Lakeshia Gibson, MD, a behavioral neurologist and neuropsychiatrist, shares a PowerPoint presentation, pausing between sections to encourage participant interaction and to address questions.

“Information is presented in manageable segments to support working memory and long-term retention,” Dr. Gibson explains.

The segments include information on:

- **Alzheimer’s disease** — the role of amyloid plaques and neurofibrillary tangles, common symptoms, disease course and diagnosis
- **Anti-amyloid treatments** — how anti-amyloid antibodies work and study results
- **Treatment plans** — timing and logistics of infusions, as well as potential infusion reactions
- **Major side effects** — amyloid-related imaging abnormalities (ARIAs), symptoms and implications

After the SMA, care coordinator Stacy James, RN, sends participants an after-visit summary and outlines the next steps

for treatment readiness. Patients are advised to follow up with their primary neurology provider with additional questions or case-specific clarifications.

“Typically, patients have already met inclusion criteria or are awaiting APOE genotyping for risk stratification,” Dr. Gibson notes. “Those considered candidates for Alzheimer’s infusions often have a chance to hear the core information multiple times during the decision-making process.”

### EXPANDED SMAS BENEFIT PATIENTS AND CARE PARTNERS

Demand for the SMA has grown, and feedback from patients and their care partners has been overwhelmingly positive, says Dr. Gibson.

“Patients who return for follow-up before deciding on anti-amyloid therapy often share that the sessions clarified complex information and helped them interpret what they had read online,” she says.

The SMAs also provide participants with a sense of community during a challenging time. “Patients tell me that interacting with other people who are navigating the same diagnosis and decisions is a benefit,” says Dr. Ulep. “They hear questions they might not have thought about and see other patients who are on the same journey.”

“We support informed decision-making and patient autonomy,” Dr. Gibson says. “Regardless of whether they proceed with newer Alzheimer’s therapies, such as lecanemab or donanemab, these sessions ensure that patients and caregivers understand their options for managing this progressive neurodegenerative disease.”

If you’d like to consider anti-amyloid therapy for early Alzheimer’s disease, send a MyChart message to your Cleveland Clinic neurology provider.

“We support informed decision-making and patient autonomy.”

– Dr. Gibson



**CONTINUE THE STORY ONLINE:**  
[clevelandclinic.org/anti-amyloidsma](https://clevelandclinic.org/anti-amyloidsma)



## Alzheimer's Disease Risk Reduction Program for Women

The Women's Alzheimer's Movement (WAM) Prevention and Research Center at Cleveland Clinic provides expert guidance and personalized support to reduce your risk of Alzheimer's disease.

- Nearly two-thirds of people with Alzheimer's disease are women.
- Dementia cases are expected to double by 2060.
- Up to 45% of Alzheimer's disease cases may be preventable through lifestyle changes.

Using an individualized and sustainable risk-reduction plan, our program can help you to stay sharp in midlife and beyond.



**Appointments: 702.483.6000**  
[clevelandclinic.org/wamntat](https://clevelandclinic.org/wamntat)

## Learning What Really Works: How Real World Research Helps People with Multiple Sclerosis

Remember that kid in class who always asked, “*But teacher, will we ever use this stuff in the real world?*” At Cleveland Clinic Nevada, neurologist Carrie M. Hersh, DO, MSc, is doing exactly that — turning research into real answers for real people.

For Dr. Hersh, Director, Multiple Sclerosis Health and Wellness Program, work does not stop when a new medication is approved. Instead, she studies “how treatments perform in everyday life after patients begin medications to manage multiple sclerosis.” This type of work is called real world research, and it plays an important role in caring for people with MS — so important, in fact, that she routinely publishes her findings in peer-reviewed journals and presents internationally at MS conferences.

Clinical trials are carefully designed, but they cannot include everyone doctors see in practice. Many people with MS are older, have other health conditions or live busy lives that do not always fit into a trial. Real world research helps fill in those gaps. As Dr. Hersh explains, it gives doctors better answers about safety, how well treatments work over time and which options may be best for different patients.

### REAL EXAMPLES

Dr. Hersh has spent years studying disease modifying therapies (DMT) — medicines that help slow MS and protect the nervous system from further damage. One of her studies followed adults with MS taking ofatumumab, a commonly prescribed DMT. By tracking people for up to three years, her team learned how well the medicine worked, how patients tolerated it and what safety concerns came up outside of a clinical trial. This kind of long term, real life information helps doctors and patients feel more confident when making treatment decisions together.



Dr. Carrie Hersh >

Another study called ENABLE, which is chaired by Dr. Hersh and currently being conducted at 100 medical centers across the U.S., focuses on ublituximab, a DMT administered by infusion. The study evaluates how safe the medicine is, how well people tolerate it and how it affects their MS over time. These details matter. They help care teams improve comfort, safety and the overall experience for patients starting a new therapy.

Dr. Hersh is also doing precision medicine research to help match individuals with DMTs that may work best for them.

### REAL IMPACT

Dr. Hersh is passionate about this work because it directly affects conversations in the exam room. Her goal is to make

treatment decisions more precise and patient centered. “People with MS often face many choices, and those choices can feel overwhelming,” she says. Real world evidence helps match the right therapy to the right patient at the right time.

This kind of research happens at Cleveland Clinic Nevada because of a deep investment in people, science and learning. For patients, it means care guided by evidence that reflects real life. It also reflects donor commitment to advancing medicine long after a drug reaches the pharmacy — so knowledge keeps growing, and care keeps getting better. To support ongoing research, contact our philanthropy team at 702.263.9797 or [DonateNevada@ccf.org](mailto:DonateNevada@ccf.org).

## Advanced Neuroimaging and Clinical Perseverance Make Sense of Progressive Symptoms

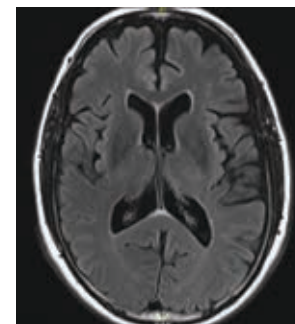
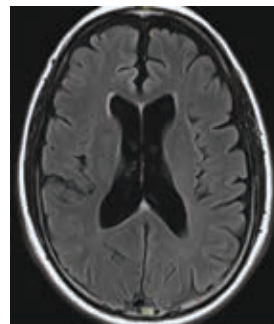
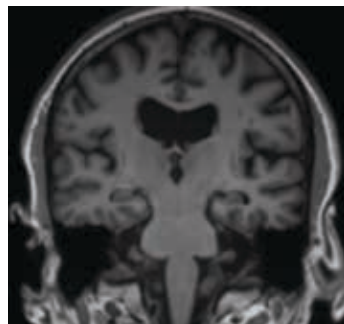
In 2021, when a 68-year-old male began experiencing fluctuations in thinking, apathy, headaches and dizziness upon standing, his primary care provider referred him to Dylan Wint, MD, Medical Director of Cleveland Clinic Nevada, who specializes in memory and cognitive disorders.

“The patient was very accomplished in the computer field but was having trouble understanding technical details that used to come to him very easily,” says Dr. Wint. “He was also struggling with his balance and walking.”

To help get to the root of the problem, Dr. Wint ordered advanced neuroimaging, including an FDG-PET scan, which measures activity levels in different brain regions to assess for degenerative disorders, and a dopamine transporter (DaT) SPECT scan, which helps distinguish Parkinsonian syndromes from other conditions that cause tremors. He also ordered a neuropsychological evaluation and requested images from a previous MRI scan.

The DaT and PET scans were normal. When the MRI from outside Cleveland Clinic became available, the report said it was normal, too, but Dr. Wint wasn't convinced. His neuropsychologist colleagues at Cleveland Clinic Lou Ruvo Center for Brain Health performed more than a dozen assessments, but the results were unremarkable.

To evaluate for brain shrinkage and to verify measurement of the midbrain — part of the brain involved in motor control — Dr. Wint ordered a volumetric MRI scan. This specialized imaging technique automatically calculates the sizes of different brain regions and compares them with those of other people of the same age. Unfortunately, the patient's insurance company did not cover volumetric analysis.



### SYMPTOM PROGRESSION, DIAGNOSIS AND TREATMENT

By 2023, the patient's condition had worsened. He fell in January and broke his collarbone and a rib. The patient, who had long required a catheter to urinate, suddenly began experiencing urinary leakage.

“I once again requested a volumetric MRI to give us a chance at understanding and treating this man's symptoms,” says Dr. Wint.

In March, the patient elected to self-pay for a volumetric MRI at the Lou Ruvo Center for Brain Health. Results indicated enlarged cerebral ventricles, which can be seen in normal pressure hydrocephalus (NPH). Caused by cerebrospinal fluid (CSF) buildup in the brain, NPH affects approximately 0.2% of people between 70 and 80 years of age.

Since the patient had evidence of enlarged cerebral ventricles and NPH's three primary symptoms — cognitive decline, gait disturbance and urinary incontinence — a diagnosis of NPH was plausible.

The patient underwent a therapeutic lumbar puncture in July 2023, which temporarily alleviated his symptoms, and in September 2023 a shunt was surgically implanted to provide longer-term relief by draining excess CSF from the brain. During a February 2025 appointment with Dr. Wint, the patient noted that he had remained symptom-free since the shunt placement.

### THOROUGH IMAGING COMPLETES THE PICTURE

Offering advanced diagnostic imaging is a pivotal component to finding solutions for patients. Every individual who comes to the Lou Ruvo Center for Brain Health with memory problems undergoes neuroimaging for two primary reasons, Dr. Wint says.

- 1) Degenerative conditions that cause cognitive decline have varying imaging characteristics that can be detected when Cleveland Clinic's subspecialty radiologists and neurologists review the images.
- 2) Appropriate neuroimaging helps neurologists answer common questions that patients ask.

“The fundamental things patients want to know are, ‘Is what's going on normal? If it's not normal, is it fixable? And whether it's fixable or not, what are we going to do about it?’” says Dr. Wint. “Advanced brain imaging can provide objective measures, supplement our evaluations and give us many of those answers.”

### BEYOND BRAINS

At Cleveland Clinic Nevada, we scan from head to toe. Learn more about imaging for brains and beyond at [clevelandclinic.org/imagingnt](https://clevelandclinic.org/imagingnt).

## Imaging from Head to Toe

### An Inside Look

*Do you ever wonder how your doctor is able to figure out so much about what's going on with your health? One big reason is medical imaging — pictures created by scanning the inside of your body. These images can help your care team spot clues, confirm a diagnosis and choose the next best step.*

Your provider may order a CT, MRI, PET or SPECT scan to answer a specific question. And no, one isn't "better" than the others. The right choice depends on what your doctor needs to find out.

#### **STRUCTURAL IMAGING: WHAT YOUR BODY LOOKS LIKE**

- **CT (computed tomography)**, sometimes called a CAT scan, is like a 3D X-ray. It can help your team see bones, blood, organs and lungs. It can also reveal stones (like kidney stones and gallstones) and assist surgeons planning certain surgeries.
- **MRI (magnetic resonance imaging)** uses magnets and radio waves to create detailed pictures. It's often used to look at tissue, nerves, organs, blood vessels, lymph nodes, the spinal cord, the brain and joints. MRI can also show injuries or inflammation in certain areas.

Sometimes scans team up: A full-body CT may spot tumors, and an MRI can take a closer look at any masses the CT finds.

#### **FUNCTIONAL IMAGING: HOW YOUR BODY IS WORKING**

These scans can look at processes and molecular activity inside the body, which may help find disease in its earliest stages.

- **PET (positron emission tomography)** uses a safe injectable radioactive chemical called a radiotracer and a PET scanner to show tissues at work. Diseased cells may absorb more radiotracer, which can signal a problem. PET is often used to help diagnose cancer, evaluate cancer treatment, and assess certain heart and brain issues. It can measure things like blood flow, sugar (glucose) metabolism and the presence of certain molecules.

- **SPECT (single-photon emission computerized tomography)** also uses radiotracers, along with a special camera, to create 3D images of organs, tissues and bones. It can show how well organs function — for example, which areas of the brain are more active, or how well blood flows through the arteries to the heart.

#### **MORE THAN BRAIN IMAGING: VIEWING HEAD-TO-TOE AT CLEVELAND CLINIC NEVADA**

With a name like Cleveland Clinic Lou Ruvo Center for Brain Health, many assume we scan only brains. But here at Cleveland Clinic Nevada, we do much more.

We offer CT, MRI, PET and SPECT, and we can scan the entire body. So if your healthcare provider has a question about your head, ankle or anywhere in between, we can help provide the pictures that complete the story.

**Ask your primary care physician or specialist for a referral and fax it to 702.701.7986.**

**Questions? Call our dedicated imaging appointment line at 702.701.7948 or visit [clevelandclinic.org/imagingnt](http://clevelandclinic.org/imagingnt).**





## Get a clearer picture of your health

Our expert imaging team offers advanced scans for your entire body, whether it's investigating a new symptom, checking on a known condition or simply being proactive.

**Centrally located in downtown Las Vegas, when you need answers quickly, we're here for you with:**

- Extended hours: 6 a.m. – 7 p.m. weekdays; open Saturdays
- Same-day appointments often available
- Imaging results from sub-specialized radiologists typically within 24 hours
- Multiple imaging modalities: CT, PET, SPECT and MRI, including whole body MRI for early detection



For Every Care in the World

**Choose imaging backed by a nationally-ranked health system, right here in our community.**  
[clevelandclinic.org/imagingnt](https://clevelandclinic.org/imagingnt) or 702.701.7948



## A Phone Call Away for Members and Community

*Last year marked significant expansion for Cleveland Clinic Concierge Medicine, with new locations opening in Weston, Florida, at the beginning of the year, followed by Cleveland in July and Las Vegas in August.*

A membership-based primary care program, Concierge Medicine emphasizes prevention, long-term wellness and personalized, proactive health management tailored to individuals' unique needs and goals.

Stephen V. Avallone, MD, FACP, PE, who serves as center director of Concierge Medicine across the health system, embraced the challenge to build and grow the Cleveland Clinic Concierge model "in a new and pioneering way in Las Vegas," which he notes is the first domestic location not situated near — or even in the same state — as a Cleveland Clinic hospital.

"If we scaled up too quickly without a local network of specialty providers, bumps in the road could occur," says Dr. Avallone, who knew he needed to hire highly adaptable primary care physicians "who have the personality to mesh with the local medical community and of course with our members."

Cleveland Clinic Concierge Medicine in Las Vegas is anchored by Erine Erickson, MD, and Robert Costa-Allen, MD, board-certified internists who bring more than 55 years of combined clinical experience as well as a thoughtful and highly personalized approach to care. Dr. Avallone describes the duo as

amicable, compassionate, highly competent, professional and reliable. "Both are willing and able to practice this intense relationship-based medicine, to be readily available to patients and community providers alike," he says.

"Dr. Erickson hit the ground running," says Terry Holden, one of the first members of Cleveland Clinic Concierge Medicine's Las Vegas location, who had previously been a patient at two other local concierge practices. "She had done her homework and when I arrived for my first appointment, knew more about my health history than I did, reminding me of things even I had forgotten."

His wife Cheryl Holden, also a member, says, "Dr. Erickson is the most wonderful, kind person who explains everything so well. We couldn't think more highly of her."

### A DOCTOR ON SPEED DIAL

Cheryl says Dr. Erickson takes time "to understand who you are as a person," and responds in minutes when Cheryl reaches out with a question between appointments.

When Terry had a couple of health issues pop up, Dr. Erickson accompanied him on virtual visits with specialists at Cleveland Clinic's main campus in Ohio and continued to check in afterward. "It's really comforting knowing you have the main campus a phone call away. With the Cleveland Clinic brand stamped on our primary care, we will always have great care," Terry says.

Dr. Costa-Allen reminds prospective Concierge Medicine members that the first step to pursuing specialty care is



< (L to R): Dr. Robert Costa-Allen, Dr. Stephen Avallone and Dr. Erine Erickson

having a trusted primary care physician who is “astute, paying attention to you and addressing the things you need to do at the appropriate ages.”

“It’s a true skill to balance this evidence-based approach to medicine with each member’s needs and wants, avoiding a ‘cookie-cutter approach’ to medicine,” says Dr. Avallone.

The Holdens, who are avid travelers and have gone to Cleveland for Executive Health exams (see page 3), say it’s comforting knowing they can be anywhere in the world, but “our Las Vegas-based Concierge doctor is just a phone call away. If we ever had an issue, Dr. Erickson would be first on our speed dial,” states Terry, “even if only to make an appointment for when we’re back in town.”

Concierge Medicine members in Las Vegas enjoy three options for specialty care:

- Alone or accompanied by their concierge primary care physician, conduct virtual visits with a Cleveland Clinic specialist at one of the health system’s locations across the United States.
- Travel to one of Cleveland Clinic’s domestic locations to visit a specialist in person.
- See a local specialist outside of the Cleveland Clinic system.

For Concierge Medicine members who prefer to receive specialty care near home in Las Vegas, the path has been paved by valuable connections Drs. Erickson and Costa-Allen have built with community specialists. “The external

referral process is a necessity in Las Vegas,” says Dr. Avallone. “Our team is innovating and building that model to use at other locations that have no local Cleveland Clinic support.”

### **CARING DOCTORS, CARING TEAM**

“In our Concierge Medicine program, we approach member care as a team effort,” says Dr. Avallone. “When our administrative program coordinators, medical assistants and nurses work well together and adopt the physician’s approach to care, they’re able to be more proactive, which is a huge satisfier for both members and fellow caregivers.”

“Cleveland Clinic Concierge Medicine office staff all have the same standards and proactive approach as my doctor,” observes Cheryl.

Reflecting on a successful first year with membership signups that exceeded expectations, it’s clear there is strong demand for this type of primary care, not only in Las Vegas but also at the other Cleveland Clinic locations.

“Learning from the resourceful Las Vegas team will come into play later in 2026 when Concierge Medicine opens in Naples, approximately 90 miles from the nearest Cleveland Clinic hospital in Weston,” says Dr. Avallone.

### **CONCIERGE MEDICINE MEMBERSHIPS ARE CURRENTLY AVAILABLE IN LAS VEGAS**

Watch the video and learn more about membership at [clevelandclinic.org/conciergeat](https://clevelandclinic.org/conciergeat).



### **INTRODUCING ROBERT COSTA-ALLEN, MD**

A board-certified internal medicine physician with more than 30 years of experience spanning bedside care, executive leadership and system-wide quality improvement, Dr. Costa-Allen’s experience extends internationally, including overseeing clinical operations and consulting on healthcare systems in the Middle East and Asia.

Most recently, he has held senior clinical and operational roles across Nevada’s major health systems. His deep understanding of the region’s healthcare landscape complements Cleveland Clinic’s mission and our personalized Concierge Medicine program.

# Activating Wellness

When Zoltan Mari, MD, first picked up a table tennis paddle in 2020, he wasn't simply trying out a new hobby — he was fighting for his life. After being diagnosed with throat cancer, Dr. Mari's care team at Cleveland Clinic's main campus in Ohio shared a message he often gives his own patients in the movement disorders program he directs at Cleveland Clinic Nevada: Alongside treatment, he needed to commit to a healthier, more active lifestyle.

Earlier in life, Dr. Mari had been athletic, playing water polo and basketball competitively, but with COVID limiting access to team sports, he sought inspiration from a new sport. What started as a hobby quickly grew into a passion, and Dr. Mari says, "Cancer renewed my competitive side. As with all other opponents, I became obsessed with beating it." In addition to losing weight and building muscle, "With table tennis in my life, my focus is better. I sleep a lot better, and I feel better about my health today and well into the future."

Routine exercise and physical activity are key to helping people with conditions ranging from cancer to neurodegenerative disorders maintain quality of life.



^ Dr. Zoltan Mari

## 52 REASONS TO MANAGE PARKINSONS DISEASE

In 2013 when Tracy Foutz received "the devastating diagnosis of Parkinson's disease," his thoughts quickly turned to how he would continue all the outdoor activities he had enjoyed since childhood: bike riding, outdoor backpacking, hiking, white water rafting. "I got my love of the outdoors from my father," says Foutz. "Turns out, I have his Parkinson's disease, too."

Until his father's death in 2019, both were in the care of Cleveland Clinic Nevada, where neurology providers shared the benefits of physical activity in reducing symptoms of Parkinson's disease. Foutz remembers a pivotal moment when he asked his dad how he dealt with the diagnosis. He replied, "I figure I've already lived more in my life than most have."

Foutz, who has summited the highest peaks in all 48 contiguous states, says, "Unlike my father, I know I need to stay active as long as I can before I can't." One of his proudest moments occurred in 2020, seven years after his Parkinson's diagnosis, when Foutz traveled to Tanzania and climbed Mount Kilimanjaro.

In January 2024, he made a map of the 40 remaining peaks just west of Las Vegas that he had not yet climbed. Not knowing anyone who liked to hike as much as he did, Foutz figured if he joined the 52 Peak Club, he could hike safely with others." "I found folks in the club were more patient than I anticipated. As long as I'm not jeopardizing their or my own safety, they're all in," he says.

Unlike his father who didn't share his diagnosis broadly, which often caused people to wonder what was wrong with him when they observed symptoms, Tracy relies on club members' support. "I have to take my Parkinson's disease



^ Young Tracy Foutz, far left, hiking with his dad, Lawrence Foutz, and siblings



^ Foutz navigates challenging terrain

medications nearly precisely at 7, 11, 1 and 3. When you're on challenging terrain and focusing on being safe, it's easy to forget the time," he says. "That's when my fellow hikers step in and remind me."

Foutz says the encouragement to "keep moving but stay safe" from his Cleveland Clinic neurology providers, Dr. Mari and Jenny Nguyen, DNP, FNP-C, CMRD, validates he's taking the right approach to managing his Parkinson's disease. They always ask if he's had any falls since his last appointment.

"A few years ago after I completed the highest peak in Wyoming, which included 50 miles of hiking and challenging creek crossings, I asked if sliding down a glacier and arresting my 'fall' with an ice axe counted?" he recalls. That elicited a laugh from Nguyen who remarked, "What have you been up to this time?"

### BALANCING AN ACTIVE LIFESTYLE THAT INCLUDES GIVING BACK

Since receiving a diagnosis of Lewy body dementia at Cleveland Clinic Nevada in 2023, with symptoms spanning hallucinations, changes in memory and gait disturbances that affect walking, Harold Peskin says, "Balance is the most bothersome. It's something I have to think about every day of my life now."

Harold started physical therapy at Cleveland Clinic because he was doing what his wife, Ana Peskin, calls "the Lewy shuffle" and they "didn't want Lewy or his balance to limit us from doing things." The couple enjoy the amenities of their 55+ adult community, including the pool, bingo, trivia, shows and dinners with friends, and their care team at Cleveland Clinic encourages this lifestyle as a way to keep Harold's brain in the best possible shape.

Christina Harvey, PT, DPT, challenges Harold to navigate the stairs in the physical therapy gym without using the railing to simulate the gaps in the railing at the arena where his beloved Vegas Golden Knights play, and she sets up obstacles for stepping up and over as the couple prepare for a cruise.

Now, Cleveland Clinic has become a source of support — a place where they tell Harvey about their upcoming activities and she customizes workouts to help Harold succeed, says Ana.

### PLAYING IT FORWARD

Dr. Mari hopes his experience will motivate others navigating health challenges. He says, "Finding activities that excite you, are rewarding, that you look forward to is the best way to stay active and manage your overall wellness for the long term."

After connecting with a professional table tennis coach, Dr. Mari trained intensely, transforming both his health and his life. In December 2025, he competed at the U.S. Table Tennis Open in Las Vegas. His big win? "My cancer is currently in remission," says Dr. Mari.



^ Under the guidance of his physical therapist, Christina Harvey, Harold navigates challenges in the gym that simulate his active lifestyle



^ Reflecting on their first visit to Cleveland Clinic Lou Ruvo Center for Brain Health, Harold, retired from 40 years as a general manager of a resort in Lake Tahoe, and Ana from a career in food service, were impressed and comforted by the hospitable welcome they received from volunteers in Cleveland Clinic's lobby.

Now, the couple volunteer weekly as greeters. "We, too, can turn fear into comfort for other families," says Harold. **Learn more about volunteer opportunities at [clevelandclinic.org/nvvolunteer](http://clevelandclinic.org/nvvolunteer).**

# When Sleep Is Hard for Both of You

*“You want to lie down and sleep, but the full orchestra of worries and to-dos starts to play in your head,” says Lucille Carriere, PhD, a clinical health psychologist and Angie Ruvo Endowed Caregiving Chair at Cleveland Clinic Lou Ruvo Center for Brain Health.*

∨ Dr. Lucille Carriere

That moment can feel familiar to many care pairs — both the person living with a neurological disorder and the caregiver supporting them. Even when everyone is exhausted, sleep doesn’t always come easily or feel restorative. And when one person struggles to sleep, the other often does too.

Dr. Carriere explains that sleep problems often have more than one cause. Mood changes, racing thoughts, pain, muscle stiffness or spasticity, bowel or bladder issues and nightmares can all interrupt sleep.

For people with neurological disorders, sleep problems may also be linked to changes in the brain that affect the body’s internal clock and disrupt the signals that help the body know when to feel sleepy or alert.

## QUANTITY OR QUALITY?

Both matter. Getting enough sleep is important, but how well someone sleeps is just as critical. “As a behavioral sleep psychologist, I pay attention to both,” Dr. Carriere says. “But quality often explains why people still feel tired even after spending many hours in bed.” Broken or fragmented sleep is less refreshing and can affect mood, thinking, energy, and the ability to manage daily responsibilities — for both people in the care pair.

Care partners often feel the effects firsthand. They may stay awake listening for their loved one to stir, helping with trips to the bathroom or guiding them safely back to bed. Hypervigilance, worry and nighttime caregiving tasks can leave caregivers just as sleep deprived as the person they are supporting.

Alternatively, sleeping too much means less opportunity to engage in important activities, such as exercising the body and brain, and being social. “Sleep sets the stage for everything else we do,” says Dr. Carriere. “So when sleep is off, even our best lifestyle habits, like staying active or connected with others, can start to slip, which can negatively affect our mental health.”

## A TEAM APPROACH TO RESTORATIVE SLEEP

At the Lou Ruvo Center for Brain Health, a full care team addresses sleep problems. Behavioral sleep medicine plays an integral role, working closely with neurologists, nurses and neurorehabilitation (physical and occupational therapy) teams to support both medical and behavioral needs as part of comprehensive neurological care.

Dr. Carriere begins with a comprehensive sleep evaluation and often uses sleep logs to track both nighttime sleep and daytime patterns, helping to understand what is truly happening over a full day. From there, she develops an individualized plan that includes both thinking-based and behavior-based strategies to support the person with the progressive neurological disorder and their care partner.

A plan that works today may need adjustments down the road. When that happens, Dr. Carriere encourages care pairs to return for a “booster session” to fine tune strategies and address new sleep concerns.



The bottom line, says Dr. Carriere, is that “if you’re not engaging in good sleep habits, you’re not fully supporting your remaining cognitive resources.”

But you don’t have to figure it out alone. A simple next step is to send a message to your Cleveland Clinic neurology provider through MyChart to ask about a referral to behavioral medicine. With the right toolkit, better nights are possible for both of you.

**+** CONTINUE THE STORY ONLINE:  
[health.clevelandclinic.org/dementia-and-sleep](https://health.clevelandclinic.org/dementia-and-sleep)

# Recognized for Excellence

In recent months, Cleveland Clinic Lou Ruvo Center for Brain Health staff have been honored by the community, peers and professional associations for clinical excellence and leadership in the field. **We celebrate these accomplishments.**

**Top Doctors** (Castle Connolly, 2026)

- Charles Bernick, MD**
- Le Hua, MD, FAAN**
- Zoltan Mari, MD, FAAN**
- Dylan Wint, MD, FAAN;**  
*also recognized among Castle Connolly Top Black Doctors*

**Community Impact Award**

(Parkinson's Foundation Southwest Chapter, April 2026)

**Verla Niebuhr**



**Honoree, Stories that Shape Us gala**

(Vegas PBS, April 2026)

**Dylan Wint, MD, FAAN**

**Certification in Functional Dry Needling**

(Evidence in Motion, March 2026)

**Kayla Kotake, PT, DPT**



**Doctor of Nursing Practice**

(The University of Alabama, December 2025)

**Erin Wilkinson, DNP, APRN, CMSN**



**President**

(Consortium of Multiple Sclerosis Centers, 2026-2028)

**Carrie M. Hersh, DO, MSc, FAAN**

Dr. Hersh's responsibilities include working closely with executive and board leadership and key committees to implement CMSC's strategies and activities, notably as Chair of the Workforce Wellbeing Working Group that she founded.



**Board President's 2026 Impact Award**

(Parkinson's Foundation Southwest Chapter, March 2026)

**Zoltan Mari, MD, FAAN**

Board member Dr. Zoltan Mari was recognized by the chapter board president for championing awareness, strengthening community engagement, and supporting the Parkinson's Foundation's work in research, education, and providing essential resources for those living with Parkinson's disease.



**Grant Award: The Impact of Reproductive and Somatic Aging on Disability Progression in Women with Multiple Sclerosis**

(National Multiple Sclerosis Society, March 2026)

**Le Hua, MD**

Alongside researchers at University of California, San Diego, Dr. Hua received a \$210,000 grant to investigate the contribution of reproductive aging and general aging to the worsening of MS symptoms that can occur during midlife in women with MS.

# Caregivers Collaborate on Sustained Community Investment

When Stella Roy first met Camille Ruvo, the conversation started with a simple question: “*What is your story?*” Roy immediately sensed Ruvo’s warmth and genuine care for others. That kindness, Roy says, reflects the family spirit behind Cleveland Clinic Lou Ruvo Center for Brain Health and the reason Camille was honored in May 2026 by Maria Shriver’s Women’s Alzheimer’s Movement for her commitment to caregivers (see page 27).

## A CAREGIVER WITH A MISSION

Roy has personal experience as a caregiver. Her father, José Aurelio Peña, was hospitalized at 82 with a virus in his brain. Once independent and joyful, by discharge four months later he was experiencing memory loss and confusion. He moved in with Roy who served as his primary caregiver for the next three years as his dementia worsened.

“It was so difficult to witness. He had always been proud, never wanting anyone to take care of him, but he could no longer manage his medications and it became a



^ Stella Roy’s gifts are recognized on the Lou Ruvo Center for Brain Health’s campus



> Stella Roy, right, with her mother and philanthropic role model, Maria Ortiz

matter of safety,” Roy says. Despite his slow decline, she remains grateful for the extra time they had together until his death in May 2025 at age 85. “When he was in hospital, I had prayed to God to let me have my dad longer, and I got 3 more years. It was the most beautiful gift.”

Yet it is Roy’s mother, Maria Ortiz, who has inspired her to give to others. “She is a woman with a big heart, a humanitarian who suffers the pain of others,” Roy says, recalling how her mother has always helped people in need from family to community.

Similarly, Roy admires the Ruvo’s passion for community and love for family, citing the couple as philanthropic role models: “Camille and Larry Ruvo are so kind to me and to Las Vegas. They fundraise selflessly and tirelessly to eradicate dementia.”

## SOLIDIFYING THE FUTURE

As a music lover, Roy enjoys attending the annual Power of Love® gala organized by Camille and cherishes the unforgettable moment she met Honoree Andrea Bocelli. “I felt as if I were dreaming!” she gushes.

However, supporting Cleveland Clinic Nevada’s endowment is Roy’s primary focus. “My goal is to see more and more families get the help they need in perpetuity,” she says, and to share an important message with other families dealing with dementia. “You’re not alone. The whole community is behind you.”

## HELP US SUSTAIN OUR INSPIRING WORK

You, too, can be part of innovating for better brain health. Cleveland Clinic is committed to growing Nevada’s neuroscience landscape with support from a \$100 million endowment campaign. We’re currently just over 60% of the way to our endowment goal.

With your help, we will disrupt neurological diseases, saving and changing lives for generations to come. Contact us to discuss your gift: [DonateNevada@ccf.org](mailto:DonateNevada@ccf.org) or 702.263.9797.

# Gift Planning: How You Can Support Cleveland Clinic’s Mission

One of the most common ways to make a lasting impact on the future of medicine is through planned giving, and a beneficiary designation is an efficient and meaningful step.

## WHAT IS A BENEFICIARY DESIGNATION?

Beneficiary designations are a straightforward way to decide where your assets will go after your lifetime. You simply name a person or charitable organization — like Cleveland Clinic — as the recipient of funds from your accounts.

## WHICH ASSETS CAN HAVE BENEFICIARIES?

Beneficiary designations are commonly used with retirement accounts, insurance policies, investment portfolios, donor-advised funds and bank accounts.

## HOW DOES THE PROCESS WORK?

It’s easy. Your financial institution can provide a beneficiary form — often available online — that takes just minutes to complete. Cleveland Clinic can provide you with our legal name, address and employer identification number (EIN).

## WHY CHOOSE CLEVELAND CLINIC AS A BENEFICIARY?

There can be significant tax advantages. For example, retirement accounts are often taxable to your heirs, but a gift to Cleveland Clinic would be tax-free and support a cause that’s meaningful to you.

## WHAT WILL MY GIFT SUPPORT?

It’s up to you. You can direct your gift to the area of greatest need or to a program close to your heart by completing a simple gift form provided by our philanthropy office.

### PLANNING FOR YOUR FUTURE IMPACT:

Let’s start the conversation today

Check with your legal or financial advisor or contact us at 702.263.9797 or [DonateNevada@ccf.org](mailto:DonateNevada@ccf.org).

We can connect you with Cleveland Clinic’s gift planning team to see if a legacy gift is the right way for you and your family to support our mission to care for life, research for health and educate those who serve.



## 3 REASONS TO SHARE YOUR LEGACY GIFT INTENTIONS WITH CLEVELAND CLINIC

If you’ve included or are considering including Cleveland Clinic in your estate plans, here are three good reasons to let us know.

1

### YOU ENSURE YOUR WISHES ARE HONORED

By sharing your legacy gift intentions, we can fully understand your goals and how you want your gift to be used. Whether you’ve left a bequest through your will or trust or named Cleveland Clinic as a beneficiary of a retirement or investment account, we can help ensure your plans are carried out exactly as you envision.

2

### YOU CREATE A LASTING PARTNERSHIP

When you share your plans, we can express our gratitude during your lifetime — and hear the story behind your decision to give. As scientific discoveries and priorities evolve, we’ll also be able to keep you informed and aligned with new areas of impact that may inspire you. You can join The Pyramid Legacy Society and enjoy membership benefits with other like-minded partners from all over the world who support Cleveland Clinic.

3

### YOUR PLANS REMAIN CONFIDENTIAL — AND FLEXIBLE

Sharing your intentions with us is completely confidential. We will never share your information with anyone outside of Cleveland Clinic. Importantly, we understand that personal circumstances can change; therefore, your plans are not binding, giving you the flexibility to revise your gift at any time if needed.

# A Meet-Up for Women

## Addressing Health Across the Generations

The Cleveland Clinic Global Women's Health + WAM Forum, held May 7, 2026, in Cleveland and livestreamed nationwide, addressed the latest science on diet, exercise, sleep, sexual vitality, menopause, brain health, weight management and more to help advance women's health. The event was hosted by Maria Shriver and Beri Ridgeway, MD, Co-founders of the Cleveland Clinic Women's Comprehensive Health and Research Center ([clevelandclinic.org/caringforwomen](http://clevelandclinic.org/caringforwomen)).

"Women experience health differently throughout their lives, yet too often their unique needs have been overlooked in research and care," says Shriver. "This annual forum brings leaders together to spark new ideas, share knowledge and shine a light on the importance of women's health."

This year marked the first time the event integrated the nationally recognized WAM Forum, adding a focus on women's brain health and Alzheimer's disease research. Shriver founded the Women's Alzheimer's Movement (WAM) Prevention and Research Center at Cleveland Clinic to address the concerning statistic that nearly two-thirds of Americans living with Alzheimer's are women (see *facing page*).

During the Forum, WAM presented its 2026 research grants, including the WAM Young Investigator Award to Xiaowei Zhuang, PhD, a research scientist at the Lou Ruvo Center for Brain Health, who will study how menopause and genetic risk work together to affect women's brain health.

Shriver encourages women to sign up to receive an invitation to the 2027 Forum: [ccf.org/whforum](http://ccf.org/whforum).

### HONORING AN INFLUENTIAL CAREGIVER

During the Forum, Shriver presented the 2026 WAM Award for Leadership in Philanthropy and Alzheimer's Prevention Research to Camille Ruvo, Chairwoman and Co-Founder, Keep Memory Alive, the fundraising entity whose marquee events — the Summer Rodeo (see *page 32*) and the Power of Love® gala (see *page 29*) — serve as the largest annual funding sources for Cleveland Clinic Lou Ruvo Center for Brain Health in Las Vegas. And Camille is the leading visionary behind those events.

Camille began her journey upon seeing her father-in-law, Lou Ruvo, decline rapidly while simultaneously observing how his wife, Angie, a deeply devoted caregiver, was equally impacted by his battle with Alzheimer's disease. Camille and her husband, Larry Ruvo, set out to raise funds with a clear and compassionate purpose: to help spare other families the profound challenges that Alzheimer's presents.

What they witnessed firsthand was not only the toll of the disease itself, but the overwhelming lack of education, resources and support for caregivers — those quietly carrying so much of the burden, often without guidance.

From that place of understanding, Camille trademarked the phrase, "Before there's a cure, there are caregivers™," a reminder that behind every individual with Alzheimer's is a caregiver showing up with strength, love and resilience every single day.

With that same spirit, she helped establish the Angie Ruvo Endowed Caregiving Chair (see *page 23*), which is dedicated to expanding meaningful services for both patients and their care partners, ensuring that caregivers are not only seen, but truly supported.

Camille was among the first to put her name on the list to become a patient at the WAM Prevention and Research Center, which opened at the Lou Ruvo Center for Brain Health in 2020. "As women, we have mammograms and we have colonoscopies. We have a lot of preventative care," she says. "But the one thing we weren't proactively doing was checking out our brains."

Her hope for the future? That neither her daughters nor any other women must serve as caregivers for individuals with neurodegenerative conditions. But until Alzheimer's is eradicated, she says, "Thanks to the Lou Ruvo Center for Brain Health, I think families have more tools to work with today than ours did 35 years ago."



^ Maria Shriver, right, presents the 2026 WAM Award for Leadership in Philanthropy and Alzheimer's Prevention Research to Camille Ruvo

## Meet Dr. Sandra Darling, a Role Model in Protecting Women's Brain Health

Many women have seen Alzheimer's disease up close in a parent, an aunt or a grandparent. You may know you're at risk but not realize there is real hope. Thankfully, research in the peer-reviewed medical journal *Lancet* suggests up to 45% of Alzheimer's and dementia cases may be prevented predominantly through lifestyle changes.

That message — hope backed by action — drives Sandra Darling, DO, MPH, Director, Women's Alzheimer's Movement (WAM) Prevention and Research Center at Cleveland Clinic. For more than a decade, Dr. Darling has helped patients at Cleveland Clinic adopt meaningful lifestyle changes in both one-on-one appointments and shared medical appointments. Her training in preventive medicine and public health, plus board certification in lifestyle medicine, supports an evidence-based approach to brain health and dementia prevention.

### A PERSONAL JOURNEY

Dr. Darling watched her aunt's cognitive and physical function decline after a hip fracture. Her aunt deteriorated quickly, was diagnosed with Alzheimer's disease and died a couple of years later. "It was heartbreaking," Dr. Darling shares, and it fuels how she cares for patients today: with empathy and understanding.



Her own health journey adds another layer. She has experienced digestive and cognitive symptoms herself — challenges she was able to significantly improve through lifestyle modifications alone. It's one reason she doesn't promise patients a quick fix. Instead, she models what she teaches: sustainable steps taken over time that can add up to real change.

In the WAM Prevention and Research Center, that means personalized care for each woman. Alzheimer's disease doesn't have a single cause, Dr. Darling explains. Rather, Alzheimer's risk builds over time from different exposures, especially in midlife. Changes in hormones and metabolism in menopause, lifestyle factors, the environment and caregiving stress can all play a role.

### RISK-REDUCTION CAN ALTER YOUR TRAJECTORY

The WAM Prevention and Research Center is one of the first programs in the nation focused on reducing Alzheimer's disease risk in women. Women represent two thirds of Alzheimer's cases, yet women rarely receive targeted prevention strategies. Dr. Darling is working to change that by expanding access to preventive care, education, and support so women can take a proactive approach to brain health with a customized plan they can stick with, even when life gets busy.

If you are between the ages of 30-65 and are at risk for Alzheimer's disease, Dr. Darling wants you to know you are not powerless and you are not alone. There are proactive steps you can take — starting now — and we are here to help. Learn how to begin your risk-reduction journey at the WAM Prevention and Research Center at [clevelandclinic.org/wamntat](https://clevelandclinic.org/wamntat).



^ Dr. Sandra Darling

# 30 YEARS OF LOVE POWER OF LOVE GALA

**Cleveland Clinic**  
Lou Ruvo Center for Brain Health

Image credit: Digital Flodur

Keep Memory Alive honored music legend Kenny Loggins at the 30<sup>th</sup> anniversary Power of Love® gala on Saturday, February 14, at the MGM Grand Garden Arena in Las Vegas. A star-studded crowd gathered for the milestone evening.

Keep Memory Alive Co-Founders Camille and Larry Ruvo welcomed the audience, with Camille noting there is no more fitting time than Valentine's Day to celebrate the Power of Love that built the mission. She shared her delight that a small idea 30 years ago to support families facing Alzheimer's has grown into the nationally recognized Cleveland Clinic Lou Ruvo Center for Brain Health, a leader in care for Alzheimer's, Parkinson's, multiple sclerosis and other neurodegenerative diseases.

Larry reflected on promises made in Las Vegas three decades ago turning into reality, with the 130 clinical research studies the Lou Ruvo Center for Brain Health has conducted yielding new treatments and accelerating the path to a cure. Cleveland Clinic's presence in Nevada has continued to expand with the 2025 introduction of Cleveland Clinic Concierge Medicine (see page 19) and 2026 launch of Executive Health (see page 3).

Throughout the evening, many stars shared personal stories of how brain disease has touched their families. Television personality **Bronwyn Newport** became emotional, noting this was her and her mother's first Valentine's Day

without her father, who passed away from Alzheimer's and dementia. Actress **Rita Wilson** shared that her mother had Alzheimer's disease; musician **Kevin Cronin** spoke of his mother's battle with Lewy body dementia; model **Daisy Fuentes** reflected on her mother's challenges with Parkinson's; singer **Shelée** shared that her uncle recently lost his fight with ALS; and country star **Luke Bryan** spoke about the many people in his life affected by brain disease.

Guests enjoyed a gourmet dinner prepared by chefs **Wolfgang Puck** and **Charlie Palmer**, joined for the first time by their sons, **Byron Lazaroff-Puck** and **Reed Palmer**. The night culminated with Loggins inviting fellow performers to join him for a finale of "Footloose."



^ While accepting his honor, Kenny Loggins spoke about brain research, remarking, "What good is living to 100 if our brains don't stay with us?"



^ Rachel Platten delivered a powerful performance of her anthem "Fight Song" as images of Cleveland Clinic Lou Ruvo Center for Brain Health patients and families scrolled on the screen behind her.



^ Top left, L-R: Chefs Byron Lazaroff-Puck, Reed Palmer, Charlie Palmer and Wolfgang Puck

Bottom left, L-R: Larry Ruvo with Drs. Richard Lang, Samir Kapadia and Manasvee Kapadia

Top right: Kevin Cronin on stage

Bottom right, L-R: Larry Ruvo with his granddaughter, Camille Ruvo, Kenny Loggins and Lisa Hawkins

## Power of Love® Honoree Michael Meldman

### Shared an Important Family Story from the Stage at the Power of Love

Michael Meldman addressed attendees: “Tonight is very special to me, not only because of this award, but because my dad was diagnosed at Cleveland Clinic, so I have a deep and personal connection to it. I’d like to share a story about him. *Spoiler alert:* He dies, but I promise this is a happy story.

My dad and I were in Vegas together for a Raiders game, and we had the opportunity to visit Cleveland Clinic. Health is important to me, so we’re up to date on

all our checkouts. But Larry Ruvo pushed us to get a whole body MRI scan at Cleveland Clinic Lou Ruvo Center for Brain Health. It was then that my dad found out his melanoma had spread.

This was a big surprise, as my dad had been seen by all his doctors, and it hadn’t been caught on any of the recent tests.

It’s because of Cleveland Clinic that he was accurately diagnosed and able to live

his final days comfortably, peacefully and with meaning, surrounded by family, friends and golf. I hope we can all be blessed to pass this way.

So I’m so honored to receive the Community Leadership Award, especially in a community like Las Vegas. At my Heart Foundation, we believe you change the world one person at a time. At Cleveland Clinic, they share the same mission: They heal the world one person at a time.”

✓ (L to R) Luke Bryan, Cindy Crawford and Mark Davis presented the Community Leadership Award to Michael S. Meldman in recognition of his extraordinary philanthropic commitment to Keep Memory Alive and numerous nonprofit organizations.



KEEP MEMORY ALIVE



&



Cleveland Clinic

Nevada

PRESENT

# SUMMER 2026 RODEO

AT  
SHAKESPEARE RANCH  
GLENBROOK, NV

**JOIN US FOR A  
ROOTIN'-TOOTIN'  
GOOD TIME!**

**SATURDAY, JUNE 27, 2026**

Bulls, Bucks, Barrels & BBQ  
Live Music & Dancing  
Kids' Activities ★ Summertime Cocktails  
Silent & Live Auction

## HONORING

Jan Ellison & Dave Baszucki  
with the Keep Memory Alive Community Leadership Award

## CUISINE BY

Celebrity Chef  
Michael Mina

**ELDORADO**  
HOTEL · CASINO · RENO

SET SAIL WITH LIVE MUSIC & DANCING BY

**YÄCHTLY CRËW**



Thank you to our sponsors\*



\*at the time of printing



Scan for more info.  
To purchase tickets,  
call 702.263.9797  
or email [rodeo@ccf.org](mailto:rodeo@ccf.org)

# Emerging Science Award Program

*Funded by generous donors, Cleveland Clinic's Emerging Science Award Program is intended to help investigators build research skills and preliminary data to successfully compete for significant external research funding in the future.*

“Congratulations to the Nevada-based 2026 class of Emerging Science Awardees on their promising research careers and innovative research proposals,” says Robert J. Fox, MD, FAAN, Vice-Chair for Research, Neurological Institute, Cleveland Clinic. “I look forward to continuing to celebrate their accomplishments over the coming years as they help grow our clinical neurological research program.”

**You can support innovation through the Emerging Science Award Program. Contact us year-round at [DonateNevada@ccf.org](mailto:DonateNevada@ccf.org) or 702.263.9797. Or join us at the Summer Rodeo and bid on the opportunity to support a scientist (see page 32).**



**LUCILLE CARRIERE, PHD** *Health Psychologist*  
**Outcomes of time-limited comprehensive care navigation in dementia**

This pilot study will test a one year care navigation program designed to support people with dementia and their family caregivers. A licensed social worker will provide education, care coordination and regular guidance for each patient-caregiver pair, with priority given to those with complex diagnoses, high caregiver stress or recent emergency department visits. The study will track feasibility and changes in emergency visits, medication safety, caregiver burden, mood and overall quality of life.



**FILIPPO CIERI, PHD, PSYD** *Staff Researcher, Cognitive Neuroscience*  
**Cross-modal fMRI study of memory enhancement with olfactory stimuli**

This study will consider the role of smell in recording and recalling memories, whether diminished smell contributes to forgetfulness and if associated brain activity is observable during MRI scanning.



**PAVITHRAN PATTIAM GIRIPRAKASH, MS** *MRI Research Engineer*  
**Modeling of spatiotemporal dynamics during memory and rest using Markov models and 7T fMRI**

This project will use advanced mathematical models to track how brain activity patterns change when people are at rest versus performing memory tasks. By uncovering complex, hidden patterns across different brain networks, the study aims to identify specific differences in how healthy individuals and those with early memory loss (MCI) process information.



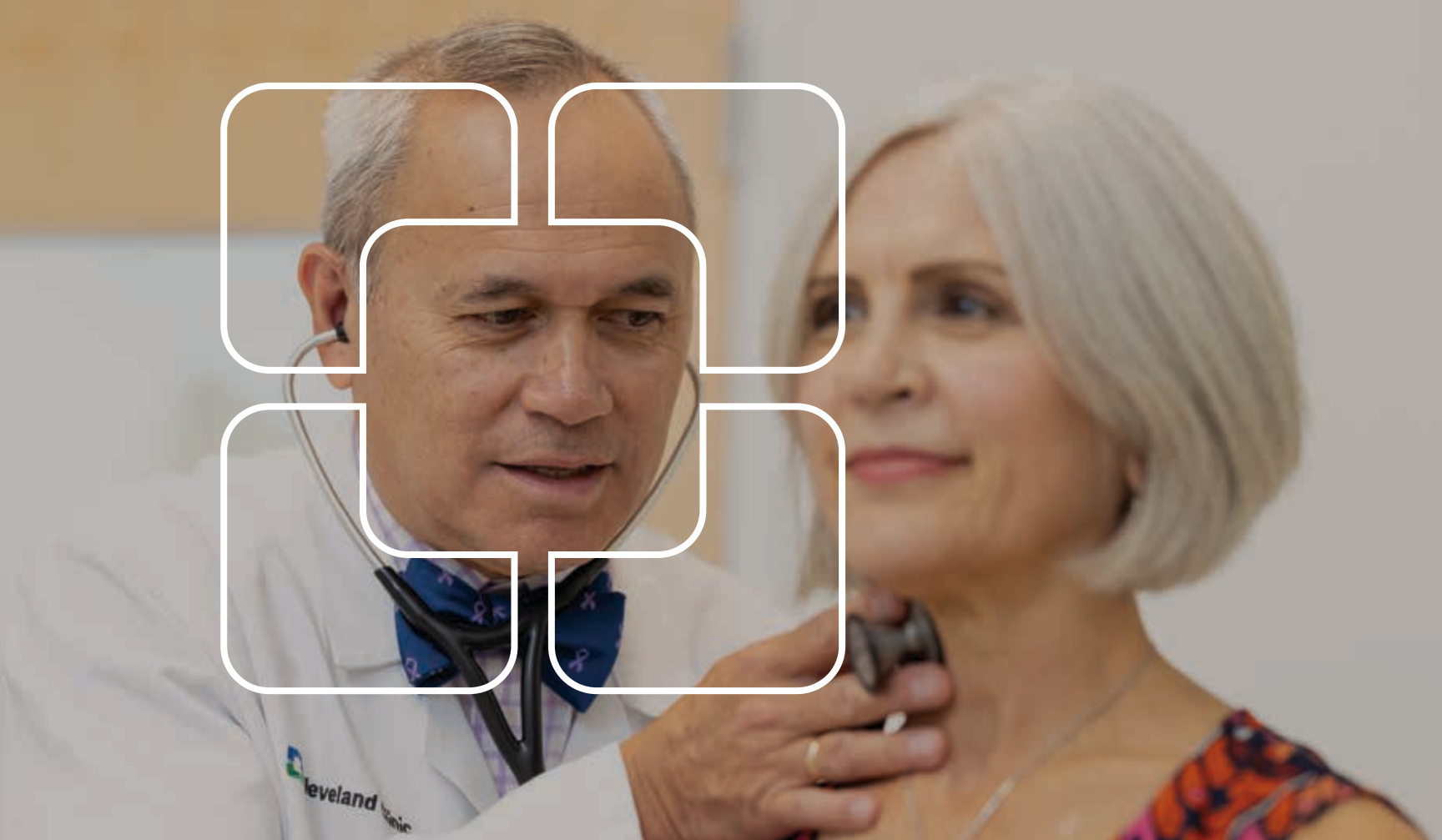
**CHENDI HAN, PHD** *MRI Research Engineer*  
**Predicting PET amyloid in prodromal Alzheimer's disease using a weighted hidden Markov model**

PET imaging can measure amyloid proteins linked to Alzheimer's disease, but these scans are expensive and require radioactive tracers. Instead, this study will use resting-state functional MRI to examine communication across various brain regions and develop a mathematical model that can estimate amyloid levels from these brain connectivity patterns.



**SHEHROO B. PUDUMJEE, PHD, ABPP-CN** *Neuropsychologist*  
**Sex-specific effects of centiloid on treatment response using remote cognitive monitoring (SPECTR)**

This project will investigate the association between amyloid burden in the brain (measured in units called centiloid) and change in cognitive performance following anti-amyloid therapies. In addition, we will explore whether this association differs between men and women.



## Executive Health:

Comprehensive Physicals.  
Personalized for Your Future.

A thorough evaluation in a single visit, our world-class team helps you gain a clear understanding of your current health while respecting your time. You'll leave with a personalized plan for optimizing wellness that you can execute year-round.

The Cleveland Clinic Executive Health program is designed to:

- Identify risks early
- Address current health concerns with expert insight
- Build a personalized wellness plan for long-term health
- Connect you with top specialists

An efficient experience tailored to your health goals, Executive Health delivers the insight, expertise and personalized attention you need to maximize your health.

Currently available at Ohio and Florida locations, with care coming to Las Vegas in Fall 2026.



For Every Care in the World

**Start planning today for  
your future health.**

[clevelandclinic.org/ehnt](https://clevelandclinic.org/ehnt)



888 W. Bonneville Ave.  
Las Vegas, NV 89106  
Office 702.483.6000

[clevelandclinic.org/nevada](http://clevelandclinic.org/nevada)

**SUM<sup>2026</sup>  
MER  
RODEO**  
AT  
**SHAKESPEARE RANCH  
GLENBROOK, NV**



Scan for more info.  
To purchase tickets,  
call 702.263.9797  
or email [rodeo@ccf.org](mailto:rodeo@ccf.org)

**JOIN US FOR A  
ROOTIN'-TOOTIN' GOOD TIME!**

**SATURDAY, JUNE 27, 2026**

Bulls, Bucks, Barrels & BBQ ★ Live Music & Dancing  
Kids' Activities ★ Summertime Cocktails  
Silent & Live Auction

**HONORING**

**Jan Ellison & Dave Baszucki**  
with the Keep Memory Alive Community Leadership Award

**CUISINE BY**

Celebrity Chef  
Michael Mina

**ELDORADO**  
HOTEL · CASINO · RENO

**SET SAIL WITH LIVE MUSIC & DANCING BY  
YÄCHTLY CRËW**

