

Overview of 2019 Grants including Percentages of Grants Portfolio per Category

As in previous years, in 2019 The Mayday Fund's grants represent the continuation of several multi-year projects and the beginning of new ones. The grants for the year represent a commitment to address pain across the life span and to support the development of future leaders in pain research. In 2019, The Mayday Fund's grants to support Knowledge and Networking are included in the Adult and Pediatric categories as the networking was part of the research designs. A continuing interest in the use of Virtual Reality (VR) to address pain forms part of the Fund's 'nimble' portfolio.

Grants made to support Research, Research Network Building and Model Programs for Direct Clinical Care

Adult Medicine:

Aggregate Grants Amount: \$335,128.33 or 41% of the grant budget of \$811,553.73

- Memorial Sloan Kettering Cancer Center received \$54,853 to support research on 'mu' Opioid Receptors. This was the final year of a 3-year research project
- Massachusetts General Hospital received the first payment, \$57,442, of a 3 year grant to support the research project, Next Gen HSN1 – Precision Medicine for Early Stage Genetic Small Fiber Neuropathy (Yr. 1 of 3)
- The University of California at Davis received the first payment, \$66,000, of a 2 year grant to support the UC Davis Pain Relief Integration Project (Yr. 1 of 2)
- The American Pain Society received a grant, \$56,000, to support the Future Leaders in Pain Research Program
- The University of Toronto received the first payment, \$100,833.33, to support a 3 year research project, Brain and Behavior Predictors of Treatment Outcomes in Chronic Neuropathy Pain: A MEG and Psychophysical Study (Yr. 1 of 3)

Pediatric Pain including Research and Knowledge and Networking:

Aggregate Grants Amount: \$417,775.40 or 51% of the grant budget of \$811,553.73

- University of Texas Medical Branch received the second payment, \$82,500, of a 3 year grant, for research on Virtual Reality (VR) as Analgesia for Pediatric Burn Survivors. This work is being done in conjunction with the Shriners Hospitals for Children Galveston. (Yr. 2 of 3)
- Children's Hospital and Clinics of Minnesota, Department of Pain Medicine and Palliative Care, received the second payment, \$27,500, of a 2 year grant for EPEC Training, Pediatric Palliative Care Curriculum. This grant was matched by the Milbank Foundation. (Yr. 2 of 2)
- Stanford University, The Lucille Packard Children's Hospital, received the second payment, \$77,000, of a 2 year grant to explore the development of a Virtual Reality (VR) Pain Rehabilitation Program. (Yr. 2 of 2)
- Seattle Children's Hospital received the second payment, \$20,650, of a 2 year grant to support the work of the Clinical Research Guidelines Workgroup: Core Outcomes for Persistent Pediatric Pain (COPPP). (Yr. 2 of 2)
- Dalhousie Medical Research Foundation (Nova Scotia, Canada) received the first payment, \$33,000, of a 4 year grant to support SKIP (Solutions for Kids in Pain) part of a Canadian Institutes of Health Research Centre of Excellence Program (Yr. 1 of 4)

- Sick Kids Foundation (Toronto, Canada) received the first payment, \$33,000, of a 3 year project, PICH2GO (Pain in Child Health) (Yr. 1 of 3)
- Boston Children’s Hospital, Center for Pain and the Brain, received a grant of \$77,568.70 for the research project, Studying Pain in Fibrous Dysplasia/McCune Albright Syndrome (FD/MAS)
- Boston Children’s Hospital received a planning grant of \$27,500 to create a VR Collaborative amongst Children’s Hospitals
- Connecticut Children’s Medical Center received the second payment, \$33,000, of a 5 year grant to support the development of a Pediatric Pain Fellowship for Pediatricians. (Yr 2 of 5)

Grant made to the Study of Pain in the Context of Emergency Medicine

Aggregate Amount \$55,000 or 7% of the grant budget of \$811,553.73

- University of North Carolina, Anesthesiology Research, The Fund added support to research being conducted by the Department of Anesthesiology at the University of North Carolina to identify biomarkers for those patients at risk to develop chronic pain after being treated in an Emergency Department for mental health and PTSD. Mayday’s contribution of \$55,000 per year for 5 years supplements research funded through a larger NIH grant. (Yr. 4 of 5)

Grants made for Foundation Citizenship

Aggregate Amount \$3650 or less than 1% of the grant budget of \$811,553.73

Philanthropy New York received a grant of \$1150 and The Council on Foundations received a grant of \$2500 to promote their work on best practices in the Foundation Sector.

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