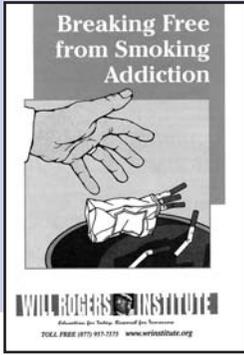


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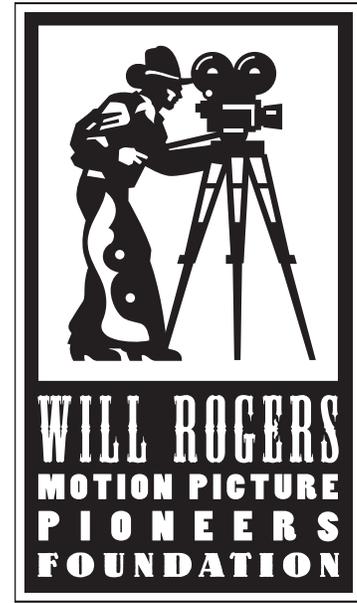
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UNIVERSITY OF TEXAS

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Research: sleep apnea and asthma

WILL ROGERS INSTITUTE: LEADING THE WAY



Edward Crandall

Dr. Edward Crandall's research team at the University of Southern California, Keck School of Medicine, continues to expand its activities in molecular biology and cellular physiology. Their studies on basic lung pathobiology have relevance to many issues, conditions and diseases, including air pollution, tuberculosis, lung injury, emphysema and AIDS.

Dr. Crandall's laboratory utilizes purified lung cell populations grown under controlled conditions. The cells studied are the alveolar epithelial cells that line the 300 million air sacs in the adult lung. Using this model, they have shown that the sodium "pump" in the lung helps save lives by removing water from the air spaces, thereby allowing the normal uptake of oxygen and excretion of carbon dioxide, processes necessary for normal life. These are some of their most important recent findings:

- Keratinocyte growth factor (KGF) can markedly influence the function and differentiation of alveolar epithelial cells.
- Alveolar epithelial cells exhibit "plasticity" in their differentiation characteristics (i.e., they can go forward and backward as they transdifferentiate).
- Differentiation of alveolar epithelial cells markedly affects the expression of specific genes in these cells.
- Stem cells may be capable of replacing alveolar epithelial cells during recovery from lung injuries.

Exploiting these observations, molecular techniques are currently being used to clone genes that are crucial to cell function and to regulation of differentiation. These findings hold promise for the development of new tools with which to treat lung injury using gene- and cell-based therapy approaches.

Will Rogers Institute also supports research efforts at the University of California, Los Angeles; Burke Rehabilitation Hospital; and Cornell University, Weill Medical College.

"There are at least 25 million people in the United States who are known to suffer from a lung disorder. The Institute allows our research scientists to study how the lung works at its most basic levels. What we learn results in new treatments for very serious lung diseases and ultimately provides better health care for everybody." — Dr. Edward Crandall

To read more information about our research laboratories and fellowships, please visit www.wrinsitute.org or call toll-free for a brochure at (877) 957-7575, ext. 2363.

\$4.2 MILLION RAISED FOR LUNG RESEARCH

It was a record-breaking year for the Will Rogers Institute in 2005. The Summer Theatrical Fundraising Campaign starring The Rock raised \$4.2 million for research, treatment and education of pulmonary diseases and disorders.

The 30-second public service announcement was played on movie screens across the country, and moviegoers supported these efforts by making a donation or purchasing a special



The Rock — 2005 Spokesperson

combo pack at theatre concession stands. The continued support from the theatrical, exhibition and distribution communities and the generosity of movie patrons has enabled the Will Rogers Institute to contribute more than \$80 million to fund a vast array of medical research since 1936.

Thank you for your continued support! We look forward to seeing you this summer at the movies!

WILL ROGERS INSTITUTE IS A NATIONAL CHARITABLE HEALTH ORGANIZATION DEDICATED TO THE SUPPORT OF LUNG RESEARCH AND DEVELOPING NEW TREATMENTS AND CURES FOR PULMONARY DISEASES AND DISORDERS.

For more information, please contact us:

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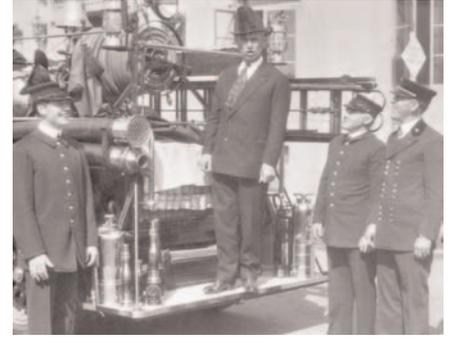
ABOUT WILL ROGERS



Will Rogers at fire inspection

**“You got to sorter
give and take in
this old world.”**

**— Will Rogers,
June 1, 1930**



Will Rogers posing on a fire truck

WILL ROGERS' DOG IRON RANCH AND BIRTHPLACE — OOLOGAH, OKLAHOMA

Built in 1875, the house is an example of the vernacular interpretation of the Greek Revival style of architecture typical throughout the South. (An almost identical house exists on the outskirts of Guntersville, Ala., a town founded by Will Rogers' great grandfather.) The Oologah house is a comparatively rare surviving example of buildings on the former Indian Territory frontier. Clem Rogers, Will's father, added clapboard siding and the place was called "The White House on the Verdigris." When Will's mother, Mary Rogers, died in 1890, Clem Rogers moved to Claremore. For 15 years, the house was the seat of power and site of culture.

The first floor is 1,536 square feet — 48' by 32'. The house was built with 10" logs, hand-hewed from indigenous oak, hickory and walnut hardwood. The logs extend past the second story and support the roof. Two stone chimneys support four open fireplaces. Built to contain from two main 16' by 16' "front rooms," it was divided by a dogtrot that, when enclosed, became a foyer.



A lean-to makes up the kitchen, dining room and spare bedroom. There are two bedrooms located upstairs.

The downstairs "front rooms" were used as a parlor and as a master bedroom, where Clem Rogers also kept his desk and business records. Will Rogers was born in this log-walled room on November 4, 1879.

The parlor included a piano for entertainment. Business, government and other meetings, including court sessions, were held in the room. It was the site of funerals, weddings, dances, singi-alongs and parties.

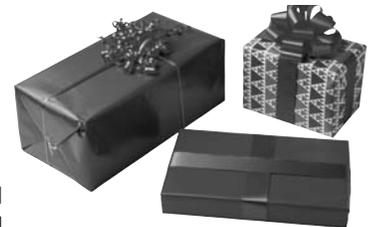
Clem Rogers' ranch was 60,000 acres with up to 10,000 head of Texas longhorn cattle and other farming operations. Today's ranch is 400 acres with 50 Texas longhorns.

The home is authentically conserved. The home, ranch and era-constructed barn are open to the public. **For more information, please visit www.willrogers.org or call (914) 341-0719.**

GIFTS YOU CAN RECALL

One thing about making a will: As long as you are alive and competent, you can change it, cancel it or recall it. For example, if you designate Will Rogers Institute to receive a bequest and later change your mind, you can redo your will or add a codicil and cancel the gift entirely. Thus, a will bequest to the WRI is tentative, incomplete and revocable.

The same is true when you add the WRI to your insurance policy as a beneficiary. Change your mind and you can change the designation. Or maybe you've named WRI as a beneficiary on your retirement fund or your brokerage account — these, too, can be changed. So there are gifts, at least intended gifts, that can be revoked.



Why would anyone make a revocable gift? Why not just give something and get it over with? Why not lock it in irrevocably?

The main reason seems to relate to one's concern for future financial security. Let's say you have limited resources and don't want to put yourself at risk by locking up a gift that may be needed later for medical expenses or nursing home costs. Yet you fully intend to make a major gift to WRI. By including this gift in your will as a bequest, you will have the resources should you need them prior to death. If not, they will eventually pass on to Will Rogers Institute.

What's the downside of making a revocable gift?

First, an incomplete gift fails to produce an income-tax deduction for the donor. Also, if the gift involves an appreciated asset, the donor will miss the benefit of bypassing the capital gains tax. Another negative is that WRI cannot wholly count on a revocable gift. We are unable to make definite plans because the gift may, in fact, never materialize. Additionally, a revocable arrangement denies donors the satisfaction of making a full-fledged gift. Their fulfillment, like the gift itself, is incomplete.

Of course, one may make a revocable gift now and later change it to an irrevocable status. Or, one could divide the intended gift and make part of it tentative and the other part complete.

As with all planned gifts, revocable or irrevocable, it is wise to consult with your own adviser for professional counsel. We do not want you to make a gift that would in any way endanger your future financial security or complicate other planning objectives.

Todd Vradenburg, Will Rogers Institute's executive director, is available to explain our various gift options and to meet with your adviser(s). You can reach him at (877) 957-7575, ext. 2324, or at toddv@wrinstitute.org.

We are grateful for your gifts to the Will Rogers Institute, whether tentative or complete. We know you believe in our mission and that you will help us as you are able. Together, we can make a difference in our world!



HEALTHY NEWS: WHY IT'S NOT TOO LATE TO STOP SMOKING



If you've been thinking about quitting smoking, but you think the damage has already been done, take a look at the quick and astonishing progress your body can make when you finally do quit. According to the Quit Smoking page on the Discovery Web site:

- Twenty minutes after you quit, your blood pressure decreases, your pulse rate drops and the temperature of your hands and feet go up.
- Eight hours after you quit, oxygen levels increase to normal and carbon monoxide levels drop to normal.
- Twenty-four hours after you quit, your risk of heart attack goes down.
- After one to nine months, coughing, sinus congestion, fatigue and shortness of breath decrease.
- After a few weeks, circulation and lung function improve.
- A year after you quit, your risk of coronary heart disease is cut in half.
- Five to 15 years after you stop smoking, your risk of stroke has been reduced to that of those who never smoked.
- After 10 years, your risk of ulcers lowers, your risk of lung cancer is cut in half and your risk for other cancers also decreases.
- After 15 years, your risk of coronary heart disease is now similar to that of people who have never smoked. Your risk of death is now almost the same as someone who has never smoked.

For a free booklet on quitting smoking, please call (877) 957-7575.

REDUCE YOUR FOOD LABEL CONFUSION

Are you confused by the labels on food products? Products now like to advertise that they are "fat free," "reduced fat" and "low calorie." So what do those terms really mean? The Food and Drug Administration regulates the amounts of specific ingredients before the manufacturer can make label claims. Here are a few FDA label-claims requirements for food manufacturers:

Free: This means that a product contains no amount of, or only trivial or "physiologically inconsequential" amounts of one or more of the following components: fat, saturated fat, cholesterol, sodium, sugars and calories. For example, "calorie-free" means fewer than 5 calories per serving, and "sugar-free" and "fat-free" both mean less than 0.5 grams per serving. Synonyms for "free" include "without," "no" and "zero." A synonym for fat-free milk is "skim."

Low: This term can be used on foods that can be eaten frequently without exceeding dietary guidelines for one or more of these components: fat, saturated fat, cholesterol, sodium and calories. Thus, descriptors are as follows:

- Low fat: 3 grams or less per serving.
- Low sodium: 140 milligrams or less per serving.
- Low cholesterol: 20 milligrams or less and 2 grams or less of saturated fat per serving.
- Low saturated fat: 1 gram or less per serving.
- Very low sodium: 35 milligrams or less per serving.
- Low calorie: 40 calories or less per serving.

Synonyms for low are "little," "few," "low source of" and "contains a small amount of."

REFRIGERATE YOUR FOODS SAFELY

If you have a power outage and your refrigerator goes off, how will you know if your food is safe? The rule of thumb here is to keep an appliance thermometer in your refrigerator so that you can monitor the temperature inside in case of a power outage. Refrigerators should be set to maintain a temperature of 40° or below to discourage harmful bacteria from growing. When your power kicks back on, if the temperature in your refrigerator is 40° or lower, your food will be safe to eat. Foods that have been at a temperature of above 40° for more than two hours should not be eaten.

Remember that a large pot of hot food should be broken down into smaller portions before it is refrigerated.



HEALTHY FARE BY NUTRIFIT

WINTER DELIGHT: GRILLED CHICKEN SPAGHETTINI

1/4 cup dry white wine

3/4 tsp. rosemary

1 tsp. olive oil

Five 4 oz. boneless, skinless chicken breasts

1 package (9 oz.) frozen artichoke hearts, thawed

1/4 cup onion, chopped

1/3 cup fat-free, reduced-sodium chicken broth

1/4 tsp. each of dried basil, oregano, garlic powder and black pepper

12 oz. spaghetti, uncooked

3 tbsp. sun dried tomatoes, chopped

2 tbsp. fresh oregano, chopped

Nonfat cooking spray

1. Combine the wine, rosemary and olive oil. Add the chicken and marinate for at least 30 minutes or up to 2 hours.
2. Cook the artichoke hearts according to the package directions, omitting the salt; drain and set aside.
3. Coat a large nonstick skillet with cooking spray. Place over medium-high heat until hot. Add the onions and sauté for 2 minutes. Add the chicken broth and rest of dried ingredients (basil, oregano, garlic powder and black pepper). Cover, reduce heat, and simmer for 5 minutes. Add the artichoke hearts; cover and simmer for 2 minutes.
4. Grill the chicken breasts until tender (12 to 15 minutes) and then cut into thin strips.
5. Cook the spaghetti according to directions, drain. Place the spaghetti in a serving bowl. Add the sun dried tomatoes, artichoke mixture, chicken strips and fresh oregano; toss gently. Serve immediately.

Yield: 6 servings. Calories: 365; Protein: 31.4 g; Carbohydrates: 49.7 g; Dietary Fiber: 2 g; Total Fat: 3.1 g

FOR MORE RECIPES OR TO PURCHASE SPICE BLENDS, PLEASE VISIT WWW.NUTRIFITONLINE.COM!