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GIVING

The Hospital Worked Wonders. Can You Return the Favor?

By JULIE BICK

THE word “syndrome” usually carries a negative connotation and is most commonly associated with a disorder. But then there is “grateful patient syndrome” — and most doctors don’t mind if their patients come down with that.

Grateful patient syndrome is a nickname for what occurs when people are so appreciative of the medical care they or family members have received that they donate money to a hospital or to related research or organizations.

Twenty-three percent of all American households gave to health-related causes in 2005, with an average annual total of \$257, according to data from the Center on Philanthropy at [Indiana University](#). Among the wealthiest 3.1 percent of households — those with a net worth of at least \$1 million or annual income of at least \$200,000 — 70 percent gave to health organizations, with an average annual giving amount of \$21,257 and a median of \$975. (The total number is even higher, because gifts to university medical centers were counted in the survey as gifts toward education.)

Not all of these gifts come from former patients and their families, but some very striking ones do.

Chase Xitco was born four months prematurely and spent 100 days in the neonatal intensive care and other units at Tacoma General Hospital in Tacoma, Wash. During those long days and nights, his parents, Luke and Alisa Xitco, sometimes “didn’t know if Chase was going to make it from one minute to the next,” Mr. Xitco said. His son received an incredible level of care and attention during that time, he said. Two of his nurses even requested that they be reassigned to Chase’s new hospital unit to continue his care when he was well enough to leave the intensive-care unit.

Today, Chase is a healthy 2-year-old who, aside from often wearing glasses, shows no signs of his tumultuous infancy. And in the last few years Mr. and Mrs. Xitco and their extended family have donated more than \$250,000 to the hospital. They also spearheaded a fund-raiser that brought in \$600,000 for the neonatal intensive care unit.

“We were so thankful for the care Chase received,” Mr. Xitco said. “And during those three

months, we got to know the other families, the staff, and learned what the hospital needed.”

While the size of the gift is not typical, the feeling behind it is. People tend to become donors when they identify in some way with recipients, according to Paul Schervish, director of the Center on Wealth and Philanthropy at [Boston College](#): “They are not interested in an illness. They are interested in the people affected by the illness.”

Such donations from patients and their families are crucial to the advancement of health care in America, according to Dr. Eugene Tempel, executive director of the Center on Philanthropy at Indiana.

The Giving USA Foundation in Glenview, Ill., estimates that annual total private, corporate and foundation giving in the health area was just over \$20 billion in 2006.

Donors may seek to educate people about preventing health problems, to support those who are currently fighting an illness, or to finance research. And each gift, whether massive or modest, has its own story.

Kay N. Kautio of Minneapolis donates to the [American Cancer Society](#) and the [Breast Cancer 3-Day](#) event “so that [cancer](#) is no longer a death knell,” she said. Ms. Kautio is a cancer survivor, as are several family members and friends.

Kim Parent of Oceanport, N.J., credits “silver-bullet drugs” with controlling her daughter’s [epilepsy](#) for 12 years and giving her a normal childhood. She donates to the Epilepsy Foundation to fund continuing pharmaceutical research as well as their publications, which help people with epilepsy to feel less isolated.

“It is a marvelous part of our culture and very unique,” said Dr. Herbert Pardes, president of NewYork-Presbyterian Hospital, who has traveled the world for medical conferences and speaks about the importance of private donations to build new health facilities. “In America, when people are affected by an illness, they turn around and try to help others facing the same thing.”

When they enter the health system, patients may not be in the mood to give. Some patients of the National Jewish Medical and Research Center, a specialty respiratory facility in Denver, go there as a last resort, frustrated because their local hospital was unable to properly diagnose their conditions or to treat them, said John Burtness, director of major and planned gifts at the center.

Helping patients and their families get a handle on chronic health problems like [asthma](#), [allergies](#), [emphysema](#) and immune-system diseases gives them a sense of control and optimism in their lives, he said. It also helps the hospital to raise \$20 million to \$25 million a year from private donors, most of whom have some personal connection to the hospital or to the research it is doing.

“When you have a good patient experience, you become a believer in the institution,” he said.

“You bond with your doctors.”

For patients and their families, giving money can be a concrete act of progress at a time when a medical crisis has made them feel helpless. Donors are both “nourishing themselves and the fate of others,” Mr. Schervish said.

One area where grateful giving has lagged, though, is in [mental health](#), Dr. Pardes said. That is because the wealthy and the powerful may not want to be associated with mental illness, which can still carry a stigma, he said.

For the most part though, like a college alma mater, a health organization can stay on a grateful patient’s donor list for life. And one generation’s giving can affect future generations. A panel study by the Center on Philanthropy at Indiana has followed the same families for six years and found that adults who give are more likely to have parents who were donors.

Family donations may come in memory of a parent, to honor a survivor, or in the hope that medicine can help other family members who may be susceptible to a hereditary condition. “There are examples of affected families spearheading major health initiatives going back 50 years,” Dr. Pardes said.

AFTER complications from bypass surgery 12 years ago, Kevork S. Hovnanian, founder of one of the largest building companies in the United States, was moved to NewYork-Presbyterian hospital in Manhattan. “They saved me,” he said.

In gratitude, Mr. Hovnanian gave the hospital’s cardiac unit a gift of \$10 million, which it is using to build a new cardiac outpatient center.

“I hope never to go there again,” said Mr. Hovnanian, 84, adding with a laugh, “But if I do, it will be a nice place.”

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