

Letter to the Board  
Tran1-10958

Dear Ms. Bonneville,

I respectfully ask the CIRM Board and ICOC to consider the following in their deliberations. In addition to leading a basic science stem cell research team at Stanford University Medical School, I have a busy clinical practice in Urogynecology. To me, urinary incontinence is not merely an abstract diagnosis medical students read in a dusty textbook. To me, urinary incontinence is a waiting room full of actual women who all share the same frustration, humiliation, lost income, and compromised quality of life. I have cared for many of these women for years, and despite being qualified to offer them the full range of treatments—medical, pharmaceutical, and surgical—their options are not satisfactory. A recent NIH-commissioned population study found that urinary incontinence is on the rise while the utilization of surgical treatment is decreasing due to fear of synthetic mesh materials, leaving a growing population that is undertreated and without good options.

I truly believe that the founders of CIRM envisioned one of its missions to be the funding of nascent stem cell research endeavors that are difficult for private industry to initiate. The TRAN1-10958 proposal: Autologous iPSC-derived smooth muscle cell therapy for treatment of urinary incontinence is exactly such an endeavor. Our recent scientific advances are pushing this technology almost to the point of true clinical advancement that can help millions of women and men. CIRM funding at this crucial point will propel this translational therapy into clinical reality.

With deepest gratitude,

Bertha Chen, MD  
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Department of Ob/Gyn  
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