

CONQUERING Sjögren's

July/August 2026

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Sjögren's Foundation Advocates for Highlighted Topic with NIH Director

NATIONAL INSTITUTES OF HEALTH

The Sjögren's Foundation recently met with National Institutes of Health (NIH) Director Dr. Jay Bhattacharya to discuss opportunities to advance Sjögren's disease research.

During the meeting, the Foundation highlighted gaps in Sjögren's disease research and asked NIH to designate it as a Highlighted Topic. Dr. Bhattacharya agreed to move the request forward!

An NIH Highlighted Topic signals to researchers that NIH is interested in receiving more research proposals in a specific scientific area. While it does not create a dedicated funding program, it encourages investigators to pursue new Sjögren's disease research through existing NIH funding opportunities and helps raise the profile of Sjögren's disease across multiple NIH Institutes and Centers. Over time, this can help grow the Sjögren's disease research portfolio by encouraging more grant applications, supporting more research projects, and ultimately leading to new discoveries that improve diagnosis, treatment, and care for people living with Sjögren's disease.

Representing the Foundation were President & CEO Janet Church and Advocacy Director Eli Greenspan. They were joined by Sjögren's disease experts Sara McCoy, MD, PhD, and Alan Baer, MD. Also participating in the discussion were Dr. Victoria Shanmugam, Director of the Office of Autoimmune Disease Research (OADR), Dr. Anna Mazzucco, Director of the National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS), and Dr. Jennifer Webster-Cyriaque from the National Institute of Dental and Craniofacial Research (NIDCR).

The request comes at a critical time for Sjögren's disease research. Sjögren's is the second most common rheumatic autoimmune disease in the United States, affecting millions of Americans. Yet despite its prevalence and impact, it continues to receive significantly less NIH funding than other autoimmune diseases with

a similar profile. In FY2025, NIH invested \$29.5 million in Sjögren's disease research, compared with \$66.4 million for rheumatoid arthritis, \$112 million for multiple sclerosis, and \$147.9 million for lupus. Expanding research opportunities through an NIH Highlighted Topic is one important step toward helping close that gap. On the next page, you can see select slides from the Foundation's presentation to NIH highlighting the need for greater investment in Sjögren's research.

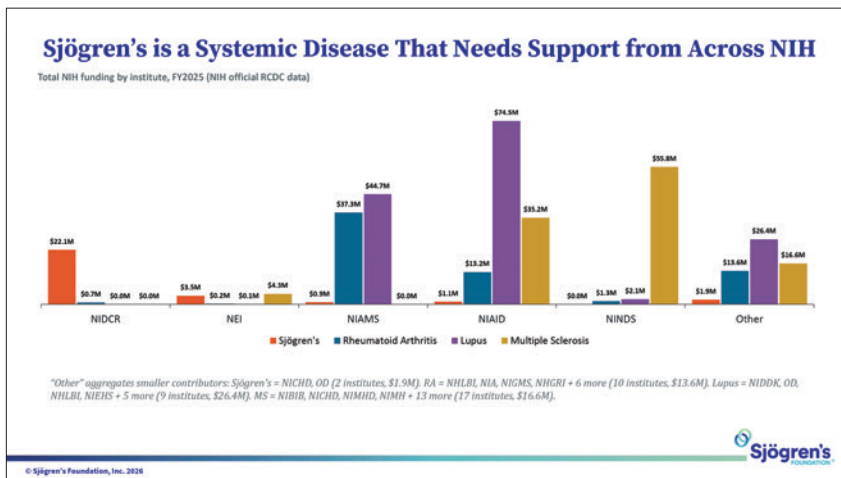
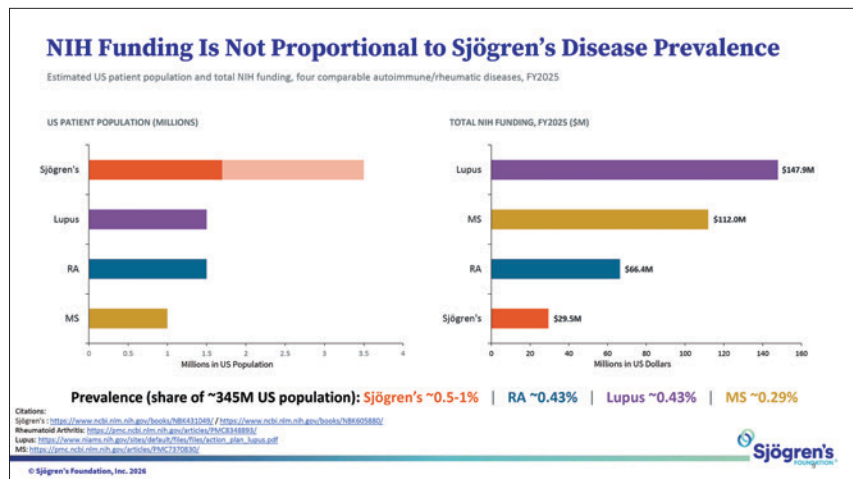
The Foundation will continue working with NIH as the Highlighted Topic is developed for publication. Once published, it will encourage more researchers to pursue Sjögren's disease research and help build the case for increased federal investment in the years ahead.



Left to right: Sjögren's disease expert Sara McCoy, MD, PhD; Dr. Victoria Shanmugam, Director of the Office of Autoimmune Disease Research (OADR); Sjögren's disease expert Alan Baer, MD; and Janet Church, President and CEO, Sjögren's Foundation.

“NIH” continued from page 3 ▼

Sjögren's is the second most common rheumatic autoimmune disease in the United States, yet it receives significantly less NIH research funding than comparable diseases. Increasing awareness and research investment is essential to closing that gap.



Sjögren's disease is a complex multi-system autoimmune disease. Advancing research requires coordinated investment across multiple NIH Institutes and Centers to better understand and treat the disease.

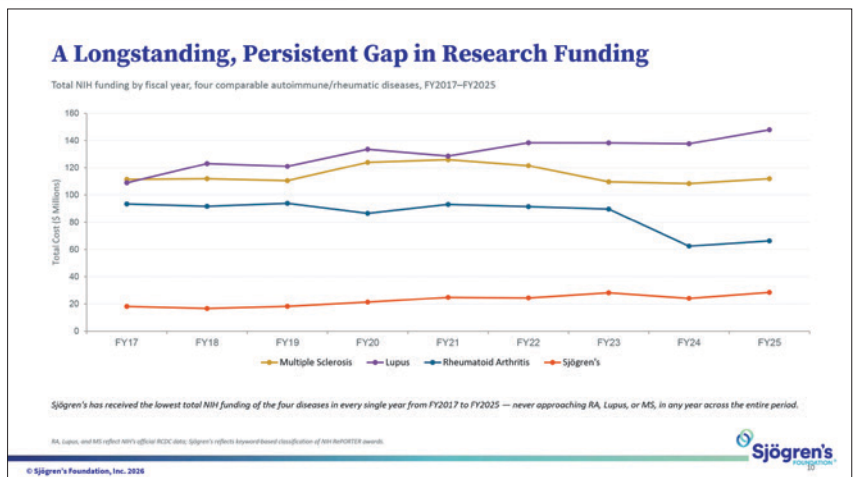
Sjögren's disease consistently receives less NIH research funding than comparable autoimmune diseases. The Foundation is working to change that.

Take Action to Advance Sjögren's Disease Research

While a Highlighted Topic (mentioned in the previous article) is an important step forward, it does not fund research on its own. Researchers still rely on NIH grants to pursue new discoveries, making continued investment in NIH essential.

Congress is currently considering Fiscal Year 2027 funding for NIH, and your voice can make a difference. Please contact your lawmakers and urge them to:

- Support at least \$51.3 billion for NIH in FY2027.
- Expand research opportunities focused on Sjögren's disease.
- Support the Office of Autoimmune Disease Research.



Visit sjogrens.org/nih-action or scan the QR code to send a message to your members of Congress asking them to prioritize Sjögren's research.





Lymphoma and Sjögren's Disease

September is Lymphoma Awareness Month, making it an important time to learn about the connection between Sjögren's disease and lymphoma. While people with Sjögren's have a higher risk of developing lymphoma than the general population, it's important to remember that about **95% of people with Sjögren's disease will never develop lymphoma**. Understanding the signs and symptoms can help you and your healthcare team recognize potential concerns early without causing unnecessary worry.

If you have Sjögren's disease, it's important to be aware of your risk of lymphoma and to know about its signs and symptoms. Talk with your doctor about your lymphoma risk, learn how you can protect your health through screening, and get advice for managing both Sjögren's and lymphoma.

What is Lymphoma?

Lymphoma is a type of blood cancer that affects the immune system. It starts in cells called lymphocytes — a type of white blood cell which includes B-cells and T-cells.

There are 2 main types of lymphoma:

- **Non-Hodgkin lymphoma** — About 5% of people with Sjögren's disease develop lymphoma during their lifetime, and most of these are non-Hodgkin lymphomas.
- **Hodgkin lymphoma** — This type of lymphoma is much less common with Sjögren's.

These 2 main types are further broken down into more than 100 subtypes — and these can range from aggressive (cancers that grow fast) to indolent (cancers that grow slowly).

Most lymphomas that develop in people with Sjögren's disease are slow-growing. About 75% of lymphomas in Sjögren's disease fall into this cate-

gory. The most common type is called MALT (mucosa-associated lymphoid tissue) lymphoma, which often develops in tissues outside the lymph nodes, particularly the salivary glands and tear glands in people with Sjögren's disease.

Signs and Symptoms

Non-Hodgkin and Hodgkin lymphoma have similar symptoms. These may include:

- Swelling in the lymph nodes in your neck, armpits, or groin that lasts more than a few weeks
- Fatigue (feeling very tired all or most of the time)
- Fevers that go away and come back without explanation
- Intense night sweats (enough to soak your pajamas or bedding)
- Shortness of breath
- Losing weight without trying (specifically, losing 10 percent of your total body weight over 6 months without changing your eating or physical activity habits)

Some of these symptoms — like fatigue or feeling short of breath — may also occur in Sjögren's disease or other health conditions.

Signs That Deserve Prompt Medical Attention if You Have Sjögren's Disease:

- Persistent swelling of one salivary gland (especially the parotid gland near the jaw)
- Swelling that continues or slowly enlarges over weeks
- Enlarged lymph nodes that don't go away
- Rapidly enlarging lumps
- Unexplained fevers

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“Lymphoma” *continued from page 5* ▼

- Drenching night sweats
- Unexplained weight loss
- New fatigue that’s significantly different from your usual Sjögren’s fatigue

Persistent enlargement of the parotid gland (the large salivary gland located just in front of the ear and along the jaw) is one of the more common ways lymphoma may first appear in people with Sjögren’s disease. While most swelling is not lymphoma, persistent or enlarging swelling should always be evaluated.

How are Lymphoma and Sjögren’s Related?

Experts are still working to understand exactly how Sjögren’s and lymphoma are connected — and why Sjögren’s patients are more likely to develop lymphoma.

One reason is that the chronic inflammation caused by Sjögren’s disease keeps certain immune cells, called B lymphocytes (B cells), constantly activated. Over many years, this ongoing stimulation can allow genetic changes to build up in these cells. In some people, those changes eventually lead to lymphoma.

Most Sjögren’s-related lymphomas are MALT lymphomas, a slow-growing type of non-Hodgkin lymphoma that often develops in the salivary or tear glands. They are typically slow to progress and often respond well to treatment when treatment is needed. Less commonly, patients develop diffuse large B-cell lymphoma (DLBCL), a faster-growing lymphoma that requires prompt treatment.

Researchers continue to study why some people with Sjögren’s disease develop lymphoma while most never do. Studies suggest that long-term inflammation, certain immune system abnormalities, and ongoing activation of B cells all play a role.

Scientists are also working to identify biomarkers that may help predict which people with Sjögren’s disease are at highest risk for lymphoma. In the future, this research may help doctors better identify who would benefit from closer monitoring.

How is Lymphoma Diagnosed?

To diagnose lymphoma, your doctor will ask about your symptoms and do a physical exam. They’ll also use tests — including blood tests and imaging tests — to check for signs of lymphoma. If a swollen salivary gland or lymph node needs to be tested for lymphoma, your doctor will usually recommend a core needle biopsy or, in some cases, removal of an entire lymph node (excisional biopsy). A fine needle aspiration (FNA) alone often doesn’t provide enough tissue to accurately diagnose lymphoma. If you are

diagnosed with lymphoma, you will need to see a hematologist/oncologist (doctors who specialize in cancer and blood disorders).

Talk With Your Doctor About Your Risk of Lymphoma

While being at a higher risk for cancer can be frightening, it’s important to keep in mind that most people with Sjögren’s don’t develop lymphoma. Fortunately, most doctors who treat Sjögren’s are very aware of the higher risk of lymphoma and know what signs to watch for.

Still, it’s a good idea to have a conversation with your doctor about Sjögren’s and lymphoma. You can ask them questions like:

- What’s my risk for developing lymphoma?
- What signs or symptoms should I watch for?
- Are there tests you can do to check for lymphoma?
- Should my salivary glands and lymph nodes be checked during my routine visits?
- If I develop a persistent swollen salivary gland or lymph node, should I see a lymphoma specialist?
- What should I do if I notice unusual symptoms or changes?

There are currently no recommendations for routine CT scans or PET scans to screen people with Sjögren’s disease for lymphoma. Instead, doctors rely on regular physical examinations, routine blood work, and evaluation of any new symptoms or persistent gland swelling.

During routine follow-up visits, your healthcare provider may examine your lymph nodes and salivary glands for any changes and review any new symptoms you’ve noticed. These routine evaluations, along with blood tests when appropriate, are usually enough to identify concerns that may need further testing.

Which Type of Lymphoma is Most Common in Sjögren’s Patients?

The majority of lymphomas seen in Sjögren’s disease are MALT lymphomas. Most MALT lymphomas grow slowly, and many people do well with monitoring or treatment. Some do not require treatment at all.

Less commonly, people develop diffuse large B-cell lymphoma (DLBCL), which grows more quickly but can often be successfully treated with combination therapies.

In a small number of people, a slow-growing lymphoma can change into a faster-growing lymphoma over time. This is called transformation. Although

uncommon, it is one reason regular follow-up appointments are important.

How is Lymphoma Treated?

Treatment for lymphoma depends on the specific type of lymphoma you have, how quickly it's growing, where it's located, and your overall health.

Some lymphomas associated with Sjögren's disease grow very slowly and may not need treatment right away. Instead, your doctor may recommend active surveillance (also called "watchful waiting"), which means monitoring the lymphoma closely with regular visits and tests. This approach is safe for many people with slow-growing lymphomas and allows treatment to begin if the lymphoma changes or starts causing problems.

When treatment is needed, options may include:

- **Radiation therapy** for lymphoma that's limited to one area of the body
- **Immunotherapy**, such as rituximab, which targets lymphoma cells
- **Chemotherapy**, often used for faster-growing lymphomas
- **Targeted therapies**, which are newer medicines that attack specific cancer cells while limiting damage to healthy cells

Your hematologist or oncologist will recommend the treatment plan that's right for your specific type of lymphoma.

Although a lymphoma diagnosis is serious, many people respond well to treatment. The most common lymphoma seen in Sjögren's disease, called MALT lymphoma, often grows slowly and has an excellent prognosis. More aggressive lymphomas can usually be treated successfully when diagnosed promptly.

Your healthcare team can explain what to expect based on your specific diagnosis and answer any questions you have about your treatment options.

Are People With Sjögren's Disease at Risk for Other Cancers?

Lymphoma is the cancer most strongly associated with Sjögren's disease. Research has also found a slightly increased risk of a few other cancers, including multiple myeloma and thyroid cancer. Some studies have also suggested possible increases in certain head and neck, stomach, and colon cancers, but the evidence is less consistent.

At this time, experts do not recommend additional cancer screening beyond the standard screening guidelines for most people with Sjögren's disease.

Talk with your healthcare provider about which cancer screenings are appropriate for you based on your age, family history, and other personal risk factors.

What Does Having Lymphoma and Sjögren's Disease Mean for Me?

Living with any serious health problem can be challenging. Both lymphoma and Sjögren's can have a big impact on your daily life, physical health, and mental health.

How having both diseases affects you will depend on your specific situation, the type of lymphoma you have, and your Sjögren's symptoms. But it's likely that living with both diseases will mean:

- **You'll need to coordinate care between several doctors.** If you have both conditions, it's important that all of the doctors who care for you — such as your primary care doctor, rheumatologist (a doctor who specializes in conditions like Sjögren's), oncologist, or hematologist — are aware of your diagnoses, so they can work together to come up with a care plan for treating both diseases.
- **Your mental health can be impacted.** It can be overwhelming to be diagnosed with Sjögren's and lymphoma, and it's not uncommon to feel anxious or depressed. If you're having a difficult time coping, talk with your doctor or a mental health professional about how you're feeling. They can offer support and help you find ways to look after your mental health.
- **Your Sjögren's disease treatment may change.** Depending on your plan for treating lymphoma, you may need to change or stop taking medicines for managing Sjögren's. Your doctor can advise you on whether you need to make changes to your medicines.

Get Support for Lymphoma and Sjögren's Disease

If you're living with both lymphoma and Sjögren's disease, know that you're not alone. It can be overwhelming to manage both conditions, but help is available. To get support for managing both conditions, you can:

- Talk with your doctor or a mental health professional about how you're feeling
- Reach out to friends and loved ones for emotional support or help
- Find a support group for people with cancer or Sjögren's ■



Secure Your Seat *Mind, Body, and Sjögren's*

Friday, October 23, 2026 | Virtual Conference

Join us for the Sjögren's Foundation's annual one-day Fall Focus Conference, featuring this year's theme, Mind, Body, and Sjögren's.

This virtual educational event will explore symptoms and challenges that can significantly affect daily life with Sjögren's. Guided by findings from the Foundation's 2025 *Living with Sjögren's*® Patient Survey, the program will feature leading experts discussing fatigue, brain fog and cognitive dysfunction, sleep issues, fibromyalgia, exercise, and more.

Gain trusted, evidence-based information, practical suggestions for managing symptoms, and opportunities to connect with others in the Sjögren's community, all from the comfort of home.

Foundation members receive \$20 off registration with code **MEMBER2026**.

Register for the 2026 Fall Focus Conference today!

Scan the QR code below or visit sjogrens.org/fallfocus to register.

Foundation members can use code **MEMBER2026** to receive \$20 off registration.





Sjögren's Foundation Announces Its Largest Research Investment to Date

Research drives progress. Every study brings us closer to answering important questions about Sjögren's disease and improving the lives of those affected.

This year, the Sjögren's Foundation is made the largest research investment in its history, committing more than \$1 million to support eleven Foundation research grants and two national research collaborations.

This year's research portfolio spans many of the most pressing challenges in Sjögren's disease. Projects focus on improving diagnosis through tear-based biomarkers, understanding neurological symptoms and brain fog, exploring the role of the microbiome and viruses in disease development, advancing precision medicine, restoring salivary gland function, and examining mental health and quality of life.

This investment comes at a pivotal time. With scientific interest in Sjögren's disease growing and new therapies on the horizon, continued research has never been more important. None of this work would be possible without the generosity of our Members and donors. Your support helps make these discoveries possible and brings us closer to better treatments, earlier diagnosis, and a brighter future for everyone living with Sjögren's disease.

High Impact Grant



Abigail Koppes, PhD
Northeastern University

*Decoding Neuro-Sjögren's in a Dish:
Multi-Neural Subtype Screening and
Gut-Derived Extracellular Vesicle
Mechanisms on an Innervated
Microphysiological Platform*

This project is an extension of previous Sjögren's Foundation funded Pilot Grant that successfully developed "nervous system chips" using human nerve cells to model Sjögren's disease in the lab. Dr. Koppes and team are now moving into testing these nervous system chips with blood samples from Sjögren's patients to better understand why many people experience neurological symptoms, and to study whether tiny particles (extracellular vesicles or EVs) released by gut cells may contribute to nerve damage in the brain. This research could help improve understanding of the nerve-related symptoms experienced by many people living with Sjögren's disease.

High Impact Grant



Shivani Garg, MD, PhD
Yale University

*Target-site Pharmacokinetics
to Enable Precision Medicine in
Neuro-Sjögren's: Getting the Right
Dose to the Right Tissue*

This project is focused on better understanding why hydroxychloroquine (HCQ), a commonly used treatment for Sjögren's disease, often does not relieve the nerve pain experienced by patients with small fiber neuropathy (SFN). Researchers will study what levels of the medication actually reach the target-site, the skin tissue which is rich in small nerves, in SFN, and whether those levels are high enough to drive changes in nerve inflammation and pain. The findings could help create a more personalized approach to HCQ dosing, with the goal of improving treatment effectiveness for nerve pain.

“Grants” *continued from page 9* ▼

High Impact Grant



Teja Kapoor, MD
Columbia University

Mechanistic Endotypes of Neuro-Autonomic Sjögren's Disease

This project is focused on better understanding the different causes of nervous system symptoms in Sjögren's disease, including severe fatigue, digestive problems, dizziness, and burning or tingling nerve pain. Researchers believe that in some patients the immune system may damage small nerve fibers, while in others these symptoms may occur without clear immune-related nerve injury, which may help explain why treatments such as intravenous immunoglobulin (IVIG) can work well for some patients but not others. By combining a symptom assessment, blood tests, and physiologic and nerve testing, the study aims to identify meaningful patient subgroups to support more personalized treatment approaches in patients with Sjögren's disease.

High Impact Grant



Esen Akpek, MD
Duke University

Tear-Based Biomarker Discovery for Precision Diagnosis of Sjögren's Disease

This project is focused on improving how Sjögren's disease is diagnosed. Diagnosing Sjögren's is often difficult. Many patients experience symptoms for years before receiving a diagnosis because current blood tests are not always reliable. A lip biopsy can help confirm the diagnosis, but it is an invasive procedure that may cause permanent side effects. Delayed diagnosis can make it harder for doctors to choose the best treatments and may allow the disease to worsen. Researchers will study tears as a noninvasive source of information about immune activity and disease development by analyzing tear samples from

people with Sjögren's disease, other autoimmune diseases, non-Sjögren's dry eye disease, and healthy volunteers. The goal is to help create a diagnostic handheld device that could help doctors detect Sjögren's disease earlier in the clinic and monitor disease activity over time.

High Impact Grant



Carla Cuda, PhD
Northwestern University

Cerebrospinal Fluid Indicators of Cognitive Dysfunction in Patients with Sjögren's Disease

This study is focused on better understanding brain fog and memory-related symptoms (cognitive impairment) in Sjögren's disease, which many patients experience and can significantly affect daily life. Researchers will study microglia, immune cells in the brain that restore damage and maintain homeostasis (biological process for keeping the inside of the body stable), to see whether abnormal immune activity may be linked to cognitive symptoms in Sjögren's disease. The goal is to better understand the biological causes of cognitive impairment in Sjögren's disease.

Pilot Grant



Rachael Gordon, MD, PhD
University of Pittsburgh

Investigating Herpes Simplex Virus 1 as a Trigger of Sjögren's Disease and its Neurologic Manifestations in Genetically Susceptible Mouse Models and in Patients

This research is studying whether a common virus, herpes simplex virus type 1 (HSV-1)—the common cold sore virus—may help trigger or worsen Sjögren's disease and its nerve-related complications in some people. In this project, researchers will infect two different strains of Sjögren's-prone mice with HSV-1 to determine whether the virus accelerates Sjögren's and causes nerve damage. They will study the tiny nerves in the skin to check for nerve damage beyond the glands. They will also examine the nerves inside the glands to see whether viral-triggered injury to

these nerves may affect how the glands work. In a complementary human study, researchers will test whether Sjögren's patients who have been exposed to HSV-1 are more likely to have nerve complications and worse disease. Together, these studies will create new animal models of Sjögren's that better mirror human disease and may generate the first data linking this common virus to the neurologic problems that severely impact patients' quality of life.

Pilot Grant



Mary Farach-Carson, PhD
University of Texas Health Science
Center at Houston

*Bioprinted Human Lymphatic
Microvessels to Restore
Salivary Gland Function in
Sjögren's Disease*

This project will explore how dysfunction of the lymphatic system may lead to inflammation and salivary gland damage in Sjögren's disease. Researchers will use advanced 3D bioprinting to create a miniature, lab grown model of human lymphatic vessels and supporting salivary gland cells to study how inflammatory signals in Sjögren's disease disrupt lymphatic function and worsen gland damage in real time. The goal is to identify new ways to repair or strengthen the lymphatic system to help clear inflammation and protect and restore salivary gland cells.

Pilot Grant



Ghaith Noaiseh, MD
University of Kansas Medical Center
Research Institute

*Longitudinal Concordance
Between ESSDAI Disease Activity
and Psychiatric Patient-Reported
Outcomes in Sjögren's Disease*

This research study is focused on better understanding the relationship between Sjögren's disease activity and mental health symptoms such as anxiety, depression, and insomnia, which can significantly impact daily life and quality of life for many patients. Researchers will follow patients over time during routine rheumatology visits to study whether changes in systemic disease activity are associated with changes

in mood-related symptoms and emotional well-being. Results from the study could provide practical evidence to help guide conversations about mood symptoms and sleep disturbance in Sjögren's disease and inform future studies and clinical trials.

Pilot Grant



Ahmet Coskun, PhD
Georgia Tech Research Corporation

*Spatially Resolved Metabolic
Biogeography of the Neuro-
Epithelial-Immune Interface in
Salivary Glands for Dissecting
the Dietary Interventions on
Sjögren's Disease*

This project is exploring how inflammation in Sjögren's disease may disrupt the communication between nerves and salivary gland cells, contributing to dry mouth and loss of saliva production even when the glands themselves are not fully damaged. Researchers are using cutting-edge imaging technology, patient donor data, and a miniature "Diet-on-a-Chip" salivary gland model to study how nutrients and inflammation interact inside the glands. The goal is to better understand how nutrition may affect salivary gland health in Sjögren's disease and potentially support more science-backed dietary interventions for patients.

Dynamic Grant



Athena Papas, DMD, PhD
Tufts University

*Characterizing Region-Specific
Gastrointestinal and Oral
Microbiomes in Sjögren's Disease
Using Novel Ingestible Mini-Pill
Sampling Technology*

This project is exploring the role of the gut microbiome (community of bacteria living in the gut) in Sjögren's disease using a novel swallowable capsule, or "mini-pill," that can collect bacteria from different regions of the gut as it travels through the digestive tract – including the small intestine where much of the body's immune activity occurs. Researchers will

“Grants” *continued from page 11 ▼*

also collect saliva and dental plaque samples, since Sjögren’s patients are known to have altered mouth bacteria due to dry mouth. By comparing Sjögren’s patients to healthy volunteers already enrolled in an ongoing study, researchers hope to create the first-ever map of exactly where in the gut Sjögren’s-related bacterial changes take place and whether altered mouth bacteria may be seeding gut problems. The outcome of this study could help identify new treatment approaches, including targeting specific oral or gut bacteria through probiotics, dietary interventions, or other microbiome-based therapies. This study could lay the groundwork for future research on the microbiome as a therapeutic target in Sjögren’s disease.

Dynamic Grant

**Caroline Shiboski, DDS,
PhD, MPH**

*Preservation of the Sjögren’s
International Collaborative Clinical
Alliance (SICCA) Biorepository and
Dissemination Plan*

This project would provide short-term bridge funding to preserve the Sjögren’s International Collaborative Clinical Alliance (SICCA) biorepository while the team awaits renewed NIH funding. The SICCA biorepository contains more than 100,000 biospecimens along with detailed clinical and phenotypic data from Sjögren’s disease patients, making it one of the most significant Sjögren’s research resources in the world. For more than 15 years, the SICCA Dissemination Plan has allowed researchers worldwide to request and access these specimens and data to support Sjögren’s disease research. Approximately five research projects per year have utilized SICCA data and biospecimens to advance understanding of Sjögren’s disease, including research related to biomarkers, disease characterization, and other scientific discoveries. ■



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Help create a future where people affected by Sjögren’s disease benefit from greater awareness, stronger support, expanded education, and continued progress in research and care.

Include the Sjögren’s Foundation in your estate plans or through a planned gift, and help ensure this important work continues for generations to come.

Learn more at sjogrens.org/legacy





Together, We Made Sjögren's Impossible to Ignore

World Sjögren's Day is a celebration of what our community can accomplish together.

In July, supporters across the country wore blue, shared their stories, honored loved ones, educated others about Sjögren's disease, and helped raise awareness. Every action, big or small, helped more people recognize and understand Sjögren's disease.

One of the most meaningful parts of this year's World Sjögren's Day campaign was our Honor Wall. Nearly 1,000 names were submitted by people recognizing themselves, honoring loved ones, thanking caregivers and healthcare professionals, and celebrating others who have made a difference in their Sjögren's journey. The Honor Wall, featured on the following pages, is a reminder that no one faces Sjögren's disease alone.

Communities also helped shine a light on Sjögren's disease in a very visible way. The Lower Trenton (Trenton Makes) Bridge (Trenton, NJ/Morrisville, PA), Northampton Street Bridge (Phillipsburg, NJ/Easton, PA), New Hope–Lambertville Bridge (PA/Lambertville, NJ), Uhlerstown–Frenchtown Bridge (PA/Frenchtown, NJ), and Terminal Tower (Cleveland, OH) were all illuminated in blue, helping spark conversations and bring greater visibility to Sjögren's disease.

Thank you for helping make this year's World Sjögren's Day such a success!

World Sjögren's Day Campaign Presenting Sponsor



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Sjögren's Foundation World Sjögren's Day Honor Wall

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“Myself and my family” • Debbie C. honors “Debbie Coleman” • Susan L. honors “Myself - suffering with this!!!!” • Linda M. honors “Myself” • Jessica H. honors “my friend monica” • Fedora B. honors “Buck Hamilton” • Patricia N. honors “Caro Wilson” • Dawn H. honors “Dawn” • Angie N. honors “Autumn Newkirk” • Susan N. honors “Donna Grimmer” • Clara K. honors “Myself” • Elizabeth P. honors “Myself and my decades long fight” • Susan G. honors “Myself!!!!” • Crystal L. honors “Myself” • Faith C. honors “Edith L Cornelison” • Margaret M. honors “Myself. I tell everyone i know about Sjögren’s.” • Kathleen J. honors “My patient shepa husband of 45 years who took Me to the summit of Mt. Rainier three times in one month in 2009, before my HLA-B27 disease was diagnosed. Our journey continues...” • Sharon N. honors “Me, Sharon Nash” • Cathy D. honors “Me” • Sheila W. honors “Myself” • Lesley R. honors “Myself” • MsRoslyn S. honors “God” • Rita S. honors “Rita Carter” • Tandy C. honors “Myself” • Iris M. honors “All Sjögren’s people” • Briggitt M. honors “Vickie mccclain” • Fran S. honors “Fran” • Papetra Z. honors “Papetra Zeno Morgan” • Carolyn C. honors “Myself and my daughter” • Rebekah O. honors “BellaOtt” • Ann honors “ann wallett” • Kate F. honors “My grandfather and Myself” • Holly F. honors “My husbands grandmother and Myself” • Dianna P. honors “Myself” • Lisa C. honors “Myself” • Diane L. honors “Myself Diane Lang Padgett” • Terri L. honors “All who suffer from invisible illnesses.” • Dottie D. honors “Myself” • Joy C. honors “Myself” • Kerry V. honors “Myself” • Lisa honors “My father and mother” • Hope K. honors “Me” • Ann S. honors “Me” • Jessica L. honors “Me” • Dani B. honors “Dr. Kelly May” • Deondra L. honors “All who suffer with Sjögren’s” • Lori P. honors “Myself” • Teshama B. honors “Myself.” • Nova S. honors “Hollie D. Dillon” • Jessica R. honors “Myself / Jessica Rena” • Marie E. honors “My mother; Mary Macione Ellzey who died of Lupus at 57 years old” • Jennifer C. honors “Myself” • Debi M. honors “Debi Meredith” • Jacalyn M. honors “Jacalyn Miller” • Debbie R. honors “Debbie Re” • Sara M. honors “Myself” • Liz R. honors “Myself and everyone dealing with this disease.” • Brenda P. honors “Everyone with Sjögren’s” • Kathryn G. honors “All who have the syndrome” • Dawn E. honors “dawn” • Lisa K. honors “Joyce Dziedzic” • Joan L. honors “Joan M. Leogrande” • Diane D. honors “Me” • Mitzie W. honors “Those suffering with this problem.” • Barb G. honors “Barbara Groff” • Dawn C. honors “Myself” • Carol B. honors “Everyone who is fighting the battle against this, including Myself” • Peggy K. honors “I have Sjögren’s and it’s too expensive to leave any money left over for donations sorry.” • Ebony A. honors “Me” • Ashley W. honors “Myself” • Sandra P. honors “my father” • Julene H. honors “all people who suffer with Sjögren’s” • Robin S. honors “my late mother” • Mary M. honors “Mary” • Maryanne M. honors “Myself” • Alicia honors “All who suffer and those who suffer in silence” • Cynthia A. honors “Myself & Others” • Terry T. honors “Terry” • Deborah M. honors “Me” • Jenny M. honors “Jenny Richardson” • Becki T. honors “Everyone with Sjögren’s” • Stacey R. honors “Myself” • Yolanda R. honors “Myself” • Charisse E.

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honors “Ashley Marie Donnelly, Melissa Crews” • Michelle G. honors “My mother” • Rebecca L. honors “J. Gutierrez Lorenzo” • Karen M. honors “In honor of everyone who has Sjögren’s.” • Kathleen H. honors “Myself” • Michele R. honors “All people diagnosed with Sjögren’s disease” • Diane B. honors “Ethan DelPriore” • Monica P. honors “Monica Beltran Perchez” • Edye G. honors “My sister” • Tara A. honors “All the folks who struggle with Sjögren’s without effective medications to control their disease” • Angela U. honors “My Mom” • Deanna M. honors “Myself” • Jenny O. honors “My Mom Barbara Obloshny” • Tiffeny B. honors “All us warriors” • Janet S. honors “Janet Sharp” • Gloria B. honors “All sufferers” • Michele M. honors “Myself” • Mariann H. honors “Mariann” • Nancy B. honors “Phyllis Breese” • Melinda D. honors “Me” • Dianna J. honors “Myself” • Michele D. honors “Claire Dungan” • Dawn B. honors “Myself Dawn Bennett I have Sjögren’s” • Gidget B. honors “Sherry Waggoner” • Robin W. honors “All of us that suffer” • Jennifer M. honors “Jennifer Mallery” • Tarina J. honors “Myself” • Lisa P. honors “Lisa Bellingrath” • Becky M. honors “Becca” • Lynne P. honors “Me!” • Robin T. honors “My mom” • Cecilia G. honors “Myself - Cecilia Gonzalez” • Cherlnell L. honors “Cherlnell Lane” • Meri D. honors “All those battling the disease.” • Cynthia R. honors “Myself” • Linda M. honors “Myself” • Gina C. honors “Gina” • Nancy M. honors “Nancy” • Sharon P. honors “Myself” • Jen L. honors “Myself” • Paula S. honors “Self” • Jen L. honors “Jen Lucano” • Leticia R. honors “Carmen Vietmeyer” • Adrianna V. honors “Carmen Vietmeyer” • Wendy M. honors “Wendy Mizell” • Kisha C. honors “All Sjögren’s warriors” • Debra B. honors “Myself” • Angela R. honors “Angela Railey” • Antwaun S. honors “Dolores Morrison” • Catherine D. honors “Cathy DeVous” • Penny T. honors “Mithu Maheswaranathan, MD” • Miranda M. honors “My 16 yr daughter - Karissa” • Monay S. honors “Myself” • Don and Mary S. honors “Beth Chase” • Doris T. honors “Sondra Laughlin” • Robin F. honors “Anyone that is feeling bad with Sjögren’s” • Ronda C. honors “Myself” • Lucy B. honors “Lucy Bryand” • Annette O. honors “Those struggling” • Katie L. honors “Myself” • Natalie K. honors “My husband. My sisters, Robyn and Regina. And my very dear friends and Sisters-in-Christ!” • Tramaine G. honors “Tramaine Glass” • Tiffani D. honors “My mom Bonnie” • LaKeshia J. honors “LaKeshia Jenkins” • Traci L. honors “My mom Ollie Clemons” • Robin W. honors “Everyone with Sjögren’s” • Shannon H. honors “My grandmother, Doris Thibeault” • Carol K. honors “Myself” • Ashley B. honors “Ashley Beck” • Kellie M. honors “All who have Sjögren’s disease” • Diana B. honors “Members of the WI Sjögren’s Support Group” • Sandra C. honors “Myself, Sandra Carlos” • Katy H. honors “Everyone who is affected.” • Pamela W. honors “Myself” • Scott L. honors “All people, old and young and in between, who deal with Sjögren’s every day.” • Judy L. honors “Kara Wada, MD” • Gloria C. honors “Patricia Blasi” • Rusty F. honors “Me” • Alice G. honors “Kathy Overtoom” • Joan A. honors “Carla Croteau” • Jennifer G. honors “Jennifer Gordon” • Donna G. honors “All Sjögren’s warriors including myself” • Jan S. honors “My sister” • Laurie K. honors “Myself” • Zuzia W. honors “Myself” •

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honors "Angelina Jimenez (my mother)" • Gloria W. honors "All who suffer from this miserable disorder." • Diana P. honors "Myself" • Marie H. honors "Bernadine Taylor" • Lisa W. honors "Myself" • Joy M. honors "Me" • Kathy W. honors "Myself" • Valorie J. honors "Myself" • LaTisha C. honors "LaTisha Clark" • Sarena H. honors "Sarena Heath" • Tara B. honors "Myself" • Julianne M. honors "All who have Sjögren's" • Jacqueline K. honors "Myself" • Debbie B. honors "Everyone suffering with Sjögren's" • Jenni B. honors "Myself" • Denise W. honors "Terry Wilson" • Debbie H. honors "Myself" • Amy S. honors "Myself" • Cindy C. honors "Cynthia Hernandez" • William S. honors "Myself" • Key J. honors "Myself" • Tracie W. honors "Tracie" • Demetria M. honors "Demetria Madison" • Neiko S. honors "Everyone" • Stephanie K. honors "Stephanie Kimbro" • LaVonda S. honors "Myself" • Tina J. honors "Tina M. Jones" • Phyllis J. honors "Phyllis Marie" • Sally A. honors "My son Jesse" • Susan M. honors "Myself" • Selly I. honors "Myself" • Kathleen S. honors "Mary Gibbons" • Audette J. honors "All the warriors" • Penny M. honors "Penny Hagy" • Reita C. honors "Jerry" • Gabi M. honors "Myself" • Angeles C. honors "Everyone who has it" • Paul H. honors "Jodi Heyden" • Belinda A. honors "Me" • Kathryn S. honors "Debra L. Kain" • LynnAnn C. honors "C" • Rebecca S. honors "Myself" • Jacqueline B. honors "Myself" • Jo A. honors "To all the people before me that have been diagnosed with Sjögren's!!" • Kristi B. honors "My doctors who recently diagnosed me." • Glori C. honors "Myself" • Julie B. honors "My mom" • Judy J. honors "Dr. Kristin Gowin" • Shubhangi G. honors "Myself and Dr. S. Gupta" • Kristin G. honors "Kristin Galvin" • Janie E. honors "Me" • Amy S. honors "Myself" • Amanda F. honors "Amanda Hudson" • Cheryl F. honors "Myself" • Lori C. honors "Brianna Crawford" • Jenalee M. honors "Myself!" • Sevi M. honors "Me" • Trish P. honors "Myself" • Lori M. honors "Myself" • Don M. honors "My daughter and anyone else afflicted with that autoimmune disease" • Ruth O. honors "Chuck" • Kathy G. honors "Our daughter Kathleen" • Shanna G. honors "Myself" • Mary Y. honors "Alice J. Higg" • Jennifer P. honors "Myself and my children" • Destiny S. honors "Destiny Simons" • Kathy A. honors "Everyone who lives with Sjögren's" • Lisamarie M. honors "Lisa" • Connie R. honors "Connie Lord" • Jean S. honors "Myself" • April C. honors "April" • Ashley C. honors "Myself" • Rebecca P. honors "Rebecca Patterson" • Janette G. honors "Everyone suffering from this disease" • Paula B. honors "My daughters" • Lorene A. honors "Mira Armstrong Bakken" • Chrystal B. honors "Myself" • Debra M. honors "Myself" • Ilia A. honors "Myself" • Mylina S. honors "Myself" • Rosiland B. honors "Rosiland" • Melissa L. honors "Myself!" • Kathy G. honors "Kathy" • Flavia K. honors "Karina Romero" • Diane K. honors "Diane Kuzmicki" • Tammi H. honors "Myself" • Jenny B. honors "Jennifer Bowling" • Carmen S. honors "To all of the ladies" • Jennifer B. honors "Patricia and Buppi" • Loretta S. honors "Myself" • Carla P. honors "Everyone" • Genny P. honors "Myself" • Andrea M. honors "Me" • Tawney S. honors "to all of us" • Anamarie B. honors "My husband Gary, who's no longer with me" • Vickie L. honors "Vickie" • Allison H. honors "Allison Hurst" • Colleen W. honors "Kim Mingus" • Robin A. honors "Robin Avidor" • Kelly L. honors "Me" • April D.

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