

New Crowell & Moring Int'l President Shares 'Story Of Hope'

By Tracey Read

Law360 (February 9, 2024, 8:02 AM EST) -- Geralyn Ritter has spent her career being a passionate advocate for patients and an agent for change as a healthcare leader.

On Monday, Ritter became the new president and CEO of Crowell & Moring International LLC, the law firm's global public affairs affiliate.

But eight years ago, she was not expected to live — let alone lead a company that helps clients shape the policy, regulatory and commercial landscape in markets across Asia, the Americas, Africa, the Middle East and Europe.



Geralyn Ritter

"I am a trauma survivor," Ritter said. "I was on an ordinary business trip May 12, 2015, to D.C. from my home in New Jersey and on the way home, Amtrak 188 derailed [outside Philadelphia] going 106 miles an hour on a curve designed for a maximum of 50. Eight people were killed in the tragedy, hundreds injured, and I was severely injured."

Ritter was thrown from the train with such severe force that she suffered dire injuries to her chest, her abdomen and her pelvis.

"My family was told that they needed to gather to say goodbye, that I was very unlikely to survive," she said.

Ritter spent two and a half years on total disability and she had about 30 different surgeries.

"I did survive. And I have a perspective that I think makes me an emphatic and empathetic leader," she said.

Ritter most recently worked as executive vice president of corporate affairs, sustainability and environmental, social and governance at Organon, a global healthcare company that spun out of Merck & Co. Inc. three years ago.

She's also worked in the executive offices of Merck, the Pharmaceutical Research and Manufacturers of America, and the Office of the U.S. Trade Representative, and is a former trade counsel for Covington & Burling LLP.

A Stanford Law School graduate, Ritter holds a bachelor's degree from Duke University and a master's

degree in international economics and European studies from Johns Hopkins University.

She is also a sought-after public speaker, patient advocate and author. In 2022, she published "Bone by Bone: A Memoir of Trauma and Healing," her account of the Amtrak derailment and her long recovery in the years since.

Ritter spoke recently to Law360 Pulse about her new role and how trauma has shaped her. This interview has been edited for length and clarity.

You wrote a book that delves into the long-lasting impact of sudden trauma, excruciating pain, PTSD, depression and opioid dependence. What made you go public with your experience?

I wrote my book at the urging of my CEO at the time, Ken Frazier. I was describing one of my experiences to him and he said, "You have to write a book." And I said, "Oh, Ken, I don't want people to think that I'm somehow bragging that I'm strong," and he said, "No, no, no. Your story can help other people." And I thought about it and it kind of clicked. I thought, if nobody needs this book, that's great. But I'm gonna put it out there as a story of hope, and if somebody takes something from it, then at least one good thing came out of the accident, and it's not just this black hole of pain in my life. I think of it as kind of paying it forward. The book is brutally honest. That was my deal with my husband. Warts and all, put the real story out there. Because it doesn't help anybody if you paint this beautiful [picture]. I just dug in.

All the proceeds go to the American Trauma Society and the Trauma Survivors Network. I didn't go into it as a money-making type of thing. And I have pledged publicly and in the book that all proceeds go to trauma medicine and supporting trauma survivors.

I'm fortunate that I don't seem to have the biology or the genetic makeup to have been addicted [to opiates]. I didn't have the psychological cravings that really characterizes addiction. But 100% of people that are on massive doses of Fentanyl and Oxycontin and Oxycodone for six, nine months like I had to be, your body does become accustomed, and you do have to go through a painful period of weaning off those drugs very, very slowly. So that was part of my journey as well.

One of my injuries was I broke all my ribs in multiple places. They plated my ribs and rebuilt a rib cage with metal plates, and you know, the thing with your ribs is, you have to breathe. I mean, I literally could not have breathed without some significant pain relief. My pelvis was broken in half, the right side was not connected to the other side. I had big bars protruding from my body holding the two sides together. So yeah, I had to have some relief just to exist.

Can you tell me a little more about what CMI does and what your role will be?

One of the reasons I'm so excited is they do a wide range of public policy work — advisory work with clients, helping clients analyze and understand the impact of a new policy and new regulation that might be coming out. And they also do a lot of advocacy work helping to shape policy.

For example, there was a recent project where CMI worked with a number of clients in helping the government of Indonesia craft a new plan for cervical cancer elimination. It's a fantastic example of really impactful public policy that's important for our clients, but also really helps people — real people. And so, policy analysis, policy advising, policy advocacy and alliances. Sometimes, when you're one particular company, the task is too big to do alone. You need to ally with other companies in the

industry, or maybe cross industry. And so we help companies with coalition building. A lot of times we're stronger together, and so forming those alliances with others that have similar interests is a real sweet spot for CMI. It's something they've done very successfully for a long time.

You've done a lot of work with maternal mortality. What other causes are you passionate about?

Women's health, generally, is terribly neglected. There's really no other way to put it. If you look at the record of new innovations and new treatments approved for so many conditions — preeclampsia, endometriosis, polycystic ovary syndrome, premature birth, menopause — something that almost every woman will go through — and we treat it almost as a joke. Ha, ha, ha, she's having a hot flash.

And so women's health really has been a cause near and dear to my heart for a long time. That's one of the reasons I was so excited when Merck decided to spin off its women's health products into a separate company, precisely because they weren't getting the time and attention they deserved within the big overarching Merck, which was so heavily focused on oncology. I raised my hand to go with the spin because that opportunity to focus in on women's health was something that I thought was particularly important, particularly meaningful, and I hope that I can bring not only the business perspective, but also a real passion for healthcare solutions. And that includes innovative financing solutions, that includes health tech, but a real focus on good public policy.

What healthcare trends are you seeing in the industry?

One of the things that I find so fascinating about healthcare is that there are no easy answers, right? No government, no country out there says, "Yep, our healthcare system is perfect." Everybody is struggling and trying to balance innovation and affordability. Policy and healthcare is difficult. It's complicated. Whether you're talking about the U.S. or Indonesia or China or Asia, the challenges in some ways are similar. But they're also different from country to country.

Some countries, in the field of women's health, are worried about declining fertility rates and a very low birth rate. A lot of Asian countries are in that position of being concerned about their demographic resilience. Others may have a different sort of problem where they have very high unintended pregnancy rates, and the impact that can have on a woman and a family's life.

So the trend I see is that there is a growing interest in innovative financing in healthcare, alternative financing vehicles, whether that means new means of public financing, or also in the private sector. You have new funders, development banks, private equity in some instances getting into the healthcare space, and I think that's a positive thing. I think we need to look for innovative financing solutions to some of the challenges facing societies around the world.

With all the horrible things you've endured, does that make you a better attorney, patient advocate and leader?

I don't think you have to go through something like that to be a good leader. But I do think it makes me a stronger leader and a stronger manager. I bring a perspective on time and purpose. After a couple of years of recovery, being in and out of the hospital, my friends asked me, "Why are you going back to the corporate world?" And it's because I believe in what we do. At the time, I worked at Merck, and they'd just come out with an incredibly innovative new cancer treatment. We were saving hundreds of thousands, if not millions, of patients' lives.

I believe in what we do. At the time I was president of the Merck Foundation, I did a lot of charitable work around the world. And I thought, this matters. That perspective on the purpose of what we do is something that I can also bring to CMI. Let's never forget why we're doing what we're doing. What is the benefit for patients? What is the benefit in terms of good policy? You know, helping people achieve their potential. We have to ground ourselves in that purpose. Never forget why we're advocating for something, what it really means for our clients, for our patients. It matters. It matters.

--Editing by Emily Kokoll and Michael Watanabe.

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