

ST. JUDE inspire



SUMMER 2024

SPREADING JOY

At St. Jude, Misheel learned
the best medicine is doing
good for others.



Inspiring survivors

Three women inspire others
through their perseverance

Tri Delta

Women's fraternity celebrates
\$100 million commitment to St. Jude

Hope in Guatemala

St. Jude partnership helps
raise survival rates abroad



Walk/Run for hope

Join a team or register as an individual for a 5K walk or run during Childhood Cancer Awareness Month to help support the lifesaving mission of St. Jude: Finding cures. Saving children.® Support the kids of St. Jude when you sign up for your local St. Jude Walk/Run event: stjude.org/walkrun





Whether you're a St. Jude Partner in Hope, volunteer or remembering St. Jude Children's Research Hospital® in your estate plans, giving back to a cause larger than self is something that can bring joy to you and others.

Misheel knows that feeling first-hand.

She came to the United States with her family from Mongolia, settling in Illinois before they received the devastating news that Misheel, only 11 years old, had a type of cancer called mixed germ cell tumor. She had a tumor infiltrating her pituitary gland, as well as two other spots in her brain.

Misheel's father is an acrobat with the UniverSoul Circus. Her godfather is a clown – an actual clown – known as Onionhead.

Joy is her birthright.

Spreading that joy, it turns out, is part of her healing process as well. Misheel makes balloon animals and gives them away to fellow St. Jude patients and staff. Throughout the halls of St. Jude, joy is delivered one balloon puppy or flower at a time.

As you'll read in this issue of St. Jude Inspire, the same kindness, generosity and selflessness modeled by a precocious 12-year-old patient is what propels this lifesaving mission around the world and into the future.

And it spreads real joy, as you'll see with supporters like David McKinney who supports St. Jude through a myriad of channels – workplace, church and fraternity – and is the north star for his 6-year-old son, showing him what caring for your neighbor looks like. We couldn't be more grateful.

We celebrate Tri Delta for reaching \$100 million for our mission – the first nonprofit to reach this vaunted milestone, and the highest fundraising Greek organization for any nonprofit. (Spoiler: Tri Delta has graciously committed to another \$100 million!)

And we're grateful for the continued support of Domino's which recently committed to raise a total of \$300 million by 2034. Read more about that in the fall issue of St. Jude Inspire.

The generosity of individuals and organizations alike means a second chance at life for kids like Misheel, and increased equity in healthcare for our global partners like Unidad Nacional de Oncología Pediátrica (UNOP) in Guatemala, which you'll read has made significant strides in childhood cancer survival rates thanks to a partnership with St. Jude. I recently visited them and came away in awe of what they have accomplished.

A second chance at life. Real joy spread through our hallways and the world. Meaningful impact through your support.

And what do you receive? Well, I hope and pray you feel the same sense of warmth and joy as my friend Misheel who says, "I don't know why, but I just like seeing people's faces happy."

Richard C. Shadyac Jr.
President and Chief Executive Officer, ALSAC

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ST. JUDE inspire

VOL. 6 - ISSUE 3

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Special thanks to St. Jude President and CEO James R. Downing, M.D., and St. Jude Department of Strategic Communication, Education and Outreach.



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You can help ensure families never receive a bill from St. Jude for treatment, travel, housing or food – so they can focus on helping their child live. Donate today at stjude.org/ImpactGiving

Homecoming for ANGELIQUE

After a career as an oncology nurse for veterans, this pediatric cancer survivor returned to St. Jude to raise funds for the mission.

By **Betsy Taylor** - ALSAC

Long before becoming a nurse herself, Angelique C. Graham Harlan knew exactly the kind of nurse she wanted to be. She wanted to be like the nurses at St. Jude Children’s Research Hospital®, who, when she was diagnosed with blood cancer in 1988 and referred to St. Jude, sat with her and explained what blood cancer meant and what each chemotherapy medication did.

The high school honors student and voracious learner wanted to know everything. She was 15 years old, and they treated her like a peer, she said.

Angelique also wanted to be a nurse like her mother. When Angelique developed a strange bruise on her left thigh after dance practice, her mother sought help from her primary care physician. Her mother’s

presence of mind and her swiftness in getting care surely helped save Angelique’s life.

It was her mother who held and calmed her through her first bone marrow biopsy and lumbar puncture. It was her mother who – with the St. Jude nurses – shaved Angelique’s head bald with gentleness after her hair began to fall out from chemotherapy.

“No tears with it because I’d been prepped. I had been told what to expect, so I knew it was coming and wasn’t afraid,” said Angelique. “Plus, I’d seen all the other little kids, and I knew it would grow back even better than it was.”

Angelique said her strength came from the long line of strong women

and men in her family. A proud line of educators mostly, who thrived on information and who had, she said, “a massive amount of resolve.” It also came from the sense of invincibility that all teenagers have, said Angelique, and it came from her faith in God and St. Jude.

Angelique’s career as a nurse took her all the way to the Walter Reed Army Medical Center in Bethesda, Maryland, where she worked for years as an oncology nurse for active-

duty veterans, including some of our nation’s highest leaders. “Everything I knew of being a cancer patient [at St. Jude], I used in treating my adult, active-duty and retired professionals that had cancer,” said Angelique. “I went through everything with my patients, told them about every medication, so they could be advocates in their own care.”

Angelique moved back to Tennessee not long before her beloved mother passed away in 2021. After that loss,

“I had been told what to expect, so I knew it was coming and I wasn't afraid.”

– St. Jude cancer survivor Angelique

she made a bold career change. Angelique now works for ALSAC, the fundraising and awareness organization for St. Jude. “It really is a full circle on the God story,” said the married mother of two.

Still, Angelique had a promise left to keep.

“I promised Mom that I would finish my education in her honor, and I did,” said Angelique.

In 2023, Angelique graduated summa cum laude from Samford University’s Moffett & Sanders School of Nursing with her doctorate in nursing practice – and felt her mother’s spirit.

“I’m a daddy’s girl, but Mommy was my everything.”



Your donation allows pediatric cancer survivors like Angelique to realize their dreams.
stjude.org/ImpactGiving

EMILY

defies expectations

St. Jude cancer survivor sparks kids' love for adaptive sports.

By **Betsy Taylor** - ALSAC

On Sept. 15, 2008, one of the world's best wheelchair basketball players – Emily Hoskins of Team USA – made her way into the locker room of the National Indoor Stadium of Beijing, China, and began to scream. After all the years of scrappiness and striving, she had earned her chance to play – first at the 2004 Paralympic Games in Athens and now at the 2008 Paralympic Games in Beijing. Her team had just beaten Germany to win the gold, and she felt euphoric.

“It was the most wild, energetic moment of my life just shooting out of me and just screaming,” she said.

Emily was born paralyzed from the waist down, her spine severed by neuroblastoma tumors. At 3 days old, she traveled with her father from Illinois to Tennessee, having received a referral to St. Jude Children's Research Hospital.

At St. Jude, she underwent chemotherapy and surgery. By age 7, she had completed treatment, but returned to St. Jude for checkups until she turned 18.

Emily never knew a time when she was able to walk unassisted, so it wasn't something to overcome. It was just what was. Her parents treated her the same as her two brothers and encouraged her to try new things. At 14, she discovered wheelchair basketball and fell hard – literally at first. But she had a work ethic and was determined to stay in the game.

Today, in addition to being a child therapist, Emily coaches kids'

Emily never knew a time when she was able to walk unassisted, so it wasn't something to overcome. It was just what was.



wheelchair basketball for the Music City Thunder team just outside of Nashville, Tennessee.

“I've been that player who sits on the bench the entire game and does not play,” said Emily. “I have also been that player who plays 40 minutes every game all tournament and never comes out and everything else in between. And I tell my kids that a lot.”

She urges her players to try as many adaptive sports as possible in case something sparks. Like it did for 17-year-old Zion Redington, who did

not believe sports were for him until Emily showed him what was possible. Zion began playing wheelchair basketball but found his true passion with wheelchair rugby, which means Emily is not Zion's coach anymore. Yet, in all the ways that matter, Zion insists she always will be.

“Even though she loves wheelchair basketball, going past that, she loves the people more. She wants them to exude in life, to be independent,” said Zion. “We can do all these different things that people would never think that a person with a disability would ever be able to do. She really wants that for all her athletes.”

This summer, Zion will travel to Paris, where he and his teammates will represent the USA in wheelchair rugby at the 2024 Paralympic Games.

When Zion and his family learned he had made Team USA, his first call was to Emily.

After all, said Zion, “She opened me up to life.”



Your support helps allow childhood cancer survivors like Emily live to inspire others. stjude.org/ImpactGiving

Daily fulfillment for

SUREKHA

St. Jude cancer survivor now helps other cancer patients.

By **Linda A. Moore** - ALSAC

Surekha Murti-Fehr was just 2 when she was diagnosed with acute lymphoblastic leukemia (ALL). Her earliest memories are of her treatment at St. Jude Children's Research Hospital, losing her hair and watching television with her father, Gopal Murti, Ph.D., the retired director of Scientific Imaging at St. Jude.

She was in treatment for five years.

Since her treatment for cancer, she finished school, got married and had children. And she never forgot the gift of life she was given at St. Jude.

She had thought about becoming a doctor and wanted to work at St. Jude. But life had other plans. She met her husband while an undergraduate in East Tennessee. They married after she earned a doctorate in physical therapy and settled down there.



"I really like physical therapy because of the one-on-one you have with the patients," said Surekha.

She went to work at a private practice helping orthopedic patients with a broad range of musculoskeletal conditions.

But, during the pandemic the certified lymphedema therapists left the practice where she works.

A certified lymphedema therapist works with patients experiencing swelling of the lymph system, which helps the body fight infections. Her

boss asked her if she'd train for that work and promised that if she didn't like it, she could return to orthopedics.

It was fine, Surekha said, but she wasn't really "digging it."

Then a local medical provider asked if she could recommend a lymphedema therapist for their patients. She said she'd take them.

They sent her cancer patients.

"Basically, it turned into my whole profession. So, now my practice is only treating breast cancer patients every single day. It's really cool," Surekha said. "Something I didn't think I was going to

like at all turned into this and now my dream of helping cancer patients has finally come full circle."

Gopal and his wife, Aruna Murti, are proud parents, but they will never forget how worried they were.

"When she got leukemia, it just killed me. I did not think she was going to survive," Gopal said.

Today, ALL patients treated at St. Jude have a 94 percent survival rate. That number was significantly lower when Surekha was diagnosed in the early 1980s.

After her treatment, her parents were told to watch for side effects from the treatment that could impact her physical development and delay her intellectual development. They warned her teachers, too, Gopal said.

Instead, Surekha flourished.

"I still worry about her even now," Gopal said. "But I keep it all secret. What she has done is remarkable. Surekha has done exceptionally well at everything."

He has three daughters and four grandchildren, but Surekha is special.

"I love all my children, but Surekha is my jewel," he said.

Surekha and her college sweetheart, Robert, have two children, 9-year-old Mohan and 6-year-old Jaya. Her children know she had cancer, but they're still too young to fully understand what that means.

She doesn't watch them like a hawk, worried about cancer. But her parents do.

"We do. We watch everybody, the neighbors' kids, any kid that we know we always watch," Gopal said.

Surekha no longer lives in Memphis, but said if she were home, she'd want to work at St. Jude.

"St. Jude saved my life," she said.

"St. Jude saved my life."

– St. Jude cancer survivor Surekha



You can help allow St. Jude cancer survivors like Surekha to excel in life.
stjude.org/ImpactGiving

Thankful for Tri Delta

Tri Delta reaches \$100 million milestone and pledges more for St. Jude.



By **Karina Bland** - ALSAC

Tri Delta has raised an astounding \$100 million for St. Jude Children's Research Hospital, becoming the first nonprofit organization ever to reach this extraordinary milestone.

Not only is Tri Delta the highest fundraising nonprofit organization for St. Jude, but it is also the highest fundraising Greek organization for any nonprofit.

It's how the women of Tri Delta operate.



1888

Tri Delta was founded in 1888 as a society that would be "kind alike to all," dedicated to philanthropy and service. Today, the organization has 20,000 members in more than 130 collegiate chapters across the U.S. and Canada, and more than 225,000 members in 222 alumnae chapters worldwide.

1947

Tri Delta's commitment to fighting childhood cancer dates back to 1947 when 13 alumnae chapters in southern California organized a luncheon to help fund research at a Los Angeles children's hospital. That success inspired similar events across the country. At its 1974 Convention, Tri Delta officially declared childhood cancer as its philanthropic focus.

1999

In 1999, Tri Delta named St. Jude as its national philanthropic partner. Enthusiastic and driven from the start, the Tri Deltas pledged in 2002 to raise \$1 million for St. Jude by 2006. In 2005, a year earlier than expected, Tri Delta hit that milestone to endow the research hospital's teen rooms.

2006

In 2006, Tri Delta made a second commitment – to raise \$10 million in 10 years to name the patient care floor in the Chili's Care Center. They did it in just four years.

2010

In July 2010, Tri Delta announced its third commitment, an aggressive challenge to raise \$15 million in five years to name the Specialty Clinic in the patient care center at St. Jude. The Tri Deltas pulled it off in just three-and-a-half years.

2014

Tri Delta made a fourth commitment in 2014 to raising \$60 million in 10 years – the largest single commitment ever made by a St. Jude partner at the time. Again, Tri Delta pulled it off – and two years early, in 2022. In recognition, the first short-term patient housing facility on the St. Jude campus was named "Tri Delta Place."

2024

Tri Delta wasn't done. Its next goal: raise a remarkable \$100 million by summer 2024. In June, Tri Delta and St. Jude announced the organization had hit the \$100 million milestone, solidly marking the 25th anniversary of its partnership with St. Jude.

2038

Now, Tri Delta has pledged to raise an additional \$100 million for St. Jude by 2038 to mark the organization's 150th anniversary.

You can learn more about the Tri Delta partnership with St. Jude at stjude.org/tridelta

Balloons from the HEART

St. Jude patient Misheel finds joy in creating balloon art for her doctors, nurses and other kids with cancer.

By **Betsy Taylor** - ALSAC

Picture 12-year-old Misheel, bald from chemotherapy, pulling up a chair on the second-floor inpatient unit. A younger child shouts, “The balloon girl!”

Suddenly, she’s surrounded by other children. She reaches into her backpack for colorful balloons and inflates and twists them into a bunny, then a unicorn, then a giraffe, then a butterfly.

Then she gives them all away.

During Misheel’s nearly seven months of treatment at St. Jude Children’s Research Hospital®, she learned to make balloon creations and gifted them to her comrades in cancer treatment.

She took requests. If she didn’t know how to make what a particular child wanted, she would look online for video tutorials until she figured it out.

One day her mom, Undrakh, posted to an online support group of St. Jude parents that if their children were having a hard time, Misheel could make them whatever they wanted with her balloons.

“Ever since then, the requests started rolling in,” said Undrakh.

Undrakh heard stories of children who loved princesses or of kids who wanted a monkey climbing a tree or a teddy bear. There were kids who were missing a favorite pet – could she make a dog for them?

All these St. Jude parents who just wanted to make their kids smile, and Undrakh’s daughter could do that for them.

“I don’t know why, but I just like seeing people’s faces happy,” said Misheel.



“I don’t know why, but I just like seeing people’s faces happy.”

– St. Jude patient Misheel

Your child is strong

Picture the same little girl in a hospital room at St. Jude hooked to a chemotherapy line, saying to Undrakh, “Don’t you worry, Mom. I’m OK.”

Misheel never complained, said Undrakh, not even on the “really hard days, especially with the lumbar puncture when she couldn’t even move.”

Undrakh worried she minimized her pain, so she sometimes begged Misheel, “What do you feel? I’m here for you to listen to you.” Only then would Misheel admit to her mom, “It’s hurting.”

“Those days were hard,” said Undrakh, “but she tries to find a way to make it better.

“She’s like, ‘It’s OK because you’re trying to help me.’ That’s who she is. She just wants to show the brighter side of everything and just wants to be happy.”

Misheel was 11 years old in the summer of 2023 when her parents noticed no matter how much water she drank, she still felt thirsty. At first, they thought it was a healthy habit, far preferable to drinking juice or soda. But her thirst was never quenched. Misheel began excusing herself to go to the restroom so frequently they knew something must be wrong.

Undrakh took Misheel to the family doctor near their home in Illinois. Tests revealed a tumor infiltrating Misheel’s pituitary gland, as well as two other spots in her brain. She was diagnosed with a type of cancer called mixed germ cell tumor.

Soon, her parents obtained a referral to St. Jude.

Through chemotherapy and radiation, Misheel often paused to thank the doctors and nurses and other St. Jude staff.

She particularly bonded with the valet personnel who, she told her mom, had the hardest job of all, working outside in whatever kind of weather and always staying so pleasant and kind to the families. How could she feel bad when there were so many wonderful people helping?

So, she made balloon creations for the St. Jude staff, too, and would say to them, “There’s a lot of different colors because you all added color to my life by healing me.”

Her balloons often came with these sorts of pep talks – the right words at the right time. Like when she saw a man crying in the hallway at St. Jude with his family, and she went to comfort him.

“It’s going to be OK,” said Misheel. “Do you want me to make you something to feel better?”

He told her yes.

It was only later that Undrakh learned that the man had been grieving back-to-back tragedy: His father had died one day, and the next day, his preschool-aged child had been diagnosed with cancer. Now, here they were at St. Jude.

“You need to be strong for your child,” said Misheel. “Your child is strong, but he or she is even stronger with you, so be strong.”

With that, Misheel handed him a Ninja Turtle.

She ran with it

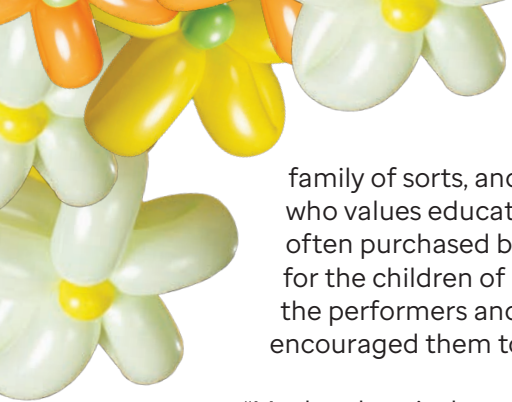
Now picture Misheel listening intently to the older man sitting next to her at St. Jude, watching the 82-year-old closely as he shows her how to create the first four balloons she will ever make: a flower, a sword, and two types of dogs.

This is Robert Dunn, her godfather. On the circus stage, his name is Robert “Onionhead the Clown” Dunn, although today he’s not performing.

Misheel knows Dunn through UniverSoul Circus, where her father, Gantulkhurr, is part of an acrobatic teeterboard troupe from Mongolia called The Nomads.

When Misheel and her family moved to the U.S. from Mongolia in 2019 for her father’s job, she didn’t speak English. It was a whole new language and culture. But a circus is a traveling





family of sorts, and Dunn, who values education, often purchased books for the children of the performers and encouraged them to read.

“My daughter is the one who finishes the book and talks to him about the book, and she would always have a conversation with him,” said Undrakh.

Dunn and Misheel’s family live hundreds of miles from each other, and Misheel and Dunn are separated in age by several decades, but that didn’t matter. She’d finish a book, and he’d send her another one.

“They talk on the phone about them. They play chess on the phone as well,” said Undrakh. “They’re like same-age people.”

St. Jude patient Misheel hands out a balloon and a hug to St. Jude employee Crystal Smith while making rounds during her clinical appointments.



Dunn nicknamed Misheel “Da Professor.”

“I gave her a book of about 90 quotes, and she would read the quote, google it, then read the biography, then she’d print the biography out and put it in the back of the book,” said Dunn. “So, she’s very good at learning.”

When Misheel was diagnosed with cancer, “It tore me up,” said Dunn. “It hurt me so much.”

So, he visited her family at St. Jude soon after she started treatment.

To help cheer her up, he taught her how to make a few balloon creations, knowing it might spark something.

“She took it from there and ran with it,” said Dunn. “She’s better than me at making animal balloons now.”

Misheel had come to the U.S., a strange and unfamiliar place, and Dunn showed her family friendship.

Misheel pays his kindness forward every day – or every time she reaches into her backpack for another balloon.



Your help offers hope to patients like Misheel and allows them to keep spreading joy to others. Donate today at stjude.org/ImpactGiving



What will your legacy be?



St. Jude patient Logan, pictured with her father

August is National Make-A-Will Month.

When you designate a legacy gift to St. Jude in your will or estate plan, you gain the opportunity to join a unique group of supporters as a member of the Danny Thomas – St. Jude Society. This membership includes an invitation to our annual DTSJS event, exclusive mailings, engagement with a personal St. Jude representative and more.

Have you left St. Jude in your will or estate plan? Let us know so that we can celebrate and recognize your commitment to the kids of St. Jude.

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ST. JUDE EXPLORES CURATIVE THERAPIES FOR SICKLE CELL DISEASE

I got an MD and a PhD degree at the University of Pennsylvania, and then I went to Boston Children's Hospital and Harvard University, where I trained in pediatrics and pediatric hematology and oncology. And after some time there, I moved back to the University of Pennsylvania and the Children's Hospital of Philadelphia, where I stayed for about 10 years before I came to St. Jude.

I spent my career studying red blood cell development in the lab while seeing patients with blood disorders, many of whom had sickle cell disease. I came to St. Jude in July 2014 because I saw it as an opportunity to apply my research for the good of patients and in a greater capacity than I could do at most other places.

Q: What sets St. Jude apart from other children's research hospitals?

A: One of the reasons that I came to St. Jude was to expand my research from being mostly basic science to helping patients. And this involved two things that are required to "move the needle". First, I was offered the opportunity to lead a multidisciplinary effort that includes many talented individuals, and second, I was offered the required financial resources. Research that impacts patient care is expensive, especially developing and conducting clinical trials.

So, when I came to St. Jude, I did a few things with the goal of expanding our research in sickle cell disease. One thing I did was to change my own laboratory so that about half of the effort was focused on work that could eventually help patients.

I also began to recruit into our Hematology Department faculty and staff who could contribute to our effort to develop transformative therapies for sickle cell disease. For example, I recruited experts in genome editing and gene expression

in red blood cells. I collaborated with Dr. Stephen Gottschalk (Chair, St. Jude Department of Bone Marrow Transplantation & Cellular Therapy) to recruit a faculty member with interest in bone marrow transplantation and gene therapy for sickle cell disease. In this way, I built a critical mass of multidisciplinary experts who could work within the outstanding St. Jude infrastructure to provide care and research for patients with sickle cell disease.

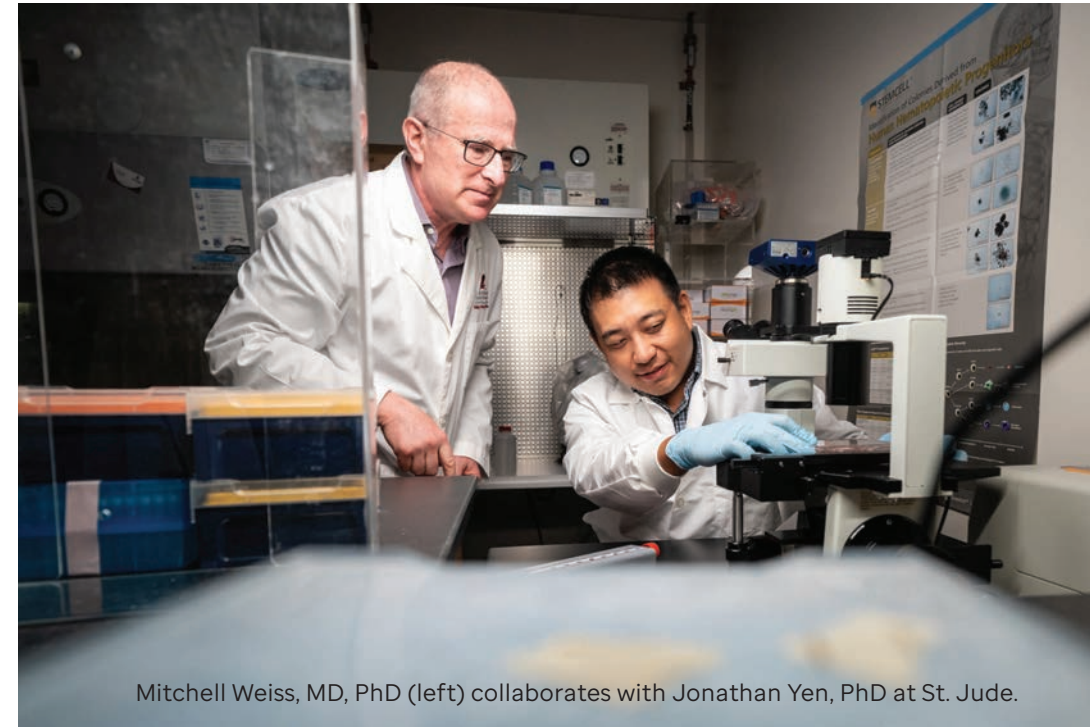
Q: Why assemble this really impressive group of people to work on sickle cell disease, whether in the clinic or in labs?

A: Well, this is a terrible disease. Patients begin to suffer as children frequently with attacks of terrible pain that require going into the hospital. Sickle cell disease is associated with a shortened life span because there's chronic organ damage that gets worse over time. The average mortality age of people with sickle cell disease in the United States is about 45 years old.

Most patients also experience serious health problems, including stroke, heart disease, kidney disease and lung disease. Sickle cell patients represent an underserved community, although there is a growing number of health care professionals who want to improve the care of those patients and develop new treatments using cutting edge science.

Q: What is St. Jude doing to help generate more options for treatment and care for sickle cell patients?

A: We have a program called the Sickle Cell Disease Collaborative Research Consortium, which funds scientists from across the U.S. to perform synergistic collaborative studies on sickle cell disease. Our consortium has experts in gene therapy, genome editing, red blood



Mitchell Weiss, MD, PhD (left) collaborates with Jonathan Yen, PhD at St. Jude.

cell biology and mechanisms of gene expression who are working together to advance treatments of sickle cell disease. We've been very successful at a basic science level.

For example, we have had several publications on new approaches to use genome editing to treat sickle cell disease and now we are working to adapt those approaches to clinical trials.

This is something that we couldn't have done without the help of St. Jude and our donors because bringing together expert researchers from across the country to adapt their research toward a common goal is expensive. St. Jude donor funds are supporting this research and these collaborations.

Q: What are the implications of these collaborations in the next three, five, seven years? What could it lead to?

A: Well, ideally, this work will lead to improved treatments for sickle cell disease, including genetic therapies and better medications.

The early data on genome editing look very promising. But we need many more years of long term follow-up to know that and to be sure that there won't be long-term toxicities. Looking forward, some of the consortium's collaborative discoveries [about the regulation of hemoglobin expression] have illuminated new strategies for creating more effective drugs, and I expect they will be further explored.

Q: What are the implications of the work you're doing on a global scale?

A: Sub-Saharan Africa has the largest burden of sickle cell disease in the world and the highest rate of infant mortality from the disease. We can help those patients greatly now by doing very simple things like newborn screening for sickle cell disease, immunizations, prophylactic antibiotics and an inexpensive medication called hydroxyurea. Our department of Global Pediatric Medicine at St. Jude is working on this. Eventually, we hope that new medications and genetic therapies will become available for people with

sickle cell disease who live in Africa. This will take some time.

Q: How do St. Jude donors support the work you do?

A: When I was being recruited here, I remember St. Jude President and CEO Dr. James Downing saying to me, 'We want you to be bold and be brave and think big.'

This cannot happen without money. If you're going to do big things, you have to take chances. And if you take chances, you're going to fail sometimes. And you have to be brave enough to take those chances knowing that you might fail.

Some of the money provided by generous donors to St. Jude works its way to our sickle cell program and allows us to do things that we couldn't do without it. Much of our work is grant funded, however you just can't get enough money from grants to do the kind of work that we are now doing. Support from the donors makes up the difference.

For example, we are one of the very few academic centers in the country who can run clinical trials on genetic therapy for sickle cell disease, independent of pharmaceutical companies. I cannot thank our donors enough for providing this opportunity for our scientists, our physicians and our patients.



You can help physician scientists like Dr. Weiss continue their lifesaving work. stjude.org/ImpactGiving

Like learning to walk,

‘I just always knew about St. Jude’

Through workplace, family and fraternity, David McKinney has been a lifelong supporter of St. Jude. Now, he’s encouraging his 6-year-old son to join the mission.

By **Ruma Kumar** - ALSAC



When David McKinney stops to think about it, he can’t remember a time when he didn’t know about St. Jude Children’s Research Hospital.

The campus was some 15 minutes from his childhood neighborhood in South Memphis. As a child, he remembers seeing St. Jude advertisements in grocery stores and malls. He recalls participating in lemonade stands and collecting cans and toys for drives that benefited kids and families at St. Jude. He remembers meeting new families in church and school who moved to Memphis while receiving care and treatment at St. Jude.

“It’s like asking me when did you learn to walk? I just always did. I just always knew about St. Jude,” McKinney said.

What he knew about St. Jude, even as a child, McKinney said, is that it was a place and a cause that brought people together. He watched his church congregation rally to support a St. Jude family whose child was in treatment. He joined the effort, “because even as a kid you realize that if a family was at St. Jude, it was an all-hands-on-deck kind of experience,” he said.

McKinney grew up realizing that this was a mission that galvanizes:

turning strangers into families and communities into powerful philanthropic engines. And as he grew older and studied at the University of Memphis and worked for the local chamber of commerce, McKinney also learned about how the doctors and researchers at St. Jude marshalled their collective knowledge and resources toward a singular goal to save more kids with cancer and other catastrophic diseases.

All along the way, from childhood into young adulthood and into his professional years, McKinney found ways to support the work St. Jude was doing. He ran races and donated spare change at cashier registers. Nowadays, as a successful executive at AutoZone, he leverages every part of his life to give to St. Jude: his workplace, his church, his fraternity, his family. AutoZone, a St. Jude partner since 2006, has raised more than \$63 million for the research hospital through various fundraising efforts.

“What really inspires me and motivates me about St. Jude is the work to find a solution to a terrible diagnosis for a vulnerable child, to find a solution for something that seems impossible and not put the financial burden on families going through it,” said McKinney. “But I think the other piece that is really special is the sharing of resources, sharing of these solutions globally.”

St. Jude is the kind of place “that speaks to who we all are as people and what we want to accomplish for humankind,” McKinney said.

It’s why he’s brought his family into the fold with his support of St. Jude.

He recently established a charitable foundation with his wife, Dr. Shanea McKinney, and the couple hopes

to give grants and gifts to St. Jude through that organization.

He's also involved his 6-year-old son, Gethers, in the work to support St. Jude.

"Part of me hopes that Gethers has the same story as me, where if he's ever asked, 'When did you learn about St. Jude, he'll say, 'I always knew about it. I always knew about what the mission was. I always knew how important it was. I knew the impact from day one,'" McKinney said.

To support the breadth and scope of the work St. Jude is doing to improve survival rates for childhood cancers

and catastrophic diseases, not just here in the U.S. but around the world, will take multigenerational philanthropy, McKinney said, which is why he's instilling the value of giving back so early in his son's life.

"I think in our core we live to impact others outside of ourselves," McKinney said. "And I think that philanthropy provides one of the most direct ways for a person to do just that, to go beyond themselves and to truly help others."

McKinney is interested in cementing a living legacy, he said. He wants to be remembered for how much he does to improve and elevate a broader world outside of himself and

his family. He also wants to actively build a community where his son feels he already has a place to give.

"I want Gethers to grow up knowing about this place and what it takes to support it," McKinney said.

"The work to come up with the best ideas to fight the toughest problems we face has to be done together," McKinney said, "and St. Jude is an example of that."

The sharing of knowledge and resources with institutions around the world also allows outcomes to improve, McKinney said, so hopefully one day children will have the same chance at life no matter

"I want Gethers to grow up knowing about this place and what it takes to support it."

- David McKinney, St. Jude supporter

"My wife is a pharmacist. And, in 2021 she was appointed to the Tennessee Board of Pharmacy and was the first person of color to do it. So, this kind of micro history is still being made. And in part it's thanks to places like St. Jude that believed in diversity, equity and inclusion long before it was a catch phrase or the popular thing to do."

As the Vice President of Human Resources and Public Affairs, Customer Satisfaction for AutoZone, McKinney said he's also excited to help lead the corporate giving efforts for such a large company because it can have an impact and influence on so many lives.

McKinney said AutoZone and St. Jude have a natural partnership that he feels is rooted in shared values and similar forward-looking visions. He said AutoZone has a corporate philosophy that centers around taking care of you. That "you" can be customers, employees, but also communities.

"Giving back in that way ensures a strong culture," McKinney said. "And success for a company like AutoZone means having that strong culture, having the work we do go beyond the products we sell. The real work is about how you care about people, care about others."

where they live. He hopes that it will allow for health equity, another important value to him as he works to raise funds and awareness for St. Jude, he said.

McKinney said he is particularly moved by the work he learned St. Jude was doing to improve the treatment and understanding of sickle cell disease, the most common inherited blood disorder in the United States that disproportionately affects African Americans; roughly one out of 365 African American babies are born in the U.S. with it.

St. Jude has been a leader in improving standards of care for people with sickle cell disease since its founding in 1962. In fact, the first grant the research hospital in Memphis ever received was for the study of sickle cell disease, and today, St. Jude has one of the largest sickle cell disease programs in the country, serving about 900 patients a year.

Dr. Rudolph Jackson, one of the first Black doctors at St. Jude, was a

pioneering researcher and doctor in the treatment of sickle cell, childhood cancer, solid tumors and other life-threatening diseases. He joined St. Jude at a tumultuous time in the segregated South in 1968.

While he was at St. Jude, Dr. Jackson built the sickle cell program in Memphis to such a stature that in the early 1970s the National Institutes of Health hired him to head the federal government's efforts to fight the disease.

His work laid the foundation for St. Jude to be part of major advances in sickle cell disease treatment over the last 60 years, and doctors and researchers continue his legacy by exploring new cutting-edge potentially curative therapies for the disease.

"I was really fired up about the work done by Dr. Jackson. It really resonated with me," said McKinney, who along with his wife Shanea made a \$25,000 commitment toward a campaign in Dr. Jackson's honor that supports research on the St. Jude campus.



You can join David McKinney in supporting the St. Jude mission. Donate today at stjude.org/ImpactGiving

St. Jude Research Highlights

The mission of St. Jude Children's Research Hospital® is to advance cures, and means of prevention, for pediatric catastrophic diseases through research and treatment. Here are just a few of the recent findings from St. Jude researchers:

1

Scientists find core regulatory circuit controlling identity of aggressive leukemia

Cell Reports Medicine, March 19, 2024

Core regulatory circuits (CRCs) govern cell identity, making it possible for cancer to stay malignant. Scientists from St. Jude Children's Research Hospital and Dana-Farber Cancer Institute have, for the first time, mapped the CRC of the aggressive anaplastic large cell lymphoma (ALCL), a rare form of non-Hodgkin lymphoma.

The work provides insight into the fundamental nature of why a cell becomes and stays ALCL, offering future opportunities to find therapeutic vulnerabilities.

2

Immunotherapy targeting cancer fusion protein may hold key to treating rare liver cancer

Cell Reports Medicine, March 19, 2024

Fibrolamellar carcinoma (FLC) is a rare liver cancer with an 80 percent relapse rate and for which no effective therapeutics exist.

All FLC cases are caused by a mutation that joins together two genes, creating a fusion protein that drives cancer.

Researchers from St. Jude Children's Research Hospital and The University of Tennessee Health Sciences Center discovered two T-cell receptors that recognize the fusion and can guide T cells to kill all tumor cells carrying the hybrid target in a laboratory model.

The approach serves as proof of concept for a future FLC treatment that would allow a patient's own immune system to seek out and destroy the cancer.

3

Novel bispecific design improves CAR T-cell immunotherapy for childhood leukemia

Cell Reports Medicine, February 12, 2024

Immunotherapy using modified chimeric antigen receptor (CAR) T cells has greatly improved survival rates for certain leukemias and lymphomas but has not been as effective in diseases subject to frequent relapses, such as acute myeloid leukemia (AML).

Most CAR T cells target one cancer-related protein, allowing cancer cells without that protein to escape. In a lab, St. Jude investigators demonstrated a novel dual-targeting approach, designing a single molecule that can recognize two potential cancer-related proteins and prevent immune escape.

Using artificial intelligence, they confirmed the structural features that contribute to the efficacy of this novel approach, establishing a computational pipeline to evaluate future CAR T-cell therapy strategies.

4

St. Jude Children's Research Hospital adds \$13 million project to Research Collaboratives Program

January 19, 2024

St. Jude Children's Research Hospital has announced a nearly \$13 million investment toward a new research collaboration with scientists at Columbia University, Duke University and Stanford University to expand the understanding of G-protein coupled receptors (GPCR), which are vital proteins that impact human health and disease.

GPCRs have been linked to or implicated in more than 100 human diseases and disorders, and the GPCR Collaborative will use advanced methodologies, including time-resolved, single-molecule imaging, cryo-electron microscopy, proximity labeling, data science and other techniques to develop new strategies to treat a number of catastrophic pediatric diseases, including cancer. These approaches could lead to the development of better GPCR-targeting drugs.

The new initiative is part of a \$160 million planned investment in similar research collaboratives to foster and speed up scientific breakthroughs.



Research and treatment at St. Jude is possible because of generous supporters like you. stjude.org/ImpactGiving

ST. JUDE DOCTORS SUCCESSFULLY DEVELOP
EARLY WARNING SYSTEMS TO

help kids with cancer in Latin America

Study finds the systems help boost survival rates in 32 hospitals in 11 countries across the region.

By **Ruma Kumar** - ALSAC

Over the last 25 years, the progress Dr. Federico Antillon has seen for kids with cancer in Guatemala has been so promising it brings him to tears.

"It's been an amazing journey, we've come a long way," Antillon said.

He has seen survival rates for children with cancer in his native country improve from roughly 20 percent to more than 40 percent and even 60 percent in some types of cancers.

After completing fellowship training at St. Jude Children's Research Hospital in 2003, Antillon laid the groundwork for a non-

profit foundation in Guatemala that helped with fundraising and awareness, AYUVI, so families of kids with cancer could better afford and access the care they needed to save lives. He also helped establish his country's first dedicated pediatric cancer hospital, Unidad Nacional de Oncología Pediátrica (UNOP).

But even as that progress continued, Antillon and his colleagues faced a tough reality: They were losing half of their pediatric cancer patients because the cancer treatment itself was so toxic.

These were preventable deaths, Antillon said. If doctors and nurses could identify early signs of distress in patients and then more effectively administer the support necessary – intravenous antibiotics, oxygen, fluids – those kids could be saved.

In 2013, Antillon worked with Dr. Asya Agulnik, MD, MPH, who now directs the St. Jude Global Critical Care Program, to implement a system in Guatemala that not only

monitored and identified patients who were critically ill, but also quickly offered support to improve their health.

It worked so well that it caught kids before they became critically ill so that more of them survived treatment. It resulted in less burden on the hospital's intensive care resources and even improved fatigue and stress experienced by healthcare providers.

"This intervention should be used in the care of every single child with cancer who is hospitalized. Everywhere."

– Dr. Asya Agulnik,
director of St. Jude Global
Critical Care Program

Dr. Federico Antillon, seen here with a patient in Guatemala, worked with doctors and researchers in the St. Jude Department of Global Pediatric Medicine to implement the Pediatric Early Warning Systems that helped save more kids' lives in his country.





Dr. Asya Agulnik, director of the St. Jude Global Critical Care Program, worked with hospitals across Latin America to implement early warning systems that improved patient care and outcomes.

“We see this as a real call for the need to scale PEWS (Pediatric Early Warning Systems) globally.”

– Dr. Asya Agulnik

The promising progress in Guatemala spurred Agulnik to work with doctors and nurses in other hospitals across Latin America. They implemented Pediatric Early Warning Systems (PEWS) in 32 hospitals in 11 countries showing that the intervention saves lives – often in the hospitals with the greatest need.

“We see this as a real call for the need to scale PEWS globally,” said Agulnik, who is working with a team to more rapidly scale implementation in Brazil, as well as countries in Africa and Asia.

Agulnik’s research, which was published in *Lancet Oncology* in 2023, is at the heart of the work St. Jude is doing to accelerate progress in treatment and care for children with cancer around the world.

As part of its six-year, \$12.9 billion strategic plan, St. Jude aims to

improve cure rates for pediatric cancer and catastrophic diseases worldwide through St. Jude Global and the Global Alliance.

The ultimate goal of her team’s work, Agulnik said, is to erase disparities in outcomes of childhood cancer globally.

“In resource-limited settings, children with cancer have worse outcomes and higher treatment-related mortality, often because supportive care systems and hospital systems in place to care for critically ill children are much less developed,” Agulnik said. “This means PEWS are usually not used in the settings where potentially they’re the most needed.”

In the research published, Agulnik and her team compared outcomes from 32 centers that implemented the early warning systems between April 2017 and May 2021, examining how well children with cancer fared before and after PEWS implementation.

The warning systems tested in these hospitals are a scoring tool, with a set of evaluations tied to an action algorithm that guides the

clinical team on what to do to help a child with cancer who is in distress. Bedside nurses apply the algorithm based on vital signs, the symptoms the patient is experiencing and whether there are signs of crisis, like infection. If the patient is not doing well, the early warning system flags the patient for increased frequency of monitoring and a physician evaluation to decide the needed interventions.

“These systems are essential for caring for children with cancer, who experience more frequent deterioration, and are more likely to develop a critical illness, have serious consequences, or die,” Agulnik said.

Agulnik and her research team found 18 percent fewer instances of children dying from life-threatening side effects in the 32 centers across Latin America once the early warning systems were implemented. They found fewer cardiac arrests outside of the ICU, and patients with deterioration were identified and transferred to a higher level of care before their illness became severe.

“This intervention should be used in the care of every single child with cancer who is hospitalized. Everywhere,” she said.



Your donation helps support the lifesaving work St. Jude is doing to help kids with cancer around the world. stjude.org/ImpactGiving

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Art inspired by St. Jude patient Hayden

A lifetime of giving

How one Illinois couple makes a difference at St. Jude by giving generously.

By **Bethany Horton** - ALSAC

Jackie Rewert's eyes sparkle describing her husband Paul's philanthropic heart. "We love to support St. Jude," Jackie said. "But he started the whole thing. He's a very generous man – he likes to give back."

While the origins of their support trace back to when Paul was a child, decades later the Rewerts' show generosity toward St. Jude Children's Research Hospital® in multiple ways, including IRA giving and a contribution in their will.

Paul was first drawn to the mission of St. Jude by the memory of his cousin. When they were both in grade school, before St. Jude was even built, she died from leukemia. This early and defining loss in Paul's life laid a foundation for helping others.

When Paul graduated college and began working, he looked for ways to help others with his new steady income. He found his match when he learned of St. Jude – a pediatric

research hospital in Tennessee making strides to cure the disease that stole his beloved cousin.

Paul began sending in modest checks that grew as he established his career as a teacher. When he wed Jackie, she joined his excitement for breakthroughs made at St. Jude. "I can't think of anything more important than saving young children and helping the families who really, really need it," said Jackie. "I can't think of many organizations where I feel so comfortable giving money and knowing that it's going to be used the right way."

As the years went by, the Rewerts felt like they saw St. Jude around every corner. At the gym, Paul met a friend who pulled him into a four-hour bike ride fundraiser, and later inspired him to take shifts driving a support RV for runners relaying from Chicago to Peoria to raise funds for the kids of St. Jude.

Little by little, the mission of St. Jude became an important part of the Rewerts' life. Though they viewed their support as modest, they loved being part of something bigger than themselves. "What we're donating isn't changing the world," Paul said. "But when many, many people come together and throw it all in the pot, it does make a big difference."

As members of the Danny Thomas - St. Jude Society, a group of donors who have chosen to leave St. Jude in their estate plans, the Rewerts had the opportunity to visit the St. Jude campus. They relished the chance to see, in person, the mission they have supported for over 40 years while meeting others who find great meaning in being a small part of a greater whole.

Jackie and Paul, both now retired, appreciated seeing at St. Jude the juxtaposition of research and treatment buildings – a reminder of the collaborative bench-to-bedside model at St. Jude. "St. Jude has a lot of brilliant minds working on this. It's not just one. It's a collaboration," said Jackie. "Many minds are working together and putting their efforts toward something that will bring a good result."

With reinforced fervor for the St. Jude mission, Paul can't help but imagine what would have been possible for his cousin on a different timeline. "I often think of my cousin ... if it was 2024 instead of 1955," he said. "She'd probably be alive today. She'd probably have a full life after treatment."

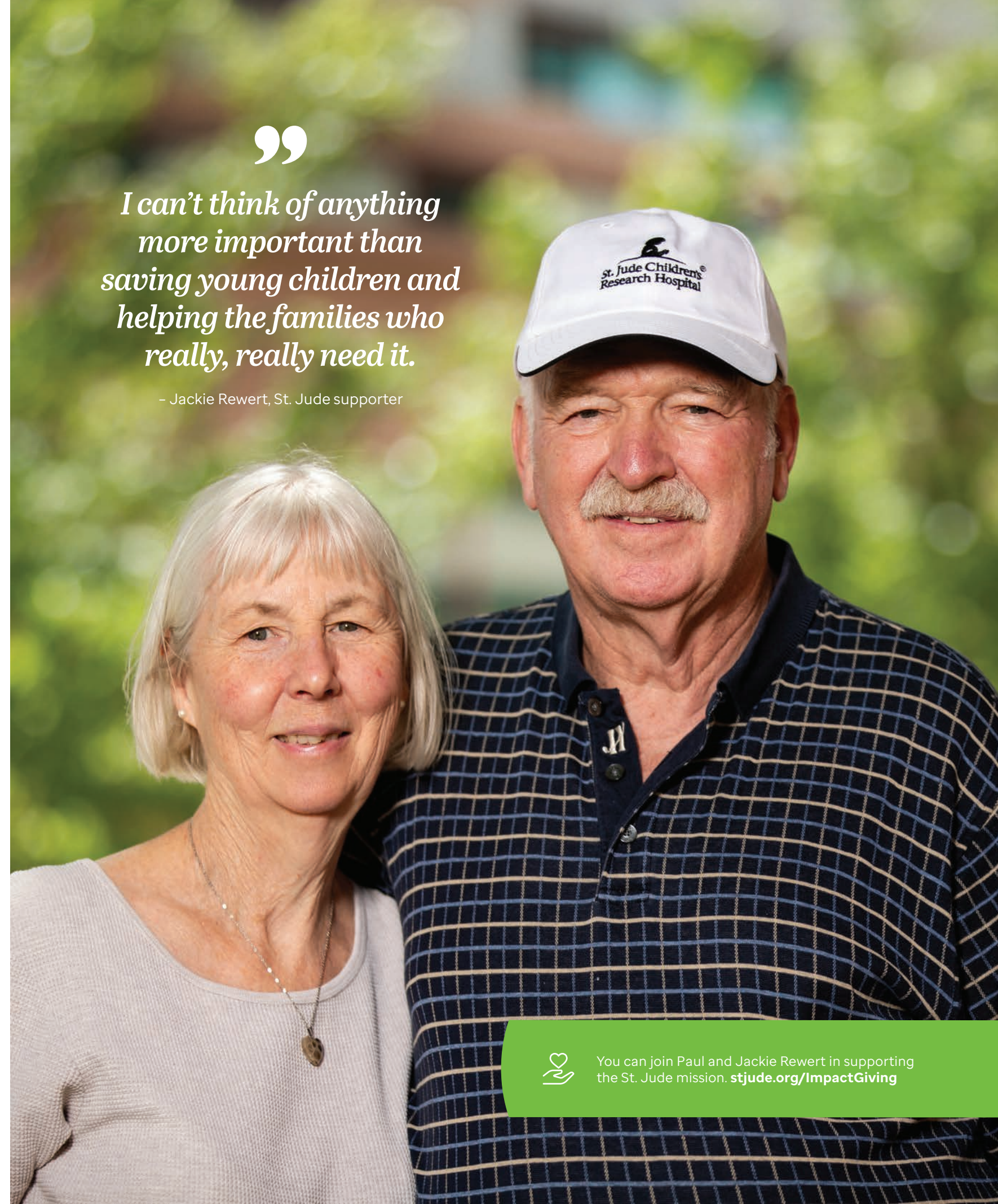
Steady and humble, the Rewerts are happy their support for the work of St. Jude will continue, even after they are gone. "We are not interested in leaving a legacy in the sense of having our name on anything," Paul said. "No one needs to know we were here."

Though families turning to St. Jude in their darkest moments may never know Paul or Jackie's names – their presence will be felt. Treatment and cures are made possible by people like them who have given generously alongside others, knowing that, together, a better future can be possible for children all over the world.

”

I can't think of anything more important than saving young children and helping the families who really, really need it.

– Jackie Rewert, St. Jude supporter



You can join Paul and Jackie Rewert in supporting the St. Jude mission. stjude.org/ImpactGiving

Meet the artist



Colton remembers the first sign something wasn't right. "I was playing basketball, and it felt like a bug flew in my ear. It was weird. It felt like my ear was under water." When the feeling didn't go away, a doctor's exam found a tumor blocking Colton's eustachian tube. It was a soft tissue cancer called rhabdomyosarcoma.

Colton was referred to St. Jude Children's Research Hospital® and underwent proton therapy and chemotherapy.

Colton has always been interested in art, which was nurtured during his time at St. Jude. Child Life Specialists provided him with art supplies, and St. Jude housing offered art activities for patients online and in person. When it comes to his paintings, Colton often chooses landscapes or space views and likes to challenge himself with color and perspective.

Colton is now finished with treatment and back at home with his parents, two brothers and dog, Dakota. He returns for regular checkups and continues to make art.



Your support helps ensure families like Colton's never receive a bill from St. Jude for treatment, travel, housing or food – so they can focus on helping their child live. Donate today at stjude.org/ImpactGiving



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Focusing on Emery

Emerson, or Emery, as she's called, was 2 years old when her parents found a hard lump on her side that caused her pain when touched. When a scan showed a mass on her kidney, she was referred to St. Jude Children's Research Hospital.®

Emery had surgery to remove her left kidney and has undergone months of chemotherapy and radiation therapy.

"Everybody knows that the families don't pay for things at St. Jude, but I didn't know the extent," said her mom. Families never receive a bill from St. Jude for treatment, travel, housing or food. "It's taken a lot of the stress off. We're able to focus on her and getting her what she needs."



You help bring hope and healing to patients like Emery when you support St. Jude. Did you know many ways to give with non-cash assets – like stocks and IRAs – may present unique opportunities to save on taxes while furthering the St. Jude mission? Donate today at stjude.org/ImpactGiving