

ST. JUDE inspire

SPRING 2022

HOME FROM ST. JUDE

Kids like Lucas yearn to return to their everyday routines after treatment.

Global Impact

St. Jude partners with the World Health Organization to provide cancer medicines for kids

Making Progress

Remarkable results for neuroblastoma





Inside Look

Dr. Beth Stewart (left, facing forward) gives the crew of Inspiration4 a tour of her lab in the Inspiration4 Advanced Research Center, the new research facility at St. Jude named in honor of the all-civilian space mission and in gratitude for the generosity of Jared and Monica Isaacman. The mission crew included St. Jude physician assistant and childhood cancer survivor Hayley Arceneaux (center), Chris Sembroski, Jared Isaacman and Dr. Sian Proctor. Inspiration4 has raised more than \$240 million for St. Jude, including a \$125 million commitment from the Isaacmans.

This year, Isaacman will return to space as part of the Polaris Program, building upon his love of exploration and continuing his support for St. Jude as he spreads awareness of its lifesaving mission around the world.





Hand-painted 'welcome' signs planted in newly mown lawns. Holiday lights. Balloons. Favorite pizza or tacos eaten on the living room floor. Family pets who couldn't understand the absence yet howl with delight. Friends and family waiting with smiles and hugs.

The parents of St. Jude patients can paint a picture of what homecoming after treatment looks and feels like. In this issue of *St. Jude Inspire*, you'll meet four such families. Their kids were in treatment, hundreds of miles from home – from friends and family – for months at a time.

Their diagnoses differ, and their ages range from 4 years old to 17. But one thing they have in common is what they had when they left St. Jude: health, hope and happiness. And more family than when they first entered the bright red doors just behind the welcoming statue of St. Jude Thaddeus.

To walk out through those same doors is a milestone like no other.

Thanks to you, our generous supporters, St. Jude has offered hope, milestones and homecomings to kids from around the world for six decades. And because of you and our new \$11.5 billion strategic plan, St. Jude will be able to help even more families experience homecomings for decades to come.

Those homecomings might be filled with grand celebrations, but they'll also be filled with small, precious moments as 4-year-old Lucas' mom tells us. "Even if we're just going on a walk, it's amazing," she says. "It's not like we have to go to some big amusement park. We're literally on the sidewalk walking and it's awesome, because he's talking and he's walking, and he's running around picking flowers."

Lucas spent almost a year at St. Jude, nearly a quarter of his life. Last fall, just before Thanksgiving, he went home again, and we couldn't be happier for him. But like all kids who leave and find balloons and pizza and hugs waiting for them at home, he remains part of the St. Jude family. Forever.

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ST. JUDE inspire

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You can help ensure families never receive a bill from St. Jude for treatment, travel, housing or food. stjude.org/donate



MANY COUNTRIES STRUGGLE TO PROVIDE CHEMOTHERAPY DRUGS TO THEIR CHILDREN; ST. JUDE WANTS TO CHANGE THAT

Working with the World Health Organization, St. Jude will invest \$200 million over 6 years to increase access to quality cancer medicines for children across the globe.

By Kristina Goetz - ALSAC

Charity Kawadza is often the one to tell parents there are no chemotherapy drugs available for their children at Parirenyatwa General Hospital in Harare, Zimbabwe.

None in the whole country.

Kawadza is a nurse and the health promotions coordinator with KidzCan Zimbabwe, a non-governmental organization that supports the hospital's ward for children suffering from cancer.

She watches them deteriorate and die, knowing they might well have survived if they'd have had the medicines.

"It can be very sad to know your hands are tied sometimes," she said. "There's really nothing you can do."

Zimbabwe's plight illustrates how dozens of low- and middle-income countries worldwide struggle to consistently source and buy chemotherapy drugs for their children.

\$200 MILLION INVESTMENT FROM ST. JUDE

St. Jude Children's Research Hospital has announced that it will invest an estimated \$200 million over six years to dramatically increase access to quality cancer medicines for children around the world and, in conjunction with the World Health Organization, create the Global Platform for Access to Childhood Cancer Medicines.

The announcement followed an intense period of research that

spanned several years and builds on the dedicated work of many over decades.

In October 2021, the St. Jude Board of Governors approved the business plan for the new platform and committed an investment to fully fund its development and implementation.

HERE'S HOW IT WILL WORK

The St. Jude/WHO global medicines access platform will launch as a two-year pilot project providing medication at no cost to 12 countries. By the end of 2027, it is expected that 50 countries will receive childhood cancer medicines through the platform.

It's estimated 120,000 children could be impacted within the first six years.

The program will provide end-to-end support. It will consolidate global demand to shape the market; assist countries with the selection of medicines; develop treatment standards; and build information systems to ensure that effective care is being provided.

The news of even the possibility of medicine access brought hope to Daniel McKenzie, executive director of KidzCan, the only non-profit group in Zimbabwe dedicated to supporting pediatric cancer patients, because he knows access to therapy drugs would mean a real change in outcomes for children.

"I'm very appreciative that, despite what we're doing, someone has heard our cries," he said.

In Zimbabwe, government policy is that all children under the age of 5 should receive free medical care in any government hospital. But because of limited resources, parents are often forced to pay for drugs on their own



Daniel McKenzie is executive director of KidzCan, a nonprofit in Zimbabwe that supports pediatric cancer patients.

The organization's official policy is to give \$50 U.S. for bereavement.

"But that's not enough," he said. "So, we've asked a funeral home to say, 'Well, look, on average we lose 50 kids a year, which is \$2,500. Can we give you that \$2,500 and then you create a policy for our 800 children so that should any of them die you take them home?'"

"And that's where we are."

Mckenzie said he often feels overwhelmed.

"It's sad for me to say this, and I've said it to the board: If no drastic changes happen, all we are doing as an organization is helping the kids survive a year or two," he said. "It's painful to say that, but that's what we've been doing."

"All the fundraising that we do, we still just bury it with the kids."

There is a world out there, Mckenzie said, of people who do listen and care about the plight of children in even the smallest communities in the world.

"I always say that, look: Children are children irrespective of where they're born," he said. "Cancer is cancer irrespective of where you are. Chemotherapy drugs are the same wherever you are. Why, then, should our children in Africa and Zimbabwe die?"

The impact of the new global medicines access platform will be profound for children.

"They will survive," he said.

To learn more about KidzCan, visit KidzCanZimbabwe.org.

or seek out private non-profit groups for financial help.

To relieve that burden, KidzCan has taken on the role of locating and supplying chemotherapy and other medicines. Forty percent of the organization's budget goes to cover medicine costs at \$60,000 per year. To fully treat all current patients, though, they'd need a budget of \$160,000. That doesn't count the many patients who never seek treatment or those who travel to neighboring countries like South Africa who would stay in Zimbabwe if chemotherapy was available.

The organization also partially funds the pediatric cancer ward at the hospital where Kawadza works.

GRANTS AREN'T ENOUGH

Grants allocate only a small percentage of funds toward medicines. Many international donors would rather give grants for awareness and prevention than clinical care because they say that's the role of the government, Mckenzie said.

With an economy that has teetered on the brink of collapse, and COVID-19 closing borders, getting medicines into the country has been, at times, impossible – even with money in hand.

Those delays in shipping and acquiring chemotherapy have caused gaps in treatment. That means doctors have been forced to change protocols for patients based on what medicine is in stock, not what children actually need. And children who have traveled hundreds of miles for treatment arrive only to find there's no chemotherapy available for them at all.

So many children with cancer die in Zimbabwe that KidzCan has partnered with a funeral home.

"We try to be holistic in the support because we're losing a huge number of kids," Mckenzie said. "We can't just abandon them when the child dies because the same mother is going to come to me: 'Daniel, I live 1,000 kilometers away. I don't have a penny to go back home with my child.'"



THERAPY DEVELOPED BY RESEARCHERS AT ST. JUDE SIGNIFICANTLY IMPROVES CURE RATES AMONG NEUROBLASTOMA PATIENTS

“Remarkable” results show survival for high-risk neuroblastoma patients increased from 51 percent to 74 percent.

By Ruma Kumar - ALSAC

A therapy developed at St. Jude Children’s Research Hospital has increased survival rates by more than 20 percentage points for children with high-risk neuroblastoma.

The treatment includes a novel monoclonal antibody manufactured on the St. Jude campus.

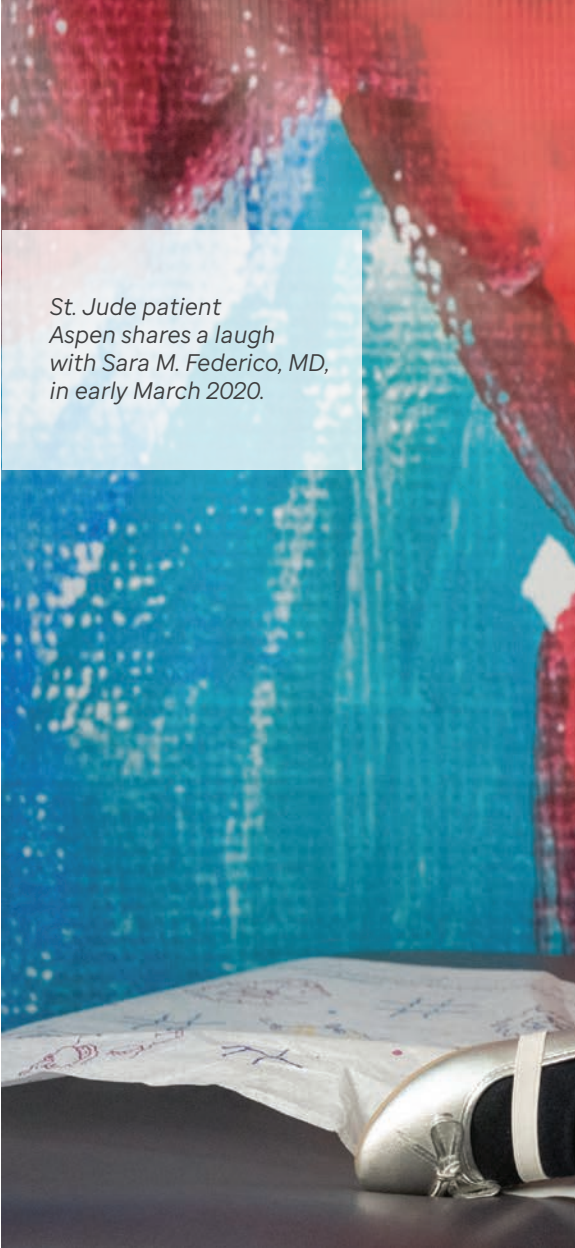
Neuroblastoma is a cancer of immature nerve cells in the sympathetic nervous system. Survival rates for the high-risk form of neuroblastoma had been at 51 percent for a decade. But the chemoimmunotherapy developed in the labs and clinics at St. Jude bumped three-year survival to 74 percent. That’s encouraging news for the roughly 700 children diagnosed with neuroblastoma each year in the U.S., many of them under 5 years old.

“This is really exciting for me as an oncologist,” said Sara M. Federico, MD, a St. Jude faculty member and senior author of the study. “When I came to St. Jude to do my fellowship... if a new patient came in with high-risk neuroblastoma and they asked what the cure rate was, the answer was about 30 percent, and that of course was unacceptable.

“By the time my fellowship ended (in 2011) it was 51 percent, but here we are 10 years after my fellowship and we are seeing a big jump, where we have a three-year event-free survival rate of 74 percent. It’s remarkable,” she said.

The study findings were published in the *Journal of Clinical Oncology*.

“I have never seen results like this in high-risk patients,” said Wayne Furman, MD, a St. Jude faculty member who led the study



St. Jude patient Aspen shares a laugh with Sara M. Federico, MD, in early March 2020.

and has cared for patients with neuroblastoma for more than 30 years. “This is the best result published to date for patients with high-risk neuroblastoma, period.”

The chemoimmunotherapy described in the study could become standard treatment for patients with high-risk disease, Furman said, if the findings are confirmed in a larger, multi-center clinical trial.

Neuroblastoma commonly grows on young adrenal glands over the kidneys, dodging recognition by the immune system and growing unchecked. But the monoclonal antibody manufactured on the



St. Jude campus and used in a clinical trial serving 64 patients was designed to seek out an antigen called GD2 found on neuroblastoma cells. The antibody binds to GD2 and flags neuroblastoma cells so the immune system can find and destroy them.

Treatment for neuroblastoma is grueling with high-dose chemotherapy, radiation, surgery and bone marrow transplants – and even that's not enough to wipe it out for patients with a high-risk form that has spread. But the new monoclonal antibody therapy given at the beginning and end of treatment along with other medicines is showing hopeful improvement for these patients.

This therapy could also show promise in treatment of osteosarcoma, Ewing sarcoma and in adult malignancies like melanoma and certain lung cancers, whose cells also present with GD2.

“The future steps are to validate these results and to build on it. What else can we do to make this therapy more effective?” Federico said.

The encouraging results of the trials remind Federico of a picture she saw of a neuroblastoma patient of hers, Slater.

It's one of him standing next to his big brother on a street in front of their Florida home watching the Inspiration4 space mission launch

into orbit late last year. Slater had been too weak to walk when he and his family first sought help from St. Jude in 2018 after he was diagnosed with stage IV neuroblastoma. And this year, here he was, standing strong and dreaming of space travel after receiving the monoclonal antibody treatment Federico and her colleagues had been developing and studying.

“What is the limit? There are no limits. Just seeing him standing in the street watching a cancer survivor blast off into space. It just shows you there are no limits to what we can achieve,” Federico said. “That photo just sums up my motivation.”

DETERMINED AND OPTIMISTIC CASH



This little boy from East Tennessee keeps up his fight to overcome high-risk neuroblastoma, and so do his St. Jude doctors. Though researchers here made hopeful gains for survival of this cancer, relapse still threatens progress.

Cash cheered on runners in the St. Jude Memphis Marathon® in December 2021.

By Ruma Kumar and Karina Bland - ALSAC

It was chilly and drizzling when he was out cheering marathoners on the campus of St. Jude Children's Research Hospital, but 7-year-old Cash has never been one to let anything dampen his spirits.

Certainly not the weather. Not the high-risk neuroblastoma that first debilitated him as a toddler. And not the last of a grueling 12 rounds of chemotherapy he's had to take as his difficult-to-treat cancer began growing anew last spring.

Cash has finished his second round of treatment and is back home in East Tennessee with his family. He is stable but not cancer free. Neuroblastoma clings to him, casting shadows of itself on his skull.

Despite recent findings in a St. Jude trial showing markedly improved

survival rates among high risk neuroblastoma patients, relapse threatens the long-term outlook for patients like Cash.

It's why researchers at St. Jude continue to press, studying ways to improve treatment and care for neuroblastoma, a cancer of immature nerve cells in the sympathetic nervous system. Survival rates for the high-risk form of the disease had been at 51 percent for a decade.

But Cash was among 64 patients who received chemoimmunotherapy developed in the labs and clinics at St. Jude to improve the three-year survival to 74 percent. It had produced encouraging results for Cash, whose cancer stabilized under the NB2012 protocol in 2018, but then started to spread last April.

There's so much left to study and learn about this type of cancer, said Sara M. Federico, MD, a St. Jude faculty member who has studied neuroblastoma and treated patients with it since she joined the research hospital in 2007.

"There are a lot of biological questions that we still need to sort out," Federico said. "What are the biomarkers of patients who don't respond to this therapy? We're doing a lot of work looking at that right now."

Cash had returned to St. Jude last March, 2021 with his mother, Katie, for a routine checkup when the doctors found the cancer had started to grow again.

The news surprised Katie. Cash had seemed fine.

In the three years he'd been home after completing his first round of treatment, Cash had enjoyed beach vacations with his family, been a ring-bearer in his uncle's wedding, played basketball and been indistinguishable from other rambunctious first-graders in his class.

It was supposed to be a quick checkup, in and out of clinics and scans and back home to make spring break plans. But then Katie saw the look on the doctor's face as she walked toward her in the lobby of the Chili's Care Center.

"You just kind of go numb," she said of the moment.

After doctors told her they'd found evidence of disease spread, dark spots on Cash's ribs, pelvis and hip, Katie called her husband.

"All I said was, 'it's back.' And he knew," she said.

Less than a month later, Cash was back on campus for more chemotherapy. Undaunted, he was determined to make the best of it, his mother says. He reunited with friends who'd remained in treatment over the years. He forged new friendships in waiting rooms between clinic appointments and in the cafeteria over lunch breaks.

Bundled in a cozy woolen hat and blanket, he sat in a wheelchair on the sidelines of his first marathon benefitting St. Jude, cheering on runners who veered off course to tell him, "You're why I'm running!"

"I wish it would just be gone, the cancer," Katie said. "But we're stable again. And I know it could be worse. The first time around, 'stable' got us three years."

"So, I'll take it," she said. "I'll take stable. For us, stable is perfect."



*St. Jude patient
Cash and his mother,
Katie, in 2017.*



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Housing Under Construction

The Domino's Village, located on the St. Jude campus, will provide a home-away-from-home for families who come to St. Jude from around the world. The housing facility is named in honor of the global pizza chain, Domino's, which has committed to raising another \$100 million for St. Jude by 2030. The Domino's Village will feature 140 fully furnished units ranging from one to three bedrooms to accommodate patient families of different sizes and lengths of stay. It is expected to open for patient families in spring 2023.



St. Jude Children's

COVER STORY

By David Williams - ALSAC



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LITTLE LUCAS IS HOME FROM ST. JUDE AFTER A BRAIN TUMOR THREATENED HIS LIFE.



Four-year-old Lucas is napping, so his mom, Stephanie, has a precious few moments to talk. But then all moments are precious now, she'll tell you.

"Even if we're just going on a walk, it's amazing," she said. "It's not like we have to go to some big amusement park. We're literally on the sidewalk walking and it's awesome, because he's talking and he's walking, and he's running around picking flowers."

It's a late October afternoon in Memphis, two days past the No More Chemo party that traditionally marks the end of treatment at St. Jude Children's Research Hospital, when staff gather in Lucas's room to throw confetti and sing:

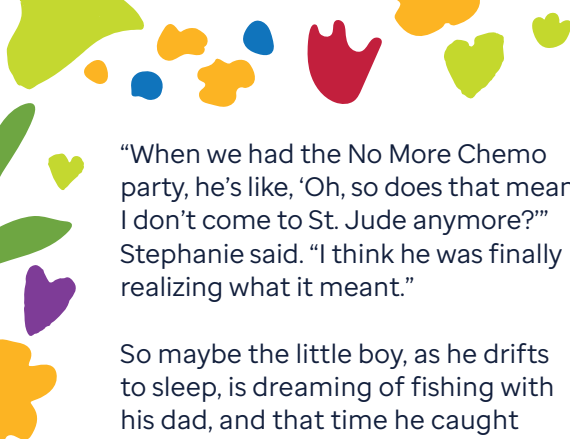
Oh, we love to see you every day,

But now's the time we get to say

Pack up your bags,

Get out the door.

You don't get chemo anymore!



“When we had the No More Chemo party, he’s like, ‘Oh, so does that mean I don’t come to St. Jude anymore?’” Stephanie said. “I think he was finally realizing what it meant.”

So maybe the little boy, as he drifts to sleep, is dreaming of fishing with his dad, and that time he caught a one-pound bass all by himself. Maybe he’s thinking about taking little brother Noah for a spin in his little yellow Power Wheels truck. Or playing with their cousins who live across the street.

Maybe he’s dreaming of that magical, faraway place called home.

Yes, Lucas is finally going home after treatment at St. Jude for medulloblastoma, a brain tumor of the cerebellum. After spending most of 2021 so far removed from everything he’d ever known. After 30 radiation treatments and seven cycles of chemotherapy. After port placement surgery, sedations, six MRIs, five lumbar punctures and, in his mom’s words on a social media post chronicling it all: “More than any child his age should EVER have to endure.”

After all that – and short-term side effects from hair loss to fever to neuropathy in his fingers, legs and eyelids – Lucas and 2-year-old Noah and their parents, Stephanie and Amgad, are going back to Florida, to family and friends, to the simple pleasures of life, like ...

Toys. That’s what Lucas misses most.

For mom, it’s her own bed. And her grocery store, she said with a laugh.

Ah, the little things that make home home.

“But I think seeing our family,” she said, “will probably be the biggest thing.”

And dad?

“I think what I look forward to is seeing my kid smiling and happy,” Amgad said. “That’s priceless.”

THE MEANING OF HOME

Home is comfort and sanctuary and the glorious mundane. Home is quiet time, a sigh at the end of a workday. Home is the four-part harmony of family laughter around the dinner table, or in front of the TV, or out for a walk.

“Usually in the evening we like to do stuff outdoors,” Stephanie said, painting from memory a picture of home. “We live on a lake. So probably fishing on the lake. The boys love that with my husband. Or going on a walk around the neighborhood.

“They just like being outdoors. We have swings nearby.

“And, of course, they love going to the neighborhood park.”

But then, sometimes you can’t fully grasp the glory of the mundane until it’s gone.

Around Thanksgiving of 2020, Lucas was complaining of headaches. His parents thought he just wanted attention – what 3-year-old, mom thought, gets headaches? By early December, his daycare teacher called to say he was lying on the ground, complaining about his aching head. He was walking funny. He didn’t want to play – what 3-year-old doesn’t want to play?

An MRI was scheduled. Lucas was excited because he was going to get his “head fixed,” mom said. But a 30-minute procedure stretched to two hours.

“They finally called back to the recovery room to help wake my

baby up,” Stephanie wrote on social media. “Once he heard my voice, he opened his eyes and asked to play with toys. Within moments, a doctor walked up and introduced herself to me as a pediatric neurosurgeon. My heart dropped. Why do I need to talk to a neurosurgeon?!”

One day you’re measuring the size of the fish your little boy caught, all by himself.

The next you’re being told the size of the tumor in the back of his head, and that he needs emergency surgery.

A few weeks after an eight-hour operation in a children’s hospital near their home – and after a delay due to the whole family testing positive for COVID-19 – they were bound for Memphis, for months of treatment at St. Jude.

A thousand miles from home, and millions from the mundane.

A SECOND HOME

St. Jude wasn’t that house on the lake and Memphis wasn’t Florida, but over the course of some 10 months, Stephanie, Amgad, Lucas and Noah found a second home. They found joy and made some of their own.

They all got their heads shaved in a downtown salon, in solidarity with Lucas. They discovered parks to play in. They visited a pumpkin farm, picked apples. At St. Jude, Lucas made friends with facility dogs Puggle and Huckleberry, joined in the homecoming celebration for St. Jude cancer survivor and physician assistant Hayley Arceneaux after her historic Inspiration4 mission to space, and dressed as a Minion for Halloween.

Ask the family, and they’ll say what a lot of families say: It’s not just the medicine that heals at St. Jude.

"We had the royal treatment," Amgad said.

Which is to say, the regular treatment.

"This definitely became our home. We were comfortable," Stephanie said. "And just everyone at St. Jude was always so nice to Lucas. He always looked forward to going there. They were his friends. Even the valet guys, he was like, 'They're my friends.' And every day he's looking for them." She laughs. "If they're not there, he's like, 'Where are they?' Oh, yeah, and if they're wearing something different, he's like, 'Oh, look. He changed his shirt.'"

"He loves Puggle and Huckleberry. They were at his (No More Chemo) party, too. Every time he saw them in the hallway he would get so excited. He always talked about them.

"They've been his little pets here, and they've helped him a lot."

Think about it. Lucas has spent nearly a quarter of his life in and around St. Jude. For little brother Noah, it's been nearly half his life.

Leaving St. Jude has always been the goal, of course. Leaving is the dream, the light at the end of the turmoil. Because leaving means Lucas is healthy enough to go home.

"He's really excited, and we are, too," Stephanie said, and yet: "It's almost scary to go home, too, just to be away from St. Jude. Because it's been such a comfort here, and we feel like we're in such a bubble.

"When we got here initially, my husband and I were just like, are we in the movies? Because everyone was so nice. Everyone acknowledges you.

"It's just not normal. We're not used to getting treated like that. And, of



course, over the weeks we just got used to it, and now I'm like scared to go back to the real world." She laughs and adds, "People aren't like that in the real world.

"So, I'm pretty anxious about that, even just dealing with normal people again, versus St. Jude's angels. Really, it's the truth."

But then, they're taking an angel with them, aren't they? They're taking their little boy home. And Lucas, he's an angel with a superpower.

"He loves pleasing people, making everyone happy," Stephanie said. "That's a big thing."

HOMEcoming

It's not Hayley Arceneaux and Inspiration4, splashing down off the

coast after making history with the first all-civilian crew into orbit, but as Florida homecomings go, this one's pretty sweet.

"Coming home was somewhat surreal. I couldn't stop crying," Stephanie said by text on a beautiful, blue-sky Florida afternoon in early November.

On the plane ride home it hit her, she said. While her family is starting a new chapter, "I remembered all the families we left who are still battling."

She added an emoji of a broken heart.

But a broken heart can swell with happiness, too. Because this is their time, their moment. Finally, after so much pain and worry. Lucas and Noah and Stephanie and Amgad are back in their house on the lake – the house with the colorful, star-filled "Welcome Home Lucas!" sign fairly bursting out of the front yard.

Mom takes pictures. Lucas in front of the yard sign. Lucas in his bedroom, hugging a stuffed animal. Lucas playing in his sandbox. Lucas by the pool.

"I was overwhelmed with happiness that we were back here with our 2 amazing sons who were so excited and running, talking, jumping around," Stephanie texts. "So grateful to St. Jude for giving us a second opportunity ... giving Lucas another chance.

"We are so excited to be back in Florida."

Back home, where so much of the glorious mundane awaits.

Cousins to play with. Family walks to take.

And if we know Lucas and his dad, fish to catch.

15-YEAR-OLD SOCCER PLAYER CELEBRATES BEING HOME FROM ST. JUDE WITH THOSE WHO CARED MOST:

HER ENTIRE ILLINOIS TOWN

Through a series of kind acts,
Tessa's hometown showed her she
was out of sight, but never out of
mind during cancer treatment.

By Betsy Taylor - ALSAC

Tessa and her parents were away from their Illinois home for more than three months while the 15-year-old underwent treatment at St. Jude Children's Research Hospital.

They had no idea what to expect when they finally got home.

But when the family pulled into the driveway on Dec. 3, their Christmas lights were hung, their lawn was mowed and edged. Everything looked well-maintained even though they'd been gone since late August.

Their team of helpers – which had grown to include almost everyone in town – had been hard at work.

"I slept a little bit when we were further away from home, and as we got closer I got more and more excited," said Tessa.

More than anything, she had missed "just seeing all my family and friends," such as her 1-year-old nephew, who has "the best smile."

She had missed other things, too – strange things, unless you'd grown up here. Like her favorite pizza from the local pizza parlor.

"It has hamburger meat on it and lettuce, and then instead of tomato sauce it's Thousand Island. It tastes really great," said Tessa. "I've never seen it anywhere else."

Home had never looked so good. It had never been so missed.

'I COULD BARELY BREATHE'

Here in this central Illinois town of fewer than 1,500 people, Tessa was a fixture of her community, known for her talent on the soccer field.

But then a pain in her side that wouldn't go away became a screaming pain and something that could no longer be ignored.

On May 27, 2021, came a trip to urgent care and, later, a startling diagnosis from the nearby Jim and Trudy Maloof St. Jude Midwest Affiliate Clinic in Peoria: She had an extraskeletal osteosarcoma, a tumor in her chest wall that behaved like bone cancer even though it wasn't actually attached to a bone.

"When I heard 'oncology,' 'St. Jude,' 'PET scan,' the words started to run together, and I felt like I would collapse," wrote mom, Michelle, on a social media page she set up in June to keep loved ones informed about Tessa. "It was like being punched in the stomach. I could barely breathe."

Suddenly, Tessa and her family had to face the prospect of surgery, chemotherapy and proton radiation therapy. Maybe hardest of all, though, was a trip far from home to St. Jude in Memphis, for part of her treatment.

THE GREATEST PEOPLE ON EARTH

At a time when she felt like she needed home most, she was leaving it.

The people in her town were also shaken to the core. Of course, that happens whenever a small town faces the prospect of losing one of their own.

But instead of sending their sympathies, they stepped up.

People like the ones who mowed her lawn week after week to keep it looking tidy.





People who climbed on a ladder in the cold so Tessa could come home to Christmas lights.

People like the man who lived next door.

He'd been next-door neighbors with Tessa's family long enough to have experienced another Tessa homecoming – her homecoming from the hospital, just after she was born. And on countless occasions, down through the years, he had looked out his window and seen Tessa chasing one of her four older siblings, Tessa walking with her friends or Tessa dribbling a soccer ball.

Tessa living her life.

She was special to him, so he'd gone to the store to buy a poster board so he could make a sign for the yard to welcome Tessa home.

'THIS IS FOR YOU, TESSA'

One day, Tessa picked up a box from the St. Jude mailroom that contained 36 individually wrapped gifts. Her club team had sent them so she'd have one present to open for every day of proton radiation therapy.

The cards and gifts kept coming. There were visits, too.

The woman who'd marshalled everyone to do the lawn mowing was a soccer mom who defined the expression "above and beyond."

"She actually drove down with her daughter and another girl just to surprise Tessa a few weeks ago, just out of the blue, just to surprise Tessa and spend the evening with her, and then drove back," said Michelle.

Fourteen hours of driving just for a few hours of togetherness. It did wonders for Tessa's morale.

It didn't stop with friends. Several athletic teams in the area sent cards, well wishes and presents.

The soccer team at the local Catholic school held a St. Jude fundraising day. They raised \$25,000, dedicated to Tessa, and sent a video to let her know.

At the end of the video, the girls join together to say: "This is for you, Tessa!"

Michelle doesn't cry when she describes the major thoracic surgery Tessa underwent at St. Jude to remove her tumor, although she describes those hours of waiting as some of the longest moments of her life.

But this video, and the kindness of those girls, makes her cry, because "that's not even her school."

"Sometimes she almost feels guilty about all the support she's getting. She says, 'I don't deserve this,'" said Michelle. "But of course, she does."

Four years ago when Tessa was only 11, and long before she got sick, she ran a 5K in the St. Jude Peoria Walk/Run to help the kids at St. Jude.

She couldn't have known that in a few short years she would be the one who needed help.

'#BESTDAYEVER'

Tessa is weaker than she's ever been, yet determined to get back on the soccer field.

The goodwill still overflows.

A soccer trainer has offered Tessa's family his expertise free of charge to help her build her strength and skills back up, just as soon as she's ready.

She may not be playing soccer right now, but she knows she's still part of the team. No question. Because on the day Tessa got home there was one last surprise from her high school soccer team.

"On our block, a ton of girls from school, like right when they got out of school, they lined by my driveway and brought signs and gave me a ton of hugs," said Tessa.

"TESSA IS HOME," one of the posters read. Underneath that: "#BestDayEver #BestGiftThisYear #Fighter #StrongerTogether"

That night, Michelle posted photos from the day to Tessa's page with these words, "My heart is full."

And how does all of this make Tessa feel?

"Happy," Tessa said simply, adding: "To be home."

OREGON TEEN DANCES FOR THE SHEER JOY EIGHT MONTHS AFTER COMING 'HOME FROM ST. JUDE'

Angelina's parents celebrate their daughter's return with two birthday cakes.

By Betsy Taylor - ALSAC



On a mid-November Friday night, 17-year-old Angelina arrives at her former dance studio near her home in Oregon with her best friend, Mazie Hewett. They greet their hip hop choreographer, Don Flores, but his reaction is subdued, not something you'd expect after all these months.

This moment is choreographed, too. The idea is to make everything feel normal again. Normal, like the old days when dancing with Angelina for more than 16 hours every week was just what they all did.

The room fills with music. He teaches the two girls their steps.

This moment of loose-limbed flow as they dance together is short — it lasts one song.

Angelina is pure energy.

She hasn't taken a formal dance class since before cancer, but the strength she'd built through six years of dancing helped give her stamina to physically endure what she did — even her physical therapist at St. Jude Children's Research Hospital said so.

And the promise of returning to dance after one full year of intense stage IV alveolar rhabdomyosarcoma treatment sustained her in other, deeper ways.

'IT WAS REALLY HARD'

This was actually Angelina's second time back in the dance studio since coming home from St. Jude. It had been a lot harder the first time.

On the one hand, said Angelina, "I was like super-duper-duper happy when I got to go to dance, and everybody was like, cheering, and it was just a really great experience."

She'd been able to keep up with the other dancers, who were also some of her closest friends. Outwardly, this looked like a triumph – like the old days, but that's not exactly how she felt.

"When she came out, she kind of broke down and started crying to me when we got in the car," said Angelina's mom, Linhda. "She said that it was really hard."

'I'M GOING TO BE ALRIGHT'

Angelina's cancer journey started in December 2019 with her discovery of a lump below her left buttock that, as the weeks passed, began to hurt when she sat down.

Scans and a biopsy confirmed Angelina had aveolar rhabdomyosarcoma, a soft tissue tumor that can arise virtually anywhere in the body.

"I've done crisis work my whole career," said Linhda, "and I'm always somebody who, at the drop of a dime, I've always known what to do. I can always react. You know? And I have to say, when I got the diagnosis for my daughter, it was the first time I actually understood what being paralyzed with fear means."

When Angelina's father, Michael, first heard the diagnosis, he got up from his chair and ran to the bathroom to throw up.

And what did Angelina do?

Two days after her biopsy and learning she had cancer, Angelina got onstage and danced with her team in competition.

A friend of Angelina's mom who's a nurse helped the family seek out an open St. Jude research study for kids with newly diagnosed rhabdomyosarcoma. They obtained a referral and arrived at St. Jude three days later.

"Imagine walking into a hospital where you're looking at all these parents going, 'Oh my gosh, they are me, and I am them.'"

On one of their first days at St. Jude, when they learned Angelina's cancer had progressed to stage IV, Angelina turned to her mom. "Momma, I'm going to be alright," Angelina said.

The treatment was grueling because it was an all-out war against the cancer that had spread to Angelina's left hip, her lymph nodes and her upper and lower spine. The radiation therapy caused painful burns at the site of her original tumor. The chemo made Angelina sick, and her hair fell out. Her muscles, so strong from dancing, weakened.

Between all the love from hospital staff and the care packages and texts from friends and family back home, including her dance team, Angelina made it through. Each and every week of Angelina's treatment, for example, Mazie sent her a handwritten letter by mail.

And the 52-week course of treatment that had once seemed impossibly long, ended as it had begun: with a birthday party.

"When she first got to St. Jude, Angelina celebrated her Sweet 16, and they sang to her and gave her



balloons and cards," said Linhda, "and that was the same thing they did for her before we left, only this time for her 17th birthday."

'WE'RE GOING HOME!'

In a way, the celebration has never ended.

On the plane ride home to Oregon from St. Jude, Angelina, her parents and her 6-year-old brother, Liam, kept repeating: "We're going home. We're going home!"

It was late and they were hungry, so they grabbed tacos and burritos from a favorite place near where they live and sat there in their living room, including older sister, Sirena, and savored all of it.

"And I can't tell you that feeling of being able to sleep in your own bed," said Linhda. "You know, like to just come home and just like lay in your own bed, in your own sheets."

The next day, they left for a house they'd rented in Sunriver, and relatives from California and Hawaii

gathered to celebrate. They had two cakes, one for Angelina's 16th birthday and one for her 17th.

After that trip, they picked up Angelina's dog, Mowgli, who'd been staying with her older brother, Austin, for more than a year. Mowgli hadn't understood why she'd been gone, so he opened his mouth and howled a long cry of such pain and emotion that he seemed to be speaking for all of them.

'SHE'S JUST GOING FOR IT'

Gratitude has marked Angelina's life since coming home.

She appreciates the green of her Oregon hometown and the proximity to bookstores. Her tastes run to romance novels and historical fiction. She has her driver's license now.

She works hard to maintain straight As in her classes, which include AP statistics and AP psychology.

The St. Jude School Program by Chili's helped with that a lot, creating a large going home packet for Angelina that not only detailed what she'd learned, but also shared information about the kinds of challenges Angelina might face and the accommodations she might need to thrive.

Right now Angelina's scans show no evidence of disease, but it'll be many more years of good reports before she can finally say she's in remission. She still gets maintenance chemo on Tuesdays and visits St. Jude regularly.

"She's just out there living her life right now," said Linhdá. "She's just going for it and not letting any of this hold her back."

And when the mood strikes her, she dances, for the sheer joy of it.

A VICTORY AGAINST CANCER AND A CELEBRATION LIKE NO OTHER

With their daughter back home, Marlene and Juan Manuel are looking forward to food, family and the giggles of little Mikayla.

By Monsy Alvarado - ALSAC



Mikayla did not want to play or eat. Her face was pale, so were her lips.

The 1-year-old with the dark hair, sparkly eyes and dimpled smile did not laugh when tickled and slept for hours despite a whirlwind of Christmas activity around her in December 2020.

Could something be wrong? her grandmother wondered. No, she must be tired from traveling for the holidays, she reasoned. Or maybe she could be slightly anemic.



Mikayla's mother and father, Marlene and Juan Manuel, also had seen the change in their youngest child. They'd recently moved from California to Missouri. At first, they, too, thought it could be anemia or their daughter adjusting to the colder, gloomier weather in their new home state that kept them all indoors more.

But after the holidays, the usually active girl continued to be lethargic with no appetite. Results from bloodwork showed Mikayla's hemoglobin levels were alarmingly low. She was admitted to a local hospital

where she was given several blood transfusions during a four-day stay.

More than a week later, after Mikayla underwent a bone marrow biopsy, the couple received the devastating diagnosis: Mikayla had leukemia.

Doctors referred the family to St. Jude Children's Research Hospital in Memphis, a six-hour drive from where they lived. It was there that the couple learned Mikayla had acute myeloid leukemia (AML), a cancer of the blood and bone marrow that would require months of chemotherapy. Only about 500 children a year are found to have AML in the United States.

"Our world feels like it's upside down and forever changed," Marlene wrote on social media as she processed the news and the months of treatment ahead. "My heart hurts knowing that I cannot take this all away from her and at times it feels like it's just a nightmare."

The couple felt comfort knowing Mikayla would be treated at St. Jude. Mikayla's great-grandmother, Elvia, had donated to the hospital for a decade. Around the time Mikayla was diagnosed, Elvia received a certificate of appreciation for supporting St. Jude, which Marlene took as a sign that they were meant to go to Memphis.

GENERATIONS OF ST. JUDE FOLLOWERS

Marlene comes from a family with Mexican roots and with several members who have long been devout followers of St. Jude Thaddeus, the patron saint of hopeless causes.



More than a half-century before Mikayla arrived at St. Jude, her great-uncle, Edward Flores, was a Marine Corps serviceman attending naval aviation school in nearby Millington, Tenn., in the mid-1960s. He would travel by bus every day through Memphis. One day, he noticed for the first time a 10-foot-tall marble statue of St. Jude Thaddeus outside the research hospital. He thought of his mother, and immediately got off the bus.

His mother, Gertrude Flores, gave him a St. Jude medal before he left home for the military which he always carried with him. He wanted to send her a memento of his encounter with the statue. A figure of St. Jude in a local souvenir shop caught his eye.

"My mother always prayed to St. Jude, so I had it shipped to her, and she put it in a shrine at home," said Flores, a Vietnam War veteran. "It was there all the years I was in the military, and thereafter."

Edward Flores, who was diagnosed with cancer in 2007, said after Mikayla became a patient at St. Jude, he signed up to be a monthly donor.

The statue, now adorned with rosary beads and standing on a glass table in Elvia's home, continues to provide solace for the family. When Elvia was told of Mikayla's leukemia, she turned to St. Jude and prayed.

"She was such a little thing and I wondered why they have to go through it, but I don't have to question why, it just happens," she said. "I believed that St. Jude would help her, and the prayers would go far."

ANOTHER MOVE, THIS TIME TO MEMPHIS

Marlene and Juan Manuel were in the midst of the move to their new house in Missouri when Mikayla was diagnosed, and the couple had to figure out how they would be there for Mikayla, and at the same time for their oldest son, Mark. They decided Juan Manuel would stay behind with their son, while Marlene and Mikayla would move to a two-bedroom apartment at Target House, a long-term housing facility for St. Jude patient families.

Marlene's mother, who lived outside Los Angeles, would join them. She'd battled breast cancer two decades earlier.

Mikayla underwent five rounds of chemotherapy. Though the drugs killed the cancer cells, they also wiped out Mikayla's immune system, making her susceptible to other illnesses. After the last two rounds of chemotherapy, she developed several infections,

her mother said, which led to multiple and longer hospital stays.

Mikayla's grandmother said that there were some days and nights after chemotherapy that Mikayla would cry and that was difficult. Although she had known of St. Jude and its work in treating sick children, being on the hospital campus and at Target House gave her a better understanding of the different ways families are assisted.

"They fed us, they gave us cards to spend on groceries," she said. "This is wonderful that they can do this for families, without them I don't know what they would have done. It's like hitting the lottery without winning money."

Juan Manuel said Mikayla's illness reminded him that the world doesn't stop, even though they were dealing with one of the biggest challenges in their lives. He was grateful he didn't have to worry about paying medical bills.

"If they would have told me it would be a million dollars to fix your little daughter, then alright, I would put it on the credit cards, and I would have worked for the rest of my life," he said. "I would gladly do it and work for her health, but I didn't have to do that and that was wonderful."

MIKAYLA IS BACK

Eight months after Mikayla began treatment, Marlene is on the phone,



and the sounds of her nearly 2-year-old daughter, Mikayla, can be heard in the background. Mikayla is learning more words, and her shrieks and giggles can be heard as she plays around their house.

Her grandmother, who returned to California, said Mikayla is her old self.

"Our Mikayla is back," she said.

In September, the family was told they could return home because Mikayla is in remission.

Juan Manuel was happy to celebrate the holidays last year, and to see Mikayla with her grandmothers and extended family playing, laughing and eating home-made tamales.

"I'm just grateful," said Juan Manuel. "There is so much going on that you start losing faith in humanity, and then you see acts like this and that there are good people out there, and there is something greater out there, and that is caring for one another."





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HOW FAR ONE MOTHER WOULD GO



Racing time, fearful mom must go to another country to help her ill son back home in Moldova.

By Kristina Goetz - ALSAC

St. Jude Global launched in May 2018 to train clinical staff in hospitals and clinics around the world, share research and strengthen partner health systems so more children receive quality care across the globe. ALSAC, the fundraising and awareness organization for St. Jude Children's Research Hospital, teaches foundation members of The Global Alliance best practices in fundraising, marketing and communications. There are more than 100 hospitals and clinics, and 50 foundations in 57 countries that participate. Natalia Vilcu is president of one of those member foundations, Life Without Leukemia, in Moldova. Learn more about her foundation at viatafaraleucemie.md.



An hour before midnight Natalia Vilcu boarded a bus in Chişinău, the capital city of Moldova. The all-night trip across the Romanian border was one she'd taken before. On this clear September night in 2019, the bus was crowded with college students headed back for their fall semester. It was her mother's 69th birthday, and she dozed in the seat next to Natalia. But Natalia felt unsettled, her body electrified with worry. This trip was nothing to celebrate.

She prayed.

Natalia clutched a black backpack in her lap, careful

not to jostle or bang it. Only she and her mother knew what was hidden inside: A test tube wrapped in aluminum foil. Inside it was her 13-year-old son Gheorghe's bone marrow.

She had 12 hours to get to a lab in Bucharest before the sample was no longer viable.

Gheorghe had been diagnosed with cancer and treated, but he'd shown signs of relapse. The first test in Moldova showed the cancer was back. The second, that he was clear.

Labs in Moldova use older methods — cells under a microscope analyzed

by the human eye. Natalia and her husband, Ruslan, wanted a more sophisticated analysis, one from a machine called a flow cytometer. But there wasn't one in Moldova, a landlocked nation between Romania and Ukraine with a population of less than 3 million. The closest one was in Bucharest, 270 miles away. Seven hours in the best conditions.

The sun rose just before the bus pulled into Bucharest, a half hour before the lab opened.

She made it in time. The third and final trip her family would make for Gheorghe.

SOMETHING IS WRONG: GHEORGHE ISN'T HIS OPINIONATED SELF

Doctors diagnosed Gheorghe with a seizure disorder when he was 9. It stayed under control with medicine. But in March 2018, he was more sluggish than usual. He didn't want to go to school, do his homework. He wouldn't get out of bed.

He developed small bruises on his hands and legs. Something was wrong. He needed a doctor.

In the emergency room, Gheorghe's platelet count was critically low.

The first set of doctors said it could be his liver. Another suggested his throat. Maybe rheumatism because he had pain in his legs. His heart, perhaps.

For six days, Natalia and her husband waited for answers. Doctors gave Gheorghe blood transfusions to keep him alive. All that time he was alone. In Moldova, once children reach the age of 6 they aren't allowed to have a parent stay with them in the hospital.

"It's extremely painful," Natalia remembered. "And emotionally – now I understand it hurt him emotionally maybe more than medically."

Gheorghe was deteriorating. Doctors decided to take a bone marrow sample. But if Natalia wanted the results that day, she'd have to deliver the microscope slide to the lab herself.

By 1 o'clock. It was almost noon.

The lab was on the other side of town. And the city's recent March snowfall had snarled traffic.

Natalia raced to the oncological hospital. Not for one second in those six days of waiting did

Natalia consider the possibility that Gheorghe could have cancer.

Children with cancer could not be treated, she thought. Certainly not in Moldova. They died. And if there was any chance at all, they'd have to go to another country for treatment. The family would have to sell its flat, the car, and use every bit of savings.

DOCTORS KNOW YOUNG GHEORGHE HAS CANCER, BUT WHAT KIND?

Gheorghe had leukemia, but doctors weren't certain which kind.

There's acute lymphoblastic leukemia (ALL) and acute myeloid leukemia (AML). But the treatment protocols are different.

Doctors believed Gheorghe had AML – the one with the lower survival rate. It's the best they could offer with the equipment they had.

There was a machine in Romania that could give a more accurate picture, doctors told them. But they were on their own to get the sample there. And they'd have to pay for it.

At 9 p.m. on April 1, Gheorghe's dad, Ruslan, waited at the hospital door for the test tube with his son's bone marrow. He drove all night and slept in his car until the laboratory opened in Bucharest. It would be the first of three trips to Romania his family would make for Gheorghe.

'GOD'S PRESENT FOR HIS BIRTHDAY'

All Gheorghe could think about was getting out of the hospital to celebrate his 12th birthday.

"Give me 10 pills, and I will go home," he declared.

But Gheorghe needed more than pills. He had cancer.

Natalia didn't explain his diagnosis. The name of the disease didn't matter. Gheorghe wouldn't have understood anyway. He was just crushed when doctors told him treatment would last for months. He couldn't go home. And no one could visit his hospital room.

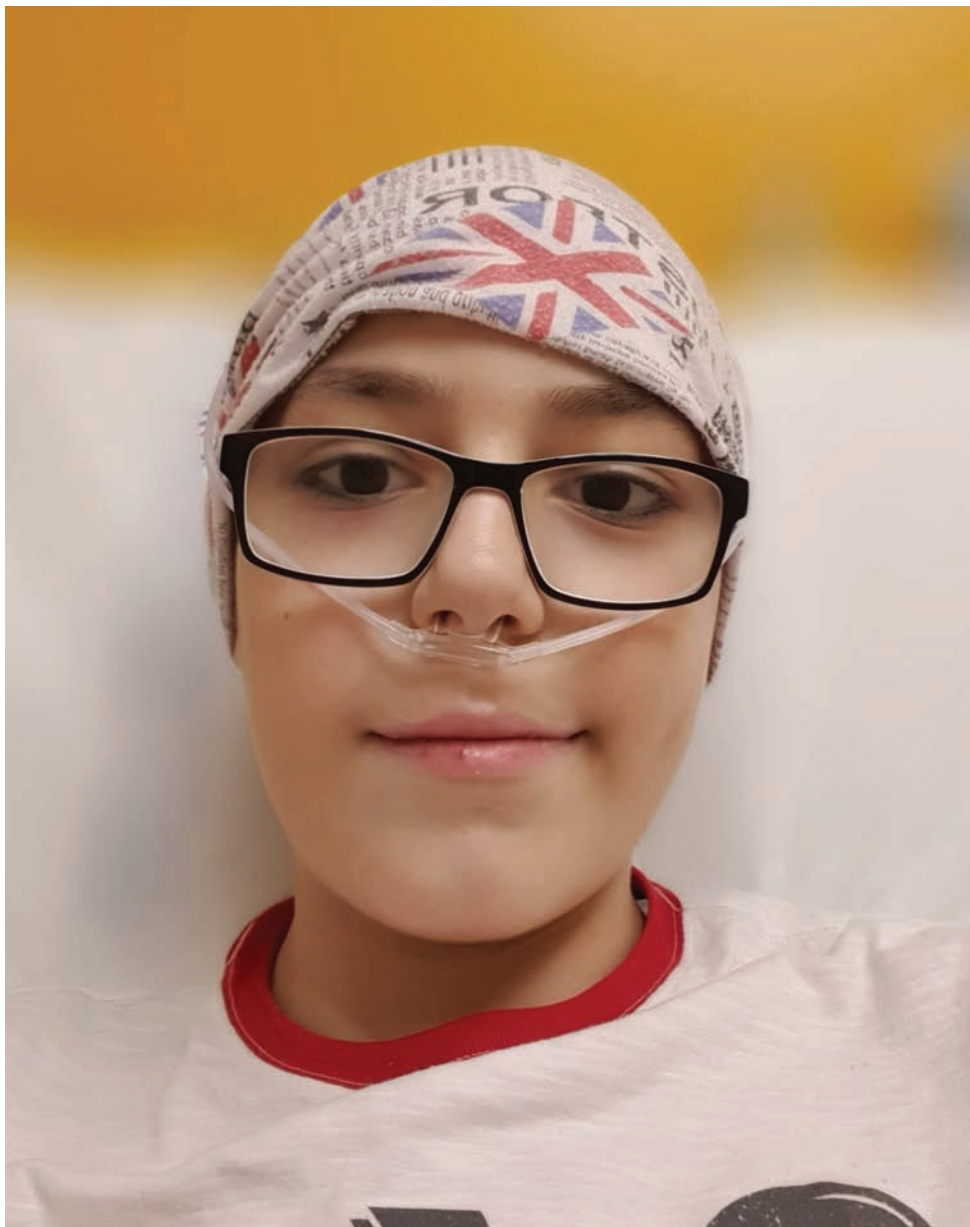
Finally, the day after Gheorghe's birthday, the results arrived. It was the first bit of good news they'd had.

Gheorghe had ALL not AML as doctors in Moldova had suspected. He had the disease with the better chances of survival. They could start treatment.

"I said it was like God's present for his birthday," Natalia remembered. But all this time, Natalia was terrified. She had little support and often couldn't get enough information from doctors. They talked strictly about treatment, nothing else.

They didn't offer referrals for a psychologist or explain the side effects of drugs. They sometimes referenced treatment not available in Moldova.

In December 2018, Natalia joined two moms who ran a volunteer association called Life Without Leukemia. It was the same time the group connected with ALSAC, the fundraising and awareness organization for St. Jude Children's Research Hospital in the United States. They had a program called the Global Alliance that connects hospitals and clinics all over the world with experts at St. Jude. It also brings together foundations in other countries that support those hospitals with ALSAC to learn fundraising from the world's largest healthcare charity; an organization that faced many of the same



challenges when it began its work in the U.S. 60 years ago.

Natalia was named president of Life Without Leukemia in January 2019, the same month her son Gheorghe was discharged from the hospital.

‘THESE ARE THE DAYS I CAN HARDLY REMEMBER’

By August 2019, Gheorghe’s blood work didn’t look good, so doctors wanted to check his bone marrow again.

At first results showed signs his leukemia had returned. A second test showed his numbers were good. Gheorghe would be alright.

But something gnawed at Natalia. What if the first test had been right all along? She had to be sure, and there was only one way to know the truth. She’d have to go back to Romania, this time with her mother at her side for the long bus ride.

“You always think things cannot be worse,” Natalia said. “But in our case, particularly at the end of

**“I said it
was like
God’s
present
for his
birthday.”**

– Natalia Vilcu

September – these are the days I can hardly remember. I don’t want to remember.”

What Natalia hadn’t told Gheorghe was that this third trip to Bucharest was one that not only held the truth of his diagnosis – but her own.

After Natalia dropped off the test tube with Gheorghe’s bone marrow for analysis, she met a doctor at another clinic across town who broke the unexpected news:

Natalia had breast cancer that had spread to her lymph nodes.

ONE FINAL TRIP: NO POSSIBLE CURE FOR GHEORGHE AT HOME IN MOLDOVA

It had been six days since Natalia and her mother traveled to Romania for the final time. And the results from the bone marrow analysis were still not in. Gheorghe was getting worse by the hour.

Doctors in Moldova didn't want to wait any longer. They decided to take another bone marrow sample. This time, there was a clear indication of relapse. Gheorghe needed a bone marrow transplant. And that wasn't possible in Moldova.

Natalia and her husband decided to try to get Gheorghe to Italy. It was his only chance to survive. Once she got him settled, she'd think about her own cancer treatment. Doctors said she, too, had no time to lose.

Within five days, on September 22, Gheorghe boarded a 7 a.m. flight, and by 11 a.m., he was in a hospital emergency room in Torino.

All his organs were enlarged – liver, kidneys and his heart. He didn't urinate for 26 hours. Because Gheorghe was retaining so much fluid, the 13-year-old weighed 180 pounds.

After 10 days of intensive treatment, doctors stabilized him. And by October 5, Gheorghe was strong enough to start chemotherapy again. Doctors were optimistic they could perform a bone marrow transplant. His sister, Ana, would be his donor.

On the third day of Gheorghe's chemotherapy treatment, he started to cough. Tests showed he had a fungal infection in his lungs. But doctors treated it and every 10 days ordered a new scan. He was stable.

Gheorghe painted to pass the time, mostly nature scenes he gave away to nurses and doctors he liked. He mixed a blue and purple palette on a black-as-night background with white flecks of twinkling stars – the cosmos. This one his mother kept.

'I WILL FLY TO THE COSMOS.'

On November 20, Gheorghe's most recent scan showed the fungal infection had spread, and the cancer was roaring back. His body could no longer resist. Doctors would make him comfortable.

Natalia called her mother. She wanted the whole family to fly in for Christmas to spend time with Gheorghe.

Piled in a two-room hospice apartment in Torino, Gheorghe told stories and fiddled with all the filters on his new phone. He chattered on about the Italian soccer players who'd visited the hospital several days before. He played with his brother.

It was hard for him to walk and breathe.

For Natalia, it was inconceivable that she could leave the room at any minute and come back to find her son no longer smiling at her.

On Saturday night, December 21, Gheorghe had his bath and put on new pajamas – a Christmas gift from grandma. He sat on the bed, cross-legged, like a sultan.

For the moment, Gheorghe and Natalia were alone. His words bubbled up, unexpected, like a confession.

"You know, mom, you love me so much, and I love you so much," he told her. "For me, we will always be No. 1."

Natalia protested. There were so many people in his life to love: Daddy, Grandma, Ana – even his twin, Andrei. But Gheorghe persisted. She had given him everything he wanted in this life.

"I received everything I wanted, and now I will probably fly to cosmos," he said.

Natalia was incredulous. She would finish her treatment. Gheorghe would finish his. They would go home.

"No," he said. I will fly to cosmos."

He was calm, peaceful. That was their last conversation. In middle of the night, he had a breathing crisis. Doctors increased his sedation and pain medication. He wasn't afraid or suffering. He slept all day December 22.

On December 23, at 9 o'clock in the morning, Gheorghe's heart stopped beating.

A MOTHER'S VOW: NATALIA DEVOTES HER LIFE - 'AS LONG AS IT MAY LAST' - TO OTHER MOLDOVAN KIDS WITH CANCER

Natalia's final wish was to bring Gheorghe home before the turn of the new year. They made it: 10 p.m. December 31.

In the days that followed, Natalia was engulfed with grief. She traveled back to Romania on Orthodox Christmas Day for chemotherapy.

She was exhausted and told her colleagues at Life Without Leukemia she couldn't continue. For the mission she'd fought so hard to promote, she was giving up.

Natalia was surprised by their reaction. They were prepared to follow her, they said, but not to lead. Volunteers like Irina Rotari loved to help. But Natalia was the lifeblood. She was a force that simply kept on even when people said no.



“I will fly to the cosmos.”

– Gheorghe Vilcu

would raise money on its own to buy a flow cytometer – the machine Gheorghe’s family had traveled to Romania for so many times.

They raised 70,000 Moldovan leu, but it would take 2.6 million to buy one. That’s \$148,000 U.S.

Natalia and Irina went on television, granted interviews to newspaper reporters. Life Without Leukemia stayed in the press.

Then, in August, Natalia received an unexpected phone call. The cancer hospital in Chişinău had decided to allocate money to buy that machine, the flow cytometer.

And now because of Natalia, untold numbers of moms and dads who traveled by bus to Romania with test tubes wrapped in aluminum foil to have their children’s bone marrow analyzed won’t need to make that desperate journey any longer.

Because this year there’ll be a flow cytometer in Chişinău and their children can be diagnosed and treated at home.

At home in Moldova.

Postscript: Natalia finished chemotherapy in February 2020 and radiation therapy later that year. She continues to have regular health checks in Romania, which show her condition is stable.

“She’d say, ‘Ok, we’ll try. We’ll resolve. We’ll solve. We’ll do it. We’ll think of how,’” Irina said. “But not no. Never no.”

Without her, Life Without Leukemia would dissolve.

Still, Natalia was unsure of her own prognosis. She was so sick from chemotherapy she couldn’t make it to the breakfast table. She wanted to spend as much time with her family as she had left.

But the memories were too painful to keep reliving alone in her bed. And she could scarcely stomach the thought everything she’d worked for would be lost. So, she made a vow:

“I will devote the rest of my life, as long as it may last – a year, 10 years, 40 years, I don’t know how much. But I will try to continue what I have started. And to make this association have a very loud voice in changing things.”

She wanted a team, a strategic plan. They needed a campaign to press the hospital for better equipment, renovation of the pediatric unit,

and stronger communication from doctors. But they would work together, not as adversaries.

Natalia got more involved with ALSAC in the United States. She never missed a monthly call, a training session, a webinar even as she received treatment for cancer in Romania.

It was like breathing new air – like dreaming awake.

Natalia still wasn’t being paid as head of the association but hired Irina Bordeianu, another patient mom who came from an international advertising agency in Moldova.

Irina created branding, reached out to media and, in 2021, launched a campaign called “I want to be treated at home in Moldova.” The association’s manifesto highlighted one of the most pressing problems for pediatric cancer patients in the country: limited access to early diagnostics.

So, Life Without Leukemia would make it a priority. The organization

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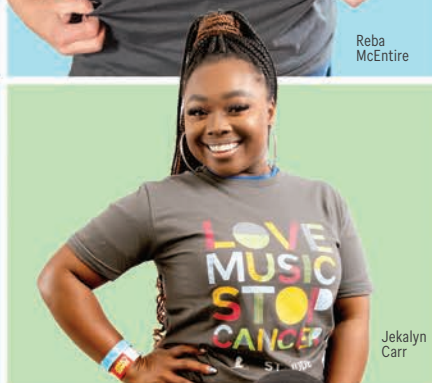
Kane
Brown



Luis
Fonsi



Jonathan
McReynolds



Jekalyn
Carr



Banda MS

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