



2024

ALSAC / ST. JUDE
ANNUAL REPORT



St. Jude Children's
Research Hospital

Finding cures. Saving children.
ALSAC • DANNY THOMAS, FOUNDER



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. Consistent with the vision of our founder, Danny Thomas, no child is denied treatment based on race, religion or a family's ability to pay.

ALSAC® – American Lebanese Syrian Associated Charities – is the fundraising and awareness organization for St. Jude. ALSAC is dedicated solely to raising the funds and awareness to operate and maintain St. Jude, now and in the future.

This spread:
St. Jude patient **Rylee**,
solid tumor
pictured with her mom

Cover:
St. Jude patient **Ava**,
solid tumor
pictured with her mom



Rylee was referred to St. Jude for treatment for neuroblastoma. Her resilience and sunny disposition earned her the nickname “Smiley Rylee” at St. Jude.

Scan the QR code to read more inspiring patient stories.

PROMISING

Lead for Researchers

St. Jude study discovers a way that could keep soft tissue cancer from returning.

By Ruma Kumar - ALSAC

The first signs of Calvin's cancer emerged after a family bike ride one summer. His mother, Tiffany, noticed a bump on his back and his right leg was swollen. A CT scan and biopsy found stage IV rhabdomyosarcoma, a cancer of the soft tissue.

Calvin was 10 and had tumor growth in multiple places, including his pelvis, hip, stomach and lung. Doctors in Nebraska referred the family to St. Jude Children's Research Hospital®, more than 900 miles from their hometown.

At St. Jude, Calvin underwent nearly 18 months of treatment that included chemotherapy, photon radiation and proton radiation. It was a tough protocol, but successful. He returned home with no evidence of cancer in December of 2019 wishing for snow – and got it.

But just months later, in the summer of 2020, scans revealed Calvin's cancer had returned.

It was a devastating setback – the kind that doctors and scientists at St. Jude are working hard to prevent.

Cancer recurrence like Calvin's is a major barrier to improving outcomes in children with solid tumors. It was the driving force behind a recent study led by doctors and scientists at St. Jude that identified the rare cells that survive conventional treatment and cause relapse in patients with a subtype of rhabdomyosarcoma.

"I think that every oncologist has had a patient who responded great to therapy, only to have their cancer return months or years later. It's a heartbreaking experience," said Anand Patel, MD, PhD, an assistant member, St. Jude faculty with the Department of Oncology at St. Jude and an author of the recent study.

The study is a result of intensive ongoing efforts at St. Jude to develop ways to more effectively kill those few cells that remain after treatment to improve survival for the roughly 400 children who are diagnosed with rhabdomyosarcoma each year in the United States.

"Prior to this study, we didn't know how some cells survive and continue to grow after treatment," said Michael Dyer, PhD, the

corresponding author of the study and co-founder of the Childhood Solid Tumor Network at St. Jude. He called the results of the study "exciting and impactful."

Revolutionary science

In that study, St. Jude doctors and scientists used new single-cell sequencing technologies, which have revolutionized cancer biology over the last five years. These new techniques allowed researchers to study individual cells within a tumor and gave the team an unprecedented amount of information about how tumors are structured, Patel said.

"We, as a field, have struggled to find safe and effective therapies for children with high-risk solid tumors, particularly sarcomas," Patel said.

As a result, therapy and outcomes for these children haven't significantly changed in more than 30 years, he said.

"We need new strategies to help these children," Patel said. "I hope that our work can point towards a new approach."

St. Jude patient **Calvin**, pictured at St. Jude in December 2019



St. Jude patient **Calvin** (left) and his family walk the halls of St. Jude during one of his regular checkups in July 2023.



Patel and his colleagues found three different types of cells that mimic different stages of muscle development. Scientists then used experimental models generated from tissue samples of 18 rhabdomyosarcoma patients to start charting what happens to tumor cells as they are exposed to chemotherapy.

They found one of the three cell types was resistant to chemotherapy, and these cells seemed to have the same unique patterns of signaling activity. So, Patel and his team repurposed drugs often used for lung cancer and combined them with traditional chemotherapy for rhabdomyosarcoma. That innovative combination killed the cells that caused recurrence of the soft tissue cancer, a promising lead that is changing the way doctors approach cancer treatment.

“Our study shows that, with the right combination of patient samples, experimental models and technology, we can understand what happened to these patients. With this understanding, we can improve therapies,” Patel said.

Broad implications

Dyer and Patel believe the recurrence of cancer due to a small amount of cancer cells that survive treatment is a common mechanism across solid tumors, so they are ramping up efforts to tackle this challenge more broadly.

Instead of just focusing on drugs that reduce the total size of the tumor, doctors and researchers also need to consider any residual cells that may survive treatment, Dyer said.

“We call this new approach ‘total clonal therapy’ because it focuses on eliminating all the clones of cells with particular emphasis on the rare clones that we previously didn’t know were the culprits leading to disease recurrence,” he said.

Research like this provides hope to patients like Calvin, who is now 16 and thriving after his relapse.

Looking back at their cancer journey, Calvin’s mother, Tiffany, said, “We had no idea what we were up against. No idea. We just knew that St. Jude was the best place. They have the best doctors and had the best options.

“We didn’t hesitate to come,” she said, “At all.”



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

Research Highlights

July 1, 2023 – June 30, 2024

Preventing neurodevelopmental disorders through genetic compensation

Investigator: J. Paul Taylor

Published: Journal of Clinical Investigation | July 2023

St. Jude researchers have discovered how a genetic mutation linked to developmental delays causes problems in brain cells – and how the body tries to fix it. Their findings reveal a backup system in our genes that could lead to new treatments for children with neurodevelopmental disorders.

St. Jude scientists identify T-cell differentiation nodes to improve cancer-killing

Investigator: Hongbo Chi

Published: Nature | November 2023

Researchers at St. Jude have charted the regulatory networks of transcription factors in T cells within tumors, discovering methods to amplify their anticancer effectiveness. By examining the transcription factors involved in the differentiation states of T cells in cancer, scientists identified strategic ways to either promote or inhibit T-cell differentiation. Utilizing this knowledge, they successfully enhanced anticancer activity in preclinical models. These groundbreaking findings hold significant promise for cancer immunotherapy.

CRISPR kickstarts combination drug discovery for neuroblastoma

Investigators: Jun Yang, Paul Gieleher, Adam Durbin

Published: Nature Communications | November 2023

St. Jude researchers have used CRISPR gene editing to find new drug combinations for childhood neuroblastoma, which mutates rapidly and resists single-drug therapies. Inspired by Dr. Donald Pinkel, inaugural St. Jude CEO and director, and his combination therapy for pediatric acute lymphoblastic leukemia, researchers used CRISPR for rapid, scalable screening of drug

combinations, aiming to improve neuroblastoma treatment outcomes and survival rates.

Leveraging machine learning sparks innovation in bone marrow transplant

Investigator: Akshay Sharma

Published: Blood Advances | January 2024

St. Jude researchers have integrated technology with clinical expertise to improve risk prediction for pediatric bone marrow transplant patients. The tool enhances survival predictions at 100 days, one year and two years post-transplant, allowing for earlier identification of high-risk patients and timely interventions. The study emphasizes the potential of machine learning to refine clinical decision-making and improve patient outcomes in bone marrow transplantation.

Acute pediatric critical illness definition enables global research

Investigators: Anita Arias and Asya Agulnik

Published: The Lancet Global Health | January 2024

St. Jude researchers collaborated with global experts to establish a consensus definition of acute pediatric critical illness that applies across diverse healthcare settings, including lower resourced countries. Previous definitions were based on resources available in highly resourced countries, limiting research and care improvements elsewhere. The new, more inclusive definition will enable researchers to study pediatric critical illness more effectively worldwide, ultimately leading to better outcomes for critically ill children.



Scan this QR code for St. Jude media resources.

Novel bispecific CAR T-cell immunotherapy for childhood leukemia

Investigators: Paulina Velasquez and Madan Babu

Published: Cell Reports Medicine | February 2024

St. Jude scientists improved CAR T-cell immunotherapy for acute myeloid leukemia (AML), demonstrating enhanced efficacy in laboratory models. To address common challenges with CAR T cells, the researchers developed a novel approach using a small peptide that helps the therapy better target and eliminate cancer cells. The study also highlighted how computational tools, including AlphaFold predicted protein models, can provide insights into how structural factors influence antigen recognition and treatment effectiveness.

Researchers turn back the clock on cancer cells to offer new treatment paradigm

Investigator: Charles W.M. Roberts

Published: Nature | March 2024

St. Jude scientists have developed a novel approach to treating rhabdoid tumors, an aggressive cancer lacking the tumor suppressor protein SMARCB1. By deleting or degrading the quality control protein DCAF5, they were able to reverse the malignant state of these cancer cells, effectively returning them to a more normal condition. This method offers a promising new treatment paradigm that focuses on restoring normalcy to cancerous cells rather than relying solely on cytotoxic therapies.

Study flips treatment paradigm in bilateral Wilms tumor, shows resistance to chemotherapy may point toward favorable outcomes

Investigator: Andrew Davidoff

Published: Journal of the National Cancer Institute | March 2024

St. Jude scientists demonstrated that in bilateral Wilms tumor, a type of kidney cancer affecting both kidneys, resistance to chemotherapy can actually indicate a more favorable tumor composition and a positive prognosis. The study revealed that tumors not responding to chemotherapy are predominantly composed of stromal cells with a distinct growth pattern. This insight suggests that instead of continuing ineffective chemotherapy or conducting unnecessary biopsies, kidney-sparing surgery may be most beneficial for these patients.

Preventing sepsis during treatment for pediatric cancer might prevent neurocognitive problems decades later in survivors

Investigators: Kiri Ness and Josh Wolf

Published: JAMA Network Open | March 2024

Children undergoing cancer treatment are at higher risk of life-threatening infections due to weakened immune systems. A St. Jude-led study reveals that sepsis can cause significant organ dysfunction and septic shock, but most organs don't experience long-term damage. The research suggests that preventing sepsis during treatment may help mitigate long-term neurocognitive issues in childhood cancer survivors, emphasizing the potential benefit of sepsis prevention for brain health.



Scan this QR code for stories of impact and discovery at St. Jude.

St. Jude patient **Liliana**, liver cancer pictured with her mom



St. Jude Survivorship Portal

New data platform incorporates clinical and genomic information from thousands of cancer survivors.

By Ruma Kumar - ALSAC

Scientists from St. Jude Children's Research Hospital® have announced the first data portal for sharing and analyzing pediatric cancer survivorship data.

Details on the survivorship portal by St. Jude and its ability to facilitate breakthroughs in pediatric cancer survivorship research were published in *Cancer Discovery*, a journal of the American Association for Cancer Research.

The portal integrates data involving whole genomic sequencing, treatment exposure and outcomes – creating an unprecedented research system that houses 400 million

genetic variants from more than 7,700 childhood cancer survivors.

“With the portal, with just one click, you can make new discoveries,” said co-corresponding author Jinghui Zhang, PhD, St. Jude Department of Computational Biology. “In the past, people would spend weeks downloading, analyzing, organizing and summarizing data into figures – now you can do all that in just minutes.”

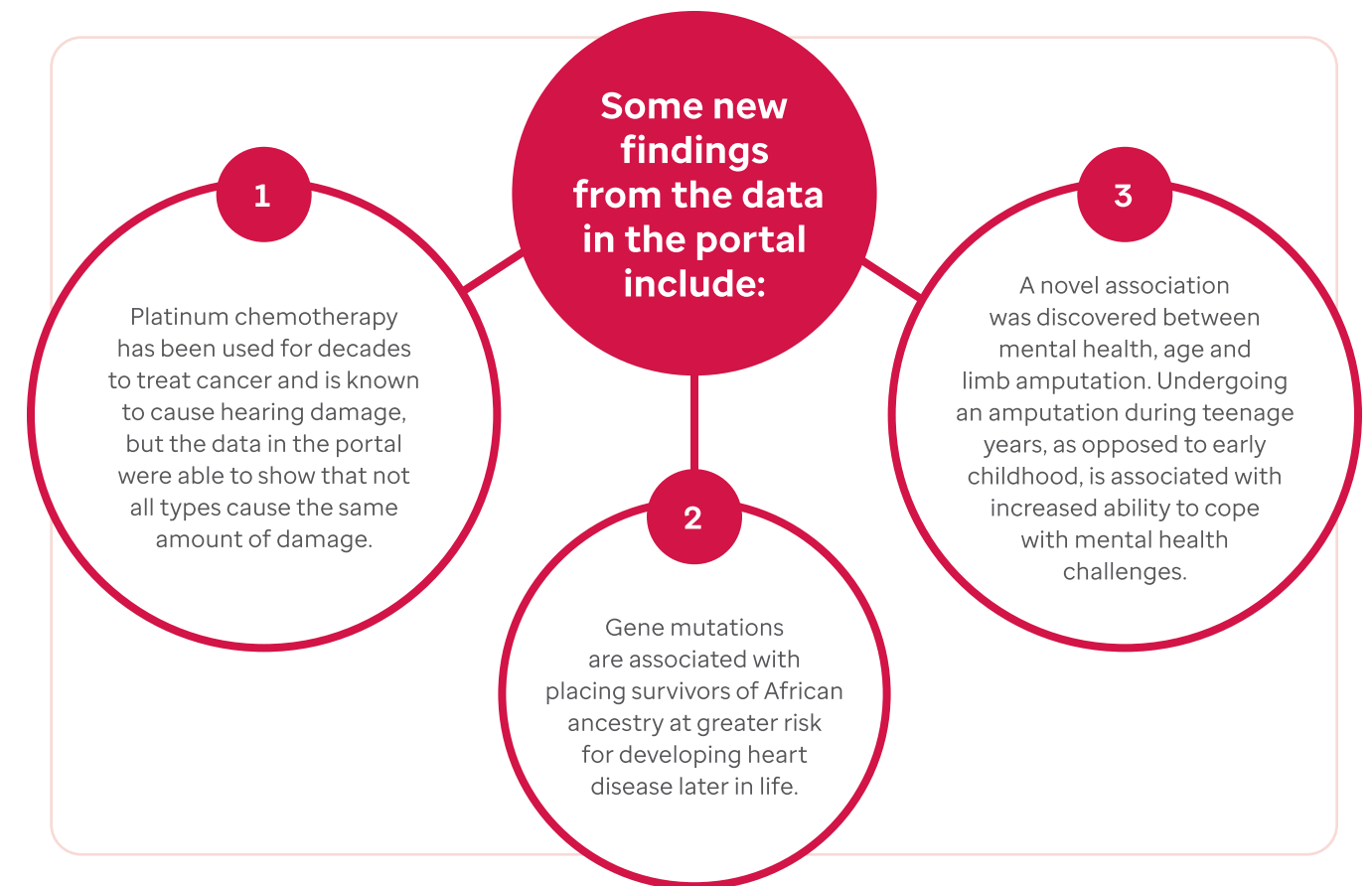
The portal is free to use and open access as a part of the St. Jude Cloud ecosystem.

Research at St. Jude has been instrumental in increasing childhood cancer survival rates over the past 63 years, and today approximately 85% of childhood cancer patients in the U.S. are successfully treated and alive five years post-diagnosis. Research at St. Jude has shown that experiencing cancer as a child can have long-term implications on the survivor's health, placing increased focus on finding interventions to improve and maintain the quality of life for survivors and developing new cancer therapy with reduced toxicity.

St. Jude is amassing a wealth of survivorship data through two key efforts: the Childhood Cancer Survivor Study, a collaborative effort representing 31 institutions spanning North America and compiling data on a range of childhood cancers, and the St. Jude Lifetime Cohort Study (St. Jude LIFE). St. Jude LIFE is a long-term follow-up study for St. Jude patients where participants are brought back to the hospital every five years for an assessment.

All the data generated from those two cohorts can now be found in the portal, providing new insights and greater understanding of how childhood cancer treatments affect survivors later in life.

“There are half-a-billion clinical data points in the portal, hundreds of terabytes of genetic data supported by dynamic and interactive visualization analysis,” said Xin Zhou,



PhD, St. Jude Department of Computational Biology.

“We aren't just sharing data,” said Yutaka Yasui, PhD, St. Jude Department of Epidemiology and Cancer Control. “We are facilitating the analysis and visualization of data and making it free to anyone – that's a tremendous resource for the cancer survivorship community.”



Your gift helps fuel the lifesaving work of St. Jude around the world.
stjude.org/ImpactGiving

St. Jude survivors left to right:
Angelique, Angelina, Cross, Katherin, Scott, Emily, Mariangeles, Javon, Jakayla



GENEROSITY COMES FULL CIRCLE

Jaime and Irma contributed to St. Jude for years – then their granddaughter became a patient.

By Monsy Alvarado - ALSAC

Jaime became a supporter of St. Jude Children's Research Hospital® years ago to give thanks for his seven healthy children.

He started giving occasionally after seeing information on television and later became a St. Jude Partner in Hope® by giving monthly. When he signed up, he remembered a neighbor from years ago when he lived in New York who had a son with cancer and a colleague whose daughter had been living with muscular dystrophy. It was more reason to donate, he thought. His wife, Irma, was on board.

"I did research and looked into the hospital, and I was even more thankful, and I wanted to give consistently," said Jaime, who lives in Puerto Rico. "I wanted to help other children and to improve their quality of life."

Jaime had never visited St. Jude, but as a donor, he received mailings that gave him a glimpse into treatment and research breakthroughs. Jaime never imagined one day St. Jude would be a lifeline for someone in his family.

Janelle walks with her dad, Jan Louis, following an appointment at St. Jude.



In 2020, his youngest daughter, Genesis, gave birth to twin girls, Janelle and Amalia. Jaime and Irma were elated as they watched the girls grow and often witnessed milestones while they babysat. But when the twins were more than a year old, Janelle started to regress in her development. The toddler who could once sit on her own would fall over. Janelle also could no longer stand, which was something she had been doing.

Tests later revealed that Janelle had medulloblastoma, a fast-growing brain tumor of the cerebellum. The cerebellum controls balance and coordinated movements.

Janelle underwent surgery in Puerto Rico to remove the tumor and was later referred to St. Jude.

"I thought, 'Thank you, God is good,'" Jaime recalled when he learned Janelle was going to be treated at St. Jude. "I never thought that my monthly donation would one day help my granddaughter, but that is the way it was. Not only my donations, but the donations of all those who give, and I'm thankful to them. Today, it's Janelle, but tomorrow it will be another child."

Janelle traveled to St. Jude in Memphis, Tennessee, with her mother and father, Jan Louis, while Amalia stayed in Puerto Rico with her grandparents. Jaime and Irma worried about the diagnosis and what was to come for their granddaughter.

"It was something very difficult for us, thinking about what we must go through," Irma said. "We knew that there were children who had gone through it, but you must live it to know the pain."



Jaime and Irma hug their granddaughter, St. Jude patient Janelle, at the family's home in Puerto Rico.

At St. Jude, Janelle received chemotherapy followed by proton radiation therapy. She also underwent a procedure to replace a shunt in her brain.

Jaime and Irma video chatted with their daughter daily to get updates on Janelle. They saw her improvements and looked forward to hearing about the gains she made during physical therapy sessions.

"We saw the miracle in our granddaughter. I saw it and I continue to see it every day," Irma said. "Everything that Janelle needed, St. Jude gave her. The greatest gift that St. Jude has given me is the life of my granddaughter."

Janelle went home to Puerto Rico in June of 2023 where her grandparents were waiting with open arms and an emotional

gathering of family and friends. Janelle returns to Memphis for regular checkups.

"The pain and anguish I felt began to heal because Janelle was here and Amalia is back with her parents and all four of them are together as a family," Irma said.

Jaime and Irma said they encourage others to donate to St. Jude.

"To all those who support St. Jude, keep giving because you are giving life to children so they can live happy – not only my granddaughter, but all those children who are being treated at St. Jude," Irma said.



You can help ensure patients like Janelle get to spend more time with their grandparents. stjude.org/PartnersInHope

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Financial Highlights

St. Jude patient **Luis Martin**,
bone cancer
pictured with his mom

Years ended June 30 (in thousands)

2024 2023

REVENUES

Total Support	2,568,630	2,457,562
Net Patient Service Revenue (Insurance Recoveries)	126,054	153,766
Research Grants	163,916	147,585
Net Investment Income	856,670	479,296
Other	75,222	60,010
TOTAL REVENUES	3,790,492	3,298,219

EXPENSES

Program Expenses		
Patient Care Services	695,614	662,358
Research	823,242	675,380
Education, Training and Community Support	343,087	311,651
TOTAL PROGRAM EXPENSES	1,861,943	1,649,389
Fundraising	419,902	403,601
Administrative and General	387,497	318,442
TOTAL EXPENSES	2,669,342	2,371,432
GAIN (LOSS) ON DISPOSAL OF PROPERTY AND EQUIPMENT	134	(534)
Change in Net Assets	1,121,284	926,253
Beginning Net Assets	10,201,922	9,275,669
ENDING NET ASSETS	11,323,206	10,201,922

St. Jude patient **Miguel**,
soft tissue cancer
pictured with his mom



**St. Jude Children's
Research Hospital**

Finding cures. Saving children.
ALSAC • DANNY THOMAS, FOUNDER

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