FOR IMMEDIATE RELEASE



PEDIATRIC CANCER RESEARCH FOUNDATION ANNOUNCES 2024 GRANT RECIPIENTS TO PROPEL DISCOVERY OF NEW AND IMPROVED TREATMENTS FOR PEDIATRIC CANCERS

IRVINE, CA, July 22– The Pediatric Cancer Research Foundation (PCRF), a nonprofit focused on transforming pediatric cancer care by accelerating research breakthroughs, today announced the 21 recipients of its 2024 research grants. The researchers will receive \$1,965,000 in funding to explore new and better treatments for pediatric cancers.

Five scientists are receiving PCRF funding for the first time. Sixteen scientists are receiving funding to support ongoing research projects. All grant recipients are conducting their research at top institutions across the US, advancing knowledge of how to treat various types of childhood cancers. Many past researchers funded by the Pediatric Cancer Research Foundation have successfully received NIH funding after proving their initial concepts with the support of the Foundation's philanthropic investment.

"We are enthusiastic about supporting these researchers in expanding our scientific understanding of pediatric cancers, advancing cures and transforming the way we treat children with toxic treatments," said Danielle Fragalla, chief executive officer, Pediatric Cancer Research Foundation. "Our scientific committee and peer reviewers have spent many hours identifying this year's awardees and we are optimistic about the potential they represent for propelling innovation and modernizing our approach to treating childhood cancers."

The 2024 grant recipients include :

• Susann Brady-Kalnay, PhD

Case Western Reserve University Hospital Use of magnetic resonance fingerprinting for determining response to immunotherapy in pediatric brain tumors

• Mitchell Cairo, MD

New York Medical College, Marie Fareri Children's Hospital Cancer genetics, tumor immunology and targeted treatments for childhood and adolescent hematological malignancies and solid tumors

• Brian Crompton, MD

Dana-Farber Cancer Institute Prospective validation of a prognostic liquid biopsy approach for pediatric Ewing sarcoma

• Thomas De Raedt, PhD

Children's Hospital of Philadelphia Elucidating how NF1 loss cooperates with SETD2 to drive pediatric high-grade glioma formation

Anat Erdreich-Epstein, MD, PhD Children's Hospital Los Angeles

Preclinical study to translate therapy using DNA hypomethylating agents for pediatric high-grade glioma

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Gregory Friedman, MD

MD Anderson Cancer Center Directed drug delivery for pediatric high-grade glioma

• Silpa Gampala, PhD

Indiana University Decoding metabolic dependencies of MPNSTs and its microenvironment

• Zhaohui Gu, PhD

Beckman Research Institute of the City of Hope Single-cell dissecting of high-risk B-cell acute lymphoblastic leukemia

• Rintaro Hashizume, MD, PhD

University of Alabama at Birmingham Intranasal delivery of targeting nanoliposomal therapeutics for pediatric glioma

Alex Kentsis, MD

Memorial Sloan-Kettering Cancer Center Curative epigenetic therapies of refractory pediatric sarcoma

John Ligon, MD

University of Florida Investigating the immune response to RNA-nanoparticle vaccines and use of these vaccines in combination with immune checkpoint inhibitors for metastatic osteosarcoma

• Kyle MacQuarrie, MD, PhD

Ann & Robert H. Lurie Children's Hospital of Chicago Chemotherapy resistance and nuclear organization in rhabdomyosarcoma

Michelle Monje, MD, PhD

Lucile Packard Children's Hospital Stanford Therapies for high-grade glioma

Theodore Moore, MD

Mattel Children's Hospital, UCLA Phase I/II therapeutic research trials and development of new treatment modality for incurable brain tumors

• Ashley Plant-Fox, MD

Ann & Robert H. Lurie Children's Hospital of Chicago Combination immunotherapy for diffuse intrinsic pontine glioma (DIPG)

• Christine Pratilas, MD

Johns Hopkins University School of Medicine Targeting SHP2 as a therapeutic strategy in fusion-negative rhabdomyosarcoma

• Kathleen Sakamoto, MD, PhD

Lucille Packard Children's Hospital Stanford Targeting mitochondrial pathways in pediatric acute myeloid leukemia (AML)

• Elliot Stieglitz, MD

University of California, San Francisco Benioff Children's Hospital TACL2020-004: A risk stratified clinical trial for patients with newly diagnosed juvenile myelomonocytic leukemia (JMML)

MORE

• Masataka Suzuki, PhD

Baylor College of Medicine Immunotherapy and CAR NK cell therapy for pediatric sarcoma

• Rajkumar Venkatramani, MD

Texas Children's Cancer and Hematology Center Molecular characterization of undifferentiated sarcomas

• Leo Wang, MD, PhD

Beckman Research Institute of the City of Hope Testing the signaling and activation of T cells expanded in immunotherapy

The selected grant recipients were determined using the following criteria:

- Probability of an advance in prevention, diagnosis or treatment for the near-term
- Novelty of the concept and strategy
- Clarity of presentation
- Overall plan for bringing the research findings to clinical application
- Experience, background and qualifications of the investigators
- Adequacy of resources and environment (facilities, patients, etc.)

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About the Pediatric Cancer Research Foundation (PCRF)

Determined to transform pediatric cancer care by accelerating research breakthroughs, the Pediatric Cancer Research Foundation has one goal: to make it possible for all children facing childhood cancers to beat their disease and realize their full potential. Overseen by scientific thought leaders, its rigorous and competitive process for awarding research grants has contributed to pivotal advancements in the areas of non-Hodgkin lymphoma, immunotherapy/CAR T cells, osteosarcoma, juvenile myelomonocytic leukemia, and acute myeloid leukemia. The Pediatric Cancer Research Foundation is a GuideStar Platinum-rated charity. Powering Cures, Realizing Futures, its inspiring motto, encapsulates the Foundation's motivation and commitment. For more information, please visit www.PCRF-kids.org or follow us @PCRF_KIDS.

About Childhood Cancer

One in every 285 children in the US will be diagnosed with cancer by the end of their teens and more children under 20 years of age will lose their lives to cancers than any other disease. Due to research advances, overall survival rates for pediatric cancer patients have grown by 70 percent in the past 40 years. Still, about 20 percent of kids with pediatric cancers do not survive today. Of those who do, two-thirds will suffer long-lasting chronic health conditions from their care and one quarter will face a severe or life-threatening later life effect from their treatment. This is because most current pediatric treatments are decades old, derived from adult oncology and too potent for developing bodies. Modern research focuses on advancing science that addresses the unique characteristics of pediatric cancers, including developing treatments for some cancers that presently have no known protocols. Achieving more breakthroughs, so all children with cancer emerge healthy after treatment, requires dramatically increasing research momentum. That starts with raising and investing more money in pediatric cancer research.