Summer 2020

PULSE

FINDING CURES STARTS HERE:

25 YEARS OF INNOVATION & PROGRESS







PULSE

A Publication for Friends of the Lymphoma Research Foundation

LYMPHOMA RESEARCH · FOUNDATION

Pulse is a publication of the Lymphoma Research Foundation, providing the latest updates on the Foundation and its focus on lymphoma research, awareness and education.

The Lymphoma Research Foundation is devoted to funding innovative lymphoma research and serving the lymphoma community through a comprehensive series of education programs, outreach initiatives and patient services.

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The Lymphoma Research Foundation (LRF) understands that a diagnosis of lymphoma may bring about many different emotions and that everyone's journey is personal.

LRF's Living with Lymphoma podcast is here to help the lymphoma community better understand how to cope with the unique circumstances that a diagnosis of lymphoma presents.

Listen in as experts and patients discuss psychosocial topics related to a diagnosis with lymphoma and other forms of cancer. Join Izumi Nakano and Victor Gonzalez from the Foundation's Helpline as they explore various survivorship topics.

Visit lymphoma.org/podcast

to listen and subscribe to upcoming episodes.

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Webinar

9.23
Virtual Tucson, AZ
Ask the Doctor About Lymphoma

10.13
Virtual Dallas, TX
Ask the Doctor About Lymphoma

10.23 - 10.25
Virtual North American
Educational Forum on Lymphoma

Despite COVID-19, there is no interruption in our commitment to providing up-to-date patient education for lymphoma. While in-person educational events have been postponed, the Lymphoma Research Foundation (LRF) is using digital platforms to deliver virtual patient education programs around the country, including Virtual Ask the Doctor About Lymphoma Lymphoma Workshops and the North American Educational Forum on Lymphoma, for people with lymphoma and their loved ones.

Whether you are newly diagnosed, want detailed information about your lymphoma subtype, are looking for ongoing support, or seeking help with long-term survivorship, LRF is here to help.

Visit **lymphoma.org/programs** to register and learn more.

FROM THE CEO

This year marks 25 years of the Lymphoma Research Foundation's commitment to eradicate lymphoma — 25 years of innovation and progress that have changed the way we approach lymphoma research — and 25 years of impacting the lives of all those touched by this disease.

Thanks to our devoted community of supporters, the Foundation has become one of the nation's largest funders of lymphoma-specific research and provider of comprehensive education for lymphoma patients, survivors, caregivers and healthcare professionals. Guided by our expert scientific advisors, LRF funds the very best science — research that has the greatest potential to impact patients — and ensures that the brightest lymphoma clinicians and researchers remain in the field. As a result, cures for lymphoma start here — with us, and you — and bring us closer to a world without lymphoma.



We are excited to share this special 25th Anniversary commemorative issue of *Pulse*, which highlights our achievements over the past 25 years, supporters who have made this milestone possible and our plans for the future.

The next generation of lymphoma scientists will certainly play an important role in our future, and so we are also pleased to introduce you to the 2020 LRF Clinical Investigator Career Development Award (CDA) and Postdoctoral Fellowship grantees. The CDA and Postdoctoral Fellowship programs are cornerstones of our research program, providing grants to early-career scientists with the greatest potential to contribute to the development of new lymphoma therapies and diagnostic tools. Amidst the continuing COVID-19 pandemic, funds for early-career scientists continue to decrease, and we are proud to continue our commitment to these scientists and the lymphoma community. Thank you for your continued support to make this important work possible.

This issue also features articles on biomarker testing, an advanced technology that can identify molecular or genetic differences specific to an individual patient's lymphoma. We focus on the role of this testing in the era of precision medicine and the importance of patient education and advocacy in the use of biomarker tests. We are also pleased to share the impact that the philanthropy of LRF donors have had on the Foundation's mission, and the promise and hope their generosity brings.

Thank you all for your continued support of shared mission to eradicate lymphoma forever.

Sincerely,

Meghan Gutierrez Chief Executive Officer

10TH ANNIVERSARY

RIGHTIT RED for Lymphoma®

September is Blood Cancer Awareness Month, a time for members of the lymphoma community to harness their power, drive awareness, educate those around them, and raise critical funds to support life-saving research.

Light it Red for Lymphoma is the Lymphoma Research Foundation's grassroots Blood Cancer Awareness Month initiative that lights buildings landmarks, bridges, monuments, and homes red—bringing lymphoma awareness to the global conversation.



PHILANTHROPY IN ACTION



RALLY ON! AMERICA

On June 6, 2020, the Lymphoma Research Foundation (LRF) went live on Facebook for the Team LRF *Rally On! America*.

As a result of social distancing policy, LRF supporters in Minnesota, Nebraska, New York, and Texas were unable to gather in-person for the spring Lymphoma Walks. Instead, hundreds of people gathered around their computers, phones and tablets for LRF's first-ever virtual rally. *Rally On!* featured stories from lymphoma survivors, spotlights on fundraising teams throughout the country, a research lab tour with LRF Scientific Advisory Board (SAB) member and past-Chair Thomas Habermann, MD (Mayo Clinic, Rochester) and past SAB member Thomas Witzig, MD, a yoga session and much more. Together, supporters of the rally raised more than \$300,000 to support the LRF mission. To view the archived program, visit LRF's Facebook page at facebook.com/lymphomacommunity.



Award-winning journalist Lisa Guerrero served as host of LRF's inaugural *Swirl: America*.

SWIRL: AMERICA

More than 240 guests attended *Swirl: America*, An At-Home Tasting Event, on June 25, 2020.

An expansion of LRF's *Swirl: A Wine Tasting Event*, *Swirl: America* is the inaugural online tasting series that brings the most sought-after wines and cocktail trends to the comfort of one's home for participation across the nation. The program, hosted by award-winning television journalist Lisa Guerrero, featured an entertaining mixology session with Apologue Liqueurs co-founder Robby Haynes, who instructed guests to make a variety of refreshing summer cocktails, including a Spritz, Sangria and Sgroppino. The inaugural event raised more than \$22,000. Additionally, Duke's Liquor Box donated 20 percent of each *Swirl: America* product package to LRF. To view the archived program, visit lymphoma.org/swirlamerica. ©

LYMPHOMA RESEARCH FOUNDATION

25th ANNIVERSARY GALA

WEDNESDAY 9.30.20 7:00 PM ET



Honoring



CORPORATE LEADERSHIP AWARD



THOMAS M. HABERMANN, MD

LRF SAB Member, Past Chair | Mayo Clinic, Rochester DISTINGUISHED LEADERSHIP AWARD

For more information or to RSVP, visit lymphoma.org/gala.





FINDING CURES STARTS HERE:

25 YEARS OF INNOVATION AND PROGRESS

It was 1995 when the founders of the Lymphoma Research Foundation (LRF) realized its dual mission: *to eradicate lymphoma* — by funding innovative research guided by its world-renowned Scientific Advisory Board — *and to serve those touched by this disease* — by sharing research and treatment insights directly with the lymphoma community through national education programs.





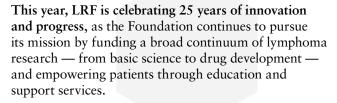




[COMMUNITY IMPACT]



Under the leadership of Joseph Bertino, MD, the LRF Scientific Advisory Board (SAB) was created to guide the Foundation's research portfolio. Today, the world-renowned SAB comprises leading lymphoma experts, nine of whom are former LRF grantees.



Through lymphoma-specific research grants and consortia, LRF has sought to better understand the almost 100 subtypes of lymphoma and support the development of new treatments. LRF's focus on supporting early-career scientists ensures the best and brightest remain in the field of lymphoma research so that innovation and progress continue. As a result, LRF-supported researchers have been involved in many of the most significant lymphoma breakthroughs witnessed in the past quarter-century.

Simultaneously, LRF has worked tirelessly to help patients, survivors, caregivers and families understand their diagnosis and ensure they have access to the support and resources they need.

As we celebrate 25 years of innovation and progress, reflect on our past and celebrate our current achievements, we keep our eyes on the future — all with a steadfast dedication to the community we exist to serve.

Learn more about LRF's history and how you can support 25 additional years of innovation and progress at lymphoma.org/25.





2014

As a direct result of the efforts and research of a dozen LRF grantees and SAB members, the treatment of chronic lymphocytic leukemia (CLL) was transformed in a single year. The FDA approved four new therapies for the disease, making treatment possible for more patients than ever before and improving outcomes.

1996

The inaugural North American Educational Forum on Lymphoma was convened in California. Today, the world's Forum is the largest lymphoma-specific conference for patients in the world and inspired a series of regional and local LRF patient programs developed year-round across the nation.

2008

To expand its first-in-class lymphoma education programming, LRF developed Lymphoma Rounds, a professional education program specifically for those caring for lymphoma patients. The program debuted in Chicago, IL; today, Lymphoma Rounds is held in seven major U.S. cities.

2001

Research led by various SAB members discovered that diffuse large B-cell lymphoma (DLBCL) is two distinct diseases, each with its own genetic profile.

2003

LRF's Mantle Cell Lymphoma (MCL) Initiative was founded, making LRF the largest private funder of MCL research. The Initiative transformed the treatment and care of people with MCL.

2017

The first cellular therapy to treat lymphoma, chimeric antigen receptor (CAR) T cell therapy, was approved by the FDA for the treatment of DLBCL. In 2003, LRF funded the first-ever study providing *in vivo* evidence that CAR T cells are effective in an animal model.

2019

Led by LRF, SAB and MCL Consortium members, the first-ever combination and chemotherapy-free treatment regimen for patients with slow-growing forms of non-Hodgkin lymphoma was approved by the FDA.



OUR STORY

In 1995, the Lymphoma Research Foundation's (LRF) mission was realized and had since grown into something much bigger than anyone could imagine. Through their journey with non-Hodgkin lymphoma, Jerry Freundlich and his wife Barbara recognized the need for a lymphoma-specific organization that could provide increased funding of lymphoma research and support to other families impacted by lymphoma. With their vision set on eradicating lymphoma, the Freundlichs worked tirelessly to create a community of healthcare professionals, researchers, patients, survivors, and caregivers who shared their passion for ensuring a

brighter future for all those touched by this blood cancer.

"Our goal has always been to empower patients to become their own health advocate, and to ultimately one day see a world without lymphoma," says the Freundlichs. "Over the past 25 years, LRF has gained a better understanding not only of lymphoma, but also of the effect it can have on those who receive a diagnosis." Since its beginning, LRF has become the nation's largest non-profit organization devoted exclusively to funding lymphoma research and empowering patients, survivors, and their loved ones through education.



OUR COMMITMENT

To advance the future of lymphoma research, the LRF Scientific Advisory Board (SAB) was established in 1995 under the leadership of its Founding Chair, Joseph R. Bertino, MD. Dr. Bertino began the SAB with just 10 members and a commitment to excellence and visionary thinking. Today, the SAB is world renowned and comprised of 45 expert lymphoma clinicians and researchers who guide LRF's research agenda and offer their expertise to inform LRF's programming and patient resources.

Current LRF SAB Chair Andrew D. Zelenetz, MD, PhD, of Memorial Sloan Kettering Cancer Center, has been a member of the SAB since its inception in 1995. Over the past 25 years, Dr. Zelenetz believes that LRF has had a profound impact on an array of lymphoma research and scientists within the field. He says that this impact is evident through LRF's unique research programs, which help to foster early-career scientists and encourage them to remain within the area of lymphoma. "It is important to the field of lymphoma that we attract the best and the brightest young investigators," says Dr. Zelenetz. "The SAB has been instrumental in helping LRF ensure a brighter future for all those touched by lymphoma, and it is my honor to serve as the Chair."

2015-2017

of Northwestern University

LEO I. GORDON, MD, FACP

Robert H. Lurie Comprehensive Cancer Center

2012-2015 JOHN P. LEONARD NewYork-Presbyterian Hospital Weill Cornell Medicine



2017-2019 THOMAS M. HABERMANN Mayo Clinic, Rochester



2021-2023 SONALI M. SMITH, MD (CURRENT CHAIR-ELECT) The University of Chicago

PAST SAB CHAIRS

1996-2006
JOSEPH R. BERTINO, MD
Rutgers Robert Wood Johnson
Medical School
Rutgers Cancer Institute of New Jersey



2006-2008

OLIVER PRESS, MD, PHD

(In Memoriam)
Fred Hutchinson Cancer Research Center
University of Washington Medical Center



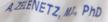


2010-2012 BRUCE D. CHESON, MD, FACP, FAAS, FASCO LRF Scientific Advisory Board



2019-2021 DR. ANDREW D. ZELENETZ

Dr. Andrew D. Zelenetz is the current Chair of the LRF Scientific Advisory Board and has been a member of the SAB since its inception 25 years ago.





As the most trusted resource for lymphoma support and education, LRF is proud of its continued efforts and impact on the lymphoma community. At the forefront of LRF's mission to eradicate lymphoma and serve those touched by this disease is LRF's commitment to empowering patients with the support and knowledge they need to make informed decisions about their care. LRF is dedicated to improving standards of education and patient support for all those impacted by a lymphoma diagnosis.

Having been involved with the Lymphoma Research Foundation for the past 13 years, Linda Vaughan says LRF not only changed the course of her lymphoma journey, but also became a large part of her life. Vaughan discovered LRF shortly after being diagnosed with transformed diffuse large B-cell lymphoma (DLBCL) and says that much like an extension of her own family, LRF has been there to support her every step of the way. "When I attended my first LRF program, I immediately felt a sense of belonging, and was greeted with such warmth

and empathy," says Vaughan. "I take comfort in knowing that I can always reach out to LRF and receive detailed information delivered with compassion." She continues to give back in several capacities in hopes of helping LRF maintain its impact on the lymphoma community.

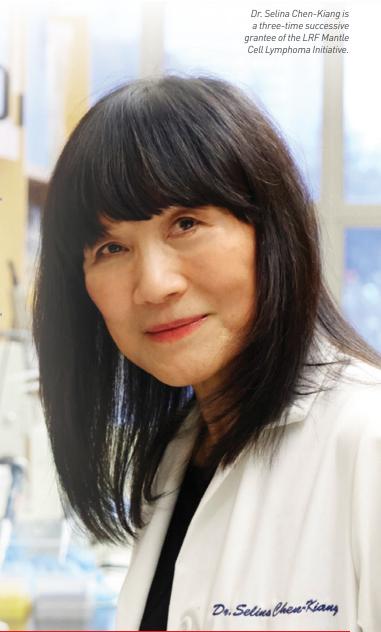
"I take comfort in knowing that I can always reach out to LRF and receive detailed information delivered with compassion."

OUR PATH AHEAD

As the Foundation reflects on its past and celebrates the present, LRF keeps its focus on the future by investing in the next generation of lymphoma scientists. LRF is committed to funding the most promising lymphoma researchers who have the highest potential to improve patient care and, ultimately, to improve patient outcomes. To date, LRF has funded more than \$62 million in lymphoma-specific research and has supported countless lymphoma researchers, leading to a better understanding of lymphoma and increased treatment options for patients.

"LRF enabled us to begin to translate innovative concepts into groundbreaking therapies..."

LRF's early funding catalyzed the mantle cell lymphoma (MCL) research of Selina Chen-Kiang, PhD, of Weill Cornell Medical College. She, along with her colleagues, identified both the molecular mechanism that causes some patients' MCL to be resistant to ibrutinib (Imbruvica), an oral agent, and ways to overcome that resistance. Three successive LRF grants contributed funding to this research, including an MCL Project Planning Grant in 2010, an MCL Correlative Clinical Studies Grant in 2011, and an MCL Developmental Grant in 2013. Thanks to these breakthroughs and LRF's initial funding of this innovative research, Dr. Chen-Kiang and her colleagues were awarded a five-year, \$9 million Program Project Grant from the National Cancer Institute (NCI) in 2018. This is the first MCLfocused Program Project Grant from the NCI. "LRF's early funding enabled us to begin to translate innovative concepts into groundbreaking therapies that improve the outcomes of mantle cell lymphoma patients," Dr. Chen-Kiang says. O



HISTORY OF LRF'S "DOUBLE O'S"

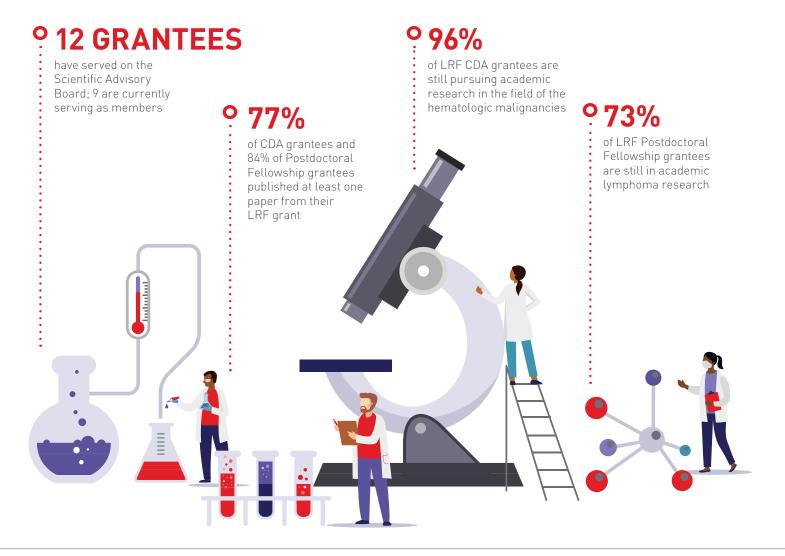
Within the Lymphoma Research Foundation's logo, you will find two interconnected circles, or as many people refer to them, the "double o's." This design symbolizes LRF's dual commitment to eradicating lymphoma and serving all those touched by this disease, as well the partnership and commitment the Foundation has with every person impacted by a lymphoma diagnosis.

By supporting LRF's dual mission, you help to change the future for the more than one million people living with lymphoma in the United States and the more than 100,000 people that will be diagnosed this year alone. Finding cures starts here and with you.

Visit lymphoma.org/25 to learn how you can help LRF achieve 25 more years of innovation and progress.

MEET THE 2020 CAREER DEVELOPMENT AWARD AND POSTDOCTORAL FELLOWSHIP GRANTEES

The Lymphoma Research Foundation's Clinical Investigator Career Development Award (CDA) and Postdoctoral Fellowship Grant Program support junior faculty members and PhD and advanced clinical fellows pursuing research in lymphoma and chronic lymphocytic leukemia (CLL). Projects awarded from this year's class of CDA and Postdoctoral Fellowship grantees include early clinical trials of novel therapies, investigations into the biology of Hodgkin lymphoma and aggressive non-Hodgkin lymphomas, and new mechanisms for chimeric antigen receptor (CAR) T cell therapy Postdoctoral Fellowship Grants.





NATALIE GROVER, MD

UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL

Career Development Award

Although a majority of patients with Hodgkin lymphoma (HL) are cured with first-line therapy, about 15 percent of those patients experience primary refractory disease or relapse after an initial response to treatment. Chimeric antigen receptor (CAR) T cells are immune cells re-engineered to attack cancer cells. Although these immune cells have shown promise in treating B-cell lymphomas, alternative targets are needed for lymphomas that lack CD19 expression, including classical Hodgkin lymphoma (cHL).

Dr. Grover's LRF grant project is a phase I clinical trial in which CAR T cells targeting CD30, a marker on malignant HL cells, are modified to express a protein called CCR4, which helps guide the CAR T cells to the tumor site. The successful completion of Dr. Grover's project will provide a novel therapeutic approach for relapsed/refractory HL patients who do not have other available treatment options. This research will also help design future studies that can improve the trafficking of CAR T cells to other types of cancers.

Dr. Grover is an Assistant Professor of Medicine and the Clinical Director of the Cellular Therapy Program at the University of North Carolina at Chapel Hill (UNC). Her interest in lymphoma sparked during her hematology/ oncology fellowship at UNC. While working with past LRF grantee Dr. Steven Park (The Center for Biomedical Engineering and Science/UNC Charlotte), Dr. Grover became drawn to the heterogeneity of the lymphomas as well as the possibilities for novel targeted agents and immunotherapies. Through the encouragement and mentorship of Dr. Park and other hematology and oncology experts at UNC, Dr. Grover became involved with cellular therapy research. "I became excited to have the opportunity to be on the cutting edge to investigate the possibilities and innovative approaches of this novel therapy in other lymphomas," says Dr. Grover.

During her time in LRF's CDA program, she hopes to improve her knowledge of immunology and the pre-clinical development of cellular therapy. "Through these learning opportunities provided by funding from the [CDA] grant and completion of the current proposal, I will gain the necessary skills to achieve my career goal of developing effective cellular therapy clinical trials in lymphoma that improve patient outcomes and further advance the field of CAR T cell therapy," she shares. Her long-term career goal includes becoming an expert in cellular therapy in lymphoma as an experienced clinical trialist who has a deep understanding of the biology of CAR T cells.



RYAN LYNCH, MD

UNIVERSITY OF WASHINGTON
Career Development Award

Checkpoint inhibitors, a type of immunotherapy, have been approved for patients with relapsed Hodgkin lymphoma (HL); however, they do not lead to durable remissions in most patients. Dr. Lynch's LRF grant project will implement two clinical trials using pembrolizumab (Keytruda). One study will combine pembrolizumab with traditional chemotherapy for untreated patients, and the other research adds an experimental oral PI3K delta inhibitor called umbralisib (specifically used for the treatment of relapsed or refractory patients) with the hopes of enhancing the body's immune response to the cancer. Dr. Lynch and his collaborators will be testing patient samples for circulating tumor DNA and metabolic tumor volume (which are used to assess the amount of disease in a patient's system) to provide a comprehensive analysis of how checkpoint inhibitors enhance the body's immune response.

Dr. Lynch received his MD from Boston University School of Medicine. He is currently an Assistant Professor at the University of Washington School of Medicine, Assistant Professor in the Clinical Research Division at Fred Hutchinson Cancer Research Center, and a hematologist/ oncologist at Seattle Cancer Care Alliance. "My first research experience during my residency showed me the range of possibilities for a career in clinical research," he says. "I later was able to obtain exceptional training during my fellowship, which gave me the knowledge base to treat lymphoma patients as well as design clinically relevant studies to help improve outcomes." This led Dr. Lynch to the beginning of his career with LRF in the Lymphoma Clinical Research Mentoring Program (LCRMP) in 2018. "Connections through the LCRMP and other LRF events have been vital and have put me in the position where I could propose a larger project that could be funded with a Career Development Award."

After the completion of his CDA grant, Dr. Lynch aspires to have a successful clinical practice with a clinical research program in Hodgkin lymphoma and non-Hodgkin lymphomas and help to "minimize the short- and long-term toxicity of treatments, while still maintaining their effectiveness." He also plans to mentor young fellows and faculty to help train the next generation of lymphoma researchers.

[FROM THE FIELD]



PAOLO STRATI, MD

UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER

Career Development Award

Patients with relapsed or refractory large B-cell lymphoma (LBCL) treated with chimeric antigen receptor (CAR) T cells have increased their cure rate from 10 percent to 40 percent. After treatment, many patients experience toxicity, namely cytokine release syndrome (a generalized and life-threatening inflammatory status) and neurotoxicity (occurs when neurotoxicants alter the regular activity of the nervous system). CAR T cells induce macrophages to produce substances, such as interleukin-1 (IL-1), triggering toxicity. IL-1 can be blocked with the use of anakinra, a medication typically used for the treatment of patients with rheumatoid arthritis. The highest levels of IL-1 are measured the first week after CAR T infusion, and prophylactic (rather than therapeutic) use of anakinra may prevent toxicity in these patients.

Dr. Strati's LRF grant will conduct a phase II study that will investigate the safety and efficacy of anakinra, given the first seven days after CAR T infusion, in patients with relapsed or refractory LBCL. Blood samples will be collected and monitored to better characterize changes occurring in the immune microenvironment after CAR T infusion and identify new strategies to mitigate CAR T cell-associated toxicities. "If successful, this strategy will make CAR T safer for these patients, decreasing the rate of toxicity-related deaths, extending its access to elderly patients and those with comorbid health conditions, and favoring its use in the outpatient setting — with a significant advantage for the healthcare finances," says Dr. Strati.

Dr. Strati received his MD from the University Vita-Salute San Raffaele in Milan, Italy, where he also completed a residency. Dr. Strati is now an Assistant Professor in the Department of Lymphoma/Myeloma and the Department of Translational Molecular Pathology, Division of Cancer Medicine at the University of Texas MD Anderson Cancer Center, and a 2019 LRF Scholar. Fascinated by the complexity and dynamicity of lymphocyte biology and the possibility to cure patients affected by lymphoma, Dr. Strati decided to begin his career in clinical research. During his early academic career and training, Dr. Strati contributed to the clinical development of lenalidomide (Revlimid), an oral immunomodulatory agent, for patients with indolent B-cell lymphoma, under the guidance of Alessandra Ferrajoli, MD, and Tait Shanafelt, MD. More recently, under the mentorship of Dr. Sattva Neepalu and Scientific Advisory Board member Dr. Christopher

Flowers (University of Texas MD Anderson Cancer Center), Dr. Strati has been focusing on projects and clinical trials aimed at manipulating macrophages through the targeting of CD47/SIRPa for the treatment of patients with relapsed or refractory DLBCL. "The latter gained me further insight into macrophage biology, other than the opportunity to be selected for the LRF mentoring program, an amazing educational and career development opportunity," says Dr. Strati.

"The LRF Career Development Award will provide me with additional protected research time, which will help me to work on the projects, grants and manuscripts that will lead me to academic independence," he says. "It will also introduce me to a group of lymphoma experts that will provide me with extra-mural mentorship and guide me through the tortuous pathways of academic life." Dr. Strati remarks 10 years from now he hopes to have contributed to the development of a new treatment strategy for patients with B-cell lymphoma, where we can spare the use of chemotherapy by manipulating the tumor microenvironment. He envisions this new treatment strategy accessible to all patients, including elderly individuals with comorbidities, and patients in need.



XU CAO, PHD

CITY OF HOPE AND BECKMAN RESEARCH INSTITUTE

Postdoctoral Fellowship Grant

Many types of non-Hodgkin lymphoma (NHL) remain incurable due to its intrinsic genomic instability facilitating the escape from cytotoxic or targeted therapies. "Recent breakthroughs in understanding macrophage-mediated immune surveillance led to a novel immunotherapeutic agent, namely CD47 blocking antibody which enables macrophages to phagocytose (eat) NHL cells," says Dr. Cao.

"However, as a monotherapy, CD47 blocking antibody produces a marginal efficacy in NHL patients, highlighting a necessity to combine it with agents conferring synergistic effects." Dr. Cao explains that paclitaxel (Taxol), an FDA approved anti-cancer drug, promoted the anti-cancer activity of macrophage and synergized with CD47 blocking antibodies to eradicate NHL in mice," explains Dr. Cao.

Dr. Cao's LRF grant proposes to validate further the therapeutic effects of this combination in more clinically relevant NHL animal models and to investigate the mechanisms involved. Considering the excellent safety profile of both agents, the completion of this investigation may readily lead to clinical trials to test the viability of this combination for the treatment of NHL patients.

Dr. Cao completed his PhD from the National University of Singapore, after his studies he began work at the City of Hope National Medical Center with Dr. Mingye Feng, where they investigated macrophage-mediated immunosurveillance in lymphoma. "Dr. Feng's vision inspires me that rational combination may lead to a cure and initiated this project with the hope to find a cure for lymphoma," Dr. Cao remarks.

His goal is to have his research team to find new treatments for lymphoma. "With support from LRF, I will have dedicated resources to complete the projects," Dr. Cao notes. "Meanwhile, this will give me chances to get connected with research scientists and clinicians in the field of lymphoma research. LRF will pave the way for me to pursue a research career in lymphoma with the hope of eradicating lymphoma."



YONG GU LEE, PHD

THE TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA Postdoctoral Fellowship Grant

Diffuse large B-cell lymphoma (DLBCL) is the most common type of non-Hodgkin lymphoma (NHL) and is the most common hematologic malignancy in the US. The prognosis for DLBCL patients who are multiply-relapsed or refractory is inferior. Tisagenlecleucel (Kymriah) and axicabtagene ciloleucel (Yescarta) are two FDA-approved CD19-targeting CAR T cell therapies (CART19) used for the treatment of relapsed/refractory DLBCL. However, followup studies have shown only up to 30% percent of DLBCL patients treated with CART19 are in complete remission in the long term, and up to 40 percent of relapses show a loss of CD19 in lymphoma cells. "There is a dire need to develop next-generation CAR T cells to treat patients with CD19-negative disease," explains Dr. Lee. To deal with this challenge, Dr. Lee's LRF grant project proposes developing a novel CAR T cell that targets CD79, a key mediator of B-cell receptor signaling, which plays a crucial role in the progression of B-cell malignancy. He expects to develop the best-in-class CAR T cell against CD79 and generate potent dual CAR T cells to increase the cure rates of DLBCL patients.

Dr. Lee's passion for lymphoma research stems from the significant subset of patients that do not respond well to CART19. "This unmet medical need motivates and challenges me to investigate the development of potent CAR T cell therapy for lymphoma," he says. The uncertainty in this field is his crucial motivation to continue pursuing clinical research. Dr. Lee

hopes to become an independent researcher with a concentration in CAR T cells and continue to develop an understanding of the biology of lymphoma and the development/improvement of cellular immunotherapy. "The LRF Postdoctoral Fellowship will be a major support for me, allowing me to fully devote myself to research and providing an essential opportunity for me to launch my career toward being an independent translational scientist," Dr. Lee shares.



ADAM LIN, MD, PHD

NORTHWESTERN UNIVERSITY
FEINBERG SCHOOL OF MEDICINE

Postdoctoral Fellowship Grant

Many immunotherapies and cell therapies on the market have increased the cure rate for patients with non-Hodgkin lymphoma (NHL); however, the percentage of relapse and death continues to grow per year. The need for new therapies or improvements to current therapies is critical. "One of the promising new immunotherapies is a DNA sequence known as CpG deoxynucleotides. CpGs mimic bacterial DNA and wake up the immune system to attack the cancer cells," explains Dr. Lin. "CpGs can cause an anti-tumor response by stimulating the immune system. They are especially interesting in lymphoma as they overdrive the malignant lymphoma cells and cause them to die directly."

For his LRF grant project, Dr. Lin proposes to engineer a CpG-coated gold nanoparticle platform to improve the delivery of CpGs directly to the lymphoma and immune cells. "As a physician, translation of our research into the clinics is the ultimate goal. The success of this proposal would lead to a collaboration with a nanoparticle company that branched out of Northwestern University to consider manufacturing for early clinical trials," he says. "This will be the beginning of building a new therapy option for lymphoma patients."

Dr. Lin completed his PhD at Rice University and his MD at Baylor College of Medicine. His devotion to lymphoma research is driven by patients who do not see improvement despite going through treatment. Dr. Lin's long-term career goal is to become an independent physician-scientist with a clinical focus on lymphoma and stem cell transplant. "I am in a unique position as my career evolves to bridge the gap between technological advancements and their use in clinical or personalized medicine to provide new therapeutic options for lymphoma patients," he says. "With the support of the LRF Postdoctoral Fellowship grant, along with my mentor Dr. Leo Gordon, I will be one step closer to becoming an independent investigator to achieve these goals."

[FROM THE FIELD]



ALEXIA MARTINEZ DE PAZ, PHD

JOAN & SANFORD I. WEILL MEDICAL COLLEGE OF CORNELL UNIVERSITY Postdoctoral Fellowship Grant

Cell-fate transitions (the biological process in which the function of a cell gets reprogrammed or specialized) that take place during the germinal center (GC) reaction are dependent on complex signaling pathways that remodel the epigenome to drive specific transcriptional programs. The importance of a tight regulation of these transitions is highlighted by the fact that most B-cell lymphomas arise from GC B cells and bear highly recurrent mutations of genes involved in signaling pathways and epigenetic regulation. "Despite this crucial role in lymphomagenesis, little is known on the specific mechanisms driving the epigenome response to immune signals," Dr. Martínez de Paz explains.

Dr. Martínez de Paz and her collaborators have found two "signaling-to-chromatin" pathways required for B cells to transit through the GC reaction. Dr. Martínez de Paz's LRF Grant project seeks to describe the specific epigenetic mechanisms involved and to explain how the alteration of these pathways result in lymphomagenesis. Her findings suggest that targeting these pathways using small molecules has promising potential for the treatment of specific lymphoma subtypes. "The completion of this study could be tremendously beneficial for the development of more targeted therapies," she says.

Dr. Martínez de Paz's interest in cancer biology began during her undergraduate studies at the Spanish National Research Council and the Cancer Epigenetics and Biology Program at the University of Barcelona, Spain, where she studied epigenetic mechanisms involved in cancer. After receiving her PhD in biomedicine, she decided to join the laboratory of Dr. Steven Josefowicz at Weill Cornell for her postdoctoral training to study fundamental aspects of chromatin dynamics in immune responses. Her fascination with lymphoma research began thanks to her collaboration with co-sponsor, past grantee and current LRF SAB member Dr. Ari Melnick, "I can apply my background in epigenetics and chromatin to a more translational science,

92%
of CDA grantees
are still practicing
in lymphoma
patient care

with the potential to improve treatments that could help lymphoma patients," Dr. Martínez de Paz explains.

Over the next decade, Dr. Martínez de Paz sees herself becoming an independent investigator focused on the intersection of epigenetics and lymphoma research. "LRF's support represents a strong contribution to my research plan and gives me the opportunity to spend the next few years working in this exciting collaborative project at Weill Cornell Medicine," she shares.



LAURIANNE SCOURZIC, PHD

JOAN & SANFORD I. WEILL MEDICAL COLLEGE OF CORNELL UNIVERSITY Oliver Press, MD, PhD Postdoctoral Fellowship Grant

Many B-cell lymphoma patients are resistant to, or relapse after, treatment. While researchers have demonstrated the causal role of cancer stem cells in the relapsing nature of tumors, the existence of B cells capable of repopulating the disease after treatment is unclear. Dr. Scourzic's LRF grant project aims to identify and characterize lymphoma stemlike populations that can be targeted by the combination of existing or new therapeutic strategies. "These stemness features, restricted to specific normal B-cell populations, are magnified upon specific mutations in patients and characterized by a high expression of stem cell genes," Dr. Scourzic explains. "We reasoned that they could also serve as a biomarker for the relapse and help such patients at risk to receive specific treatments accordingly."

Dr. Scourzic completed her PhD at Gustave Roussy, in Villejuif, France, where she dove into the study of acute myeloid leukemia (AML) and T-cell lymphomas. She realized that, in most cases, a relatively high proportion of patients are prone to relapse despite the existence of effective treatment. "I hypothesized for my project that a subgroup of tumoral cells would behave like stem cells and be responsible for the lymphoma resurgence," she explains. Her long-standing interest in understanding epigenetic mechanisms driving cell-fate changes leading to blood cancer is what is driving her to contribute to the field of lymphoma research.

Dr. Scourzic's career goal is to become an independent researcher in academia and mentor the next generation of researchers. "I am amazed by the recent research and clinical developments in immuno-oncotherapy as well as studies investigating the microenvironment of B-cell lymphomas," she says. "Similarly to solid tumor organization, blood cancer cells are constantly interacting with normal cells and constituent within their niche. Understanding how they communicate and sustain each other is primordial to eradicate lymphoma stem cells."

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To learn more about the Lymphoma Research Foundation's research programs, visit lymphoma.org/research.

THROUGH PHILANTHROPY



In 2002, Tom Condon was diagnosed with follicular lymphoma (FL), an incurable indolent (slow-growing) type of non-Hodgkin lymphoma. While in search of resources, he came

across the Lymphoma Research Foundation's (LRF's) website, where he learned three of his lymphoma specialists were members of the LRF Scientific Advisory Board (SAB). "I knew that if those SAB members were giving their time and expertise to LRF, then it must be a quality organization," says Condon. He was also attracted to LRF's lymphoma specificity, the sense of community generated from its education programs and the scope of representation on the SAB.

In 2005, Condon elevated his involvement with LRF by pledging \$1 million to fund follicular lymphoma research. Tom was inspired by the work being done through LRF's Mantle Cell Lymphoma (MCL) initiative, and wanted to invest in the advancement of research for FL — using LRF as the driver of knowledge. "The results of the MCL Initiative were amazing. LRF made important discoveries in this disease that improved patient outcomes today," he says. "I was inspired by that incredible work to facilitate similar research in follicular lymphoma." His generous support and pledge for follicular lymphoma research enabled the STAR Foundation to match his donation. Matched with fundraising efforts from LRF, \$5 million was raised and invested in follicular lymphoma research.

Shortly after, Condon joined the LRF Board of Directors to continue his support of the Foundation's mission; for nearly 10 years he helped to advance LRF's fundraising and engagement through his philanthropic service on the Board. Although his Board service ended in June 2020, he is grateful for the experience and is committed to continuing his support of LRF. "It's been a great experience being a member of the Board, and I am feeling optimistic about LRF's future. All good things must come to an end, but I'm not going away. I am planning to stay involved," he says. "Cancer doesn't stop, lymphoma isn't going to wait for COVID-19 to be over, nor wait for the economy to get better. The need is always going to be there until we find cures. This is not the time to pause or take a break to see what happens. We have to keep going and serving our mission."

"I like sports, so imagine all the legends of the game, playing on one team. That's what it's like at LRF. They have the very best players, and that's unique."



WHERE ARE THEY NOW?

JEFF SUMMERS, MD

Jeff Summers, MD, is an Associate Director for Translational Sciences and Acting Associate Director for the Office of Oncology at the U.S. Food and Drug Administration (FDA).

WHEN DID YOU FIRST GET INVOLVED WITH THE LYMPHOMA RESEARCH FOUNDATION (LRF) AND IN WHAT CAPACITY?

I received an LRF grant during my pediatric hematology/oncology fellowship at the National Cancer Institute (NCI).

WHAT RESEARCH/PROJECT DID YOU PURSUE WITH YOUR LRF GRANT?

I was working on two projects. One was trying to understand tumor (lymphoma) induced tolerance in a CD4 T-cell transgenic model. The other was isolating tumor-specific TIL from hepatic metastases in CRC patients and immortalizing the T cells with herpesvirus saimiri — that was pretty cool.

'25 years ago, the idea of using immunotherapy to treat cancer was wishful thinking. However, today, we are curing some previously invariably fatal tumors with immunomodulators and CAR T cells."

HOW WAS THE FUNDING YOU RECEIVED FROM LRF VITAL TO ADVANCING YOUR CAREER IN STUDYING LYMPHOMA?

Honestly, it allowed me to survive and do science. Without the grant I received from LRF, I would have needed to spend more time trying to secure funding, rather than devoting my attention to my research.

HOW DID YOUR WORK AS A RESEARCHER PREPARE YOU FOR YOUR POSITION AT THE FDA?

My understanding of the underpinnings — the molecular biology of cancer — allowed me to bring a much more thoughtful approach to the review and approval of safe and effective anticancer drugs.

HOW DOES SUPPORTING RESEARCHERS ULTIMATELY HELP IMPROVE PATIENT CARE AND OUTCOMES?

The support of *basic science* — science that most individuals can't fathom the potential applications — is invaluable in advancing our understanding of cancer. All the layers of knowledge and experiments in the literature are what scientists stand on to make the next handhold-on-the-rock wall to new insight. For example, 25 years ago, the idea of using immunotherapy to treat cancer was wishful thinking. However, today, we are curing some previously invariably fatal tumors with immunomodulators and CAR T cells — that's a significant *wow* factor and what we as researchers strive for. I pontificate to my neighbors and associates occasionally that if we continue to fund scientific research, that most cancer will be curable in 50 years. I believe we will be able to deep-sequence a tumor, identify all the

subclones with resistance mutations and develop drugs to target those mutations.

"I stand by science and research, and LRF is a leader in helping to raise awareness and moving science forward to find cures."

WHY IS LRF'S FOCUS ON RESEARCH/RESEARCH PROGRAMS SO IMPORTANT?

Research allows for understanding — facts, data, knowledge, truth. Understanding mechanisms allows for specific/focused/targeted/tailored interventions towards those pathways that play a role in oncogenesis, metastasis and cell survival. Research is the foundation of knowledge. Without that it's someone who hears good things from someone else and why don't we try it — what do you have to lose? I stand by science and research, and LRF is a leader in helping to raise awareness and moving science forward to find cures. \bigcirc

LATEST U.S. FOOD AND DRUG ADMINISTRATION (FDA) APPROVALS FOR THE TREATMENT OF LYMPHOMA

The U.S. Food and Drug Administration (FDA) is responsible for the approval of drugs, including biological products, for human use in the United States.

TAFASITAMAB-CXIX (MONJUVI)

July 31, 2020 — approved in combination with lenalidomide (REVLIMID) for adult patients with relapsed or refractory diffuse large B-cell lymphoma (DLBCL) not otherwise specified, including DLBCL arising from low-grade lymphoma, and who are not eligible for autologous stem cell transplant.

BREXUCABTAGENE AUTOLEUCEL (TECARTUS)

July 24, 2020 — approved for adult patients with relapsed or refractory mantle cell lymphoma (MCL). This is the first chimeric antigen receptor (CAR) T cell therapy approved for MCL.

SELINEXOR (XPOVIO)

June 22, 2020 — approved for adult patients with relapsed or refractory DLBCL, not otherwise specified, including DLBCL arising from follicular lymphoma (FL), after at least two lines of systemic therapy.

TAZEMETOSTAT (TAZVERIK) AND EZH2 MUTATION TEST

June 18, 2020 — approved for adult patients with relapsed or refractory follicular lymphoma (FL) whose tumors are positive for an EZH2 mutation as detected by the EZH2 Mutation Test and have received at least two prior systemic therapies, and for adult patients with relapsed or refractory FL who have no satisfactory alternative treatment options.

PATIENT PERSPECTIVES

Multi-stakeholder working group recommends consistent biomarker, genetic and genomic testing terminology for patient education and clinical care.



Significant scientific progress has been made since the Lymphoma Research Foundation (LRF's) founding 25 years ago, including a host of breakthroughs that materialized from the first sequence of the human genome. This research has provided new insights into the molecular and genetic underpinnings of many types of cancer, including lymphoma.

Equipped with these insights, researchers are making advancements in the development of diagnostic technology, such as next generation sequencing, which can identify differences in an individual patient's cancer at the molecular level. These differences, or alterations (also known as mutations or biomarkers), can then be targeted by physicians to identify the most effective treatment. Put another way, advanced testing can facilitate the delivery of the right treatment to the right patient at the right time.

Despite the widespread acceptance of the importance of biomarkers and genomics to inform patients' diagnosis and treatment, research has shown many patients across all cancer types are still not receiving testing at the point of diagnosis, after disease progression/recurrence or as part of the treatment/decision-making process.

To respond to this issue, lung cancer nonprofit LUNGevity Foundation convened a multi-stakeholder working group called the Consistent Testing Terminology Working Group, consisting of leaders from prominent oncology patient advocacy groups, professional societies and pharmaceutical/diagnostics companies and laboratories. The working group identified 33 common terms related to biomarker, genetic and genomic testing that working group members used to educate patients about advanced diagnostic testing. The group determined that universally accepted terminology about advanced diagnostic testing used across all cancers would be an important first step in helping eliminate patients' confusion about testing and educate them about what testing is appropriate for their care.

33 different terms related to biomarker, genetic and genomic testing were identified in patient education and clinical care materials according to the Consistent Testing Terminology Working Group.

"The Consistent Testing Terminology Working Group intends to help make a patient's experience easier during disease diagnosis, progression or recurrence by ensuring consistent use of plain-language terms about these types of tests," says Nikki Martin, Director of Precision Medicine Initiatives at LUNGevity. "Whether someone is visiting a patient advocacy website like LRF's or a medical institution's website to read about these tests, we infer that if patients see consistent patient-friendly terms describing these tests, they will be more empowered, knowledgeable and confident in having conversations with their healthcare team about them."

Victor Gonzalez, Associate Director of Support Resources and Strategic Partnerships at the LRF, is a member of this working group and represented the hematologic malignancies and issues most relevant to the blood cancer community. "In the hematologic malignancies, we use terms such as 'Next Generation Sequencing,' 'molecular profiling' and 'molecular testing' to describe the same test — naturally, this could be very confusing for patients during their diagnosis and the treatment decision-making process," says Gonzalez. "The Consistent Testing Terminology Working Group was a worthwhile effort in helping the cancer community be consistent in the terms we use for this education, which will help patients in discussions with their healthcare team."

The working group's first recommendation was the use of the umbrella term "biomarker testing" for somatic mutations and other biomarkers (i.e., PDL-1, a protein that indicates if someone is a candidate for immunotherapy). Biomarker testing includes, but is not limited to, single tests, panel tests and multi-plex panel tests (such as "Next Generation Sequencing") to analyze a patient's biospecimen (i.e., solid tissue, body fluid or blood). The group felt that "biomarker testing" had the broadest applicability across all types of cancer and was inclusive of diverse methods of testing. In addition, it was already considered the most common term in use for patient education.

To mitigate confusion and lack of understanding around the difference between somatic (acquired) mutations and germline genetic mutations, which are inherited, the second recommendation from the working group was the use of an umbrella term to describe testing for mutations that are hereditary (can be passed from parent to child). Given how this type



[LIVING WITH LYMPHOMA]

of testing is used, group members felt it was necessary to have two separate descriptors. The terms "genetic testing for an inherited mutation" or "genetic testing for inherited cancer risk" were selected after completing a survey of 1,700 cancer community members.

Both Gonzalez and Martin note that biomarker testing is more relevant for the lymphoma and lung cancer patient populations. However, science is continually evolving, and genetic testing for an inherited mutation or genetic testing for inherited cancer risk could play a role in the future. "It's important that patients understand and know the difference between these two categories of tests and how they could be used," says Gonzalez. "Consistent use of terms helps with that."

To achieve widespread adoption across the cancer community, the working group launched a strategic communications plan, which included introducing the results of this study and recommendations at the 2020 Annual American Society of Clinical Oncology (ASCO) Virtual Scientific Program Meeting held from May 29 to

June 2. The ASCO Annual Meeting provides educational sessions featuring world-renowned faculty discussing state-of-the-art treatment modalities, new therapies and ongoing debates in the field of oncology. This year's meeting, held virtually due to COVID-19, hosted more than 42,700 attendees from 138 countries, a record for the program.

"The fact that our study was accepted for presentation by ASCO was significant. It gave this project legitimacy and demonstrated that this is a challenge that needs to be addressed," says Gonzalez.

"As technology and science advance and increase in complexity, we as patient advocacy groups may understand and stay up-to-speed, but patients, those who are the most responsible for their health, can feel left behind. It is our responsibility to educate patients so they can advocate for themselves."

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The Consistent Testing Terminology Working Group white paper, "A White Paper on the Need for Consistent Terms for Testing in Precision Medicine," was published on CommonCancerTestingTerminology.org on July 7, 2020.





25TH ANNUAL VIRTUAL NORTH AMERICAN EDUCATIONAL FORUM ON LYMPHOMA

OCTOBER 23-25, 2020

Visit lymphoma.org/EdForum to register and learn more.

CONFERENCE HIGHLIGHTS

- Expert Speaking Faculty

 Hear a variety of presentations and have your questions answered about your specific subtype of lymphoma.
- Disease and Treatment Specific Information

Comprehensive breakout sessions that review disease biology, novel agents, targeted therapies and the latest treatment options.

- Current Research Updates

 Learn about recent developments in lymphoma and chronic lymphocytic leukemia research.
- Virtual Networking Opportunities

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Host your own online bake sale to raise dough for LRF.

Coming out (of the oven) Fall 2020





Get the recipe for success: TeamLRF@lymphoma.org or 646-465-9127



VIRTUAL Kick-Off Rally

SATURDAY, OCTOBER 3RD I 7:00PM

We'll kick-off the Ride with a (BYO) carbo-loaded pasta party that you can join live from the comfort of your own home. Hear remarks from Dr. Cheson and our Ride Champion Council, jam to music by DJ Right Touch, enjoy games, group chats and more.

together lymphoma survivors, caregivers, and supporters from across the country. This year due to COVID-19 restrictions on gatherings, we will be holding an online rally and riders will choose their own safe and socially distanced route! Funds raised support innovative research and patient programs.

LRF's Research Ride brings

Research Ride

SUNDAY, OCTOBER 4TH I Choose Your Route

We'll start with a virtual send off as each of our riders hits the road in their own community. Every hill you climb, every stretch you endure, brings us closer to a cure. Get social and share your ride with the Team using #RideOnLRF.

For More Info: contact Aileen at: atapia@lymphoma.org or 646-465-9127

GET STARTED HERE! LYMPHOMA.ORG/RESEARCHRIDE

RIDE CHAMPION COUNCIL

Join the Team. Find a Cure. Together, We Can Make a Difference.



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Inova Schar Cancer Institute for Malignant Hematology



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LINKED BY LYMPHOMA

Five years ago, Jacqueline Gates and John Groskopf were strangers; they would soon discover they shared a rare similarity that would connect them forever.

During a routine checkup in November 2015, Jacqueline Gates's doctor discovered a lump on the left side of her face. After further testing, she was diagnosed with small lymphocytic leukemia (SLL) — a rare form of B-cell non-Hodgkin lymphoma (NHL) — and placed on active surveillance (also known as "watch and wait," which involves closely watching a patient's condition but not administering treatment). Distraught and overwhelmed by this news, Gates began researching SLL to find resources and support. She ended up finding the Lymphoma Research Foundation (LRF) and contacted the LRF Helpline. In speaking with them, she found out about the Lymphoma Support Network (LSN). "The LRF Helpline specialist reassured me and encouraged me to join LSN so that I could speak with someone who had been through a similar experience," says Gates.

More than 6,000 lymphoma patients, survivors and caregivers are a part of LRF's Lymphoma Support Network.

Many studies have found that individuals with cancer who engage in peer support have an easier time adjusting to life changes brought on by their diagnosis, tend to have a more positive outlook and can even respond better to treatment. To facilitate this type of support, LRF launched the LSN in 1998 as a one-to-one peer support program for patients, survivors and caregivers. The goal of the LSN is to match members of the lymphoma

community who have had similar experiences, so members may offer each other words of encouragement, understanding and strength to meet the challenges they may have to face. Since the program's inception, it has grown to more than 6,000 members and has become a cornerstone of LRF's support resources.

Through the LSN, Gates was matched with John Groskopf, an SLL survivor and longtime LSN volunteer. Groskopf's lymphoma journey began 23 years ago in July 1997. Following his initial diagnosis, Groskopf endured various treatments, including an initial treatment of 14 cycles of chemotherapy, and several relapses, but always managed to remain positive.

In 2005, Groskopf was beginning to feel better and started to search for a way to give back to the lymphoma community. After speaking with the LRF Helpline and learning about the LSN, he decided to sign up and became a volunteer. "I didn't know about LRF's LSN program when I was initially diagnosed, and I would have appreciated having someone

that could relate to what I was going through," says Groskopf. He was matched with several lymphoma patients and survivors, offering advice and reassurance along the way. "When I heard about the opportunity to support lymphoma patients, I was extremely excited and knew this would be the perfect way to give back to my community," he says.

"He was able to put me at ease during one of the most emotional times of my life."

Groskopf was matched with Gates in 2015 and was able to support her at the onset of her lymphoma journey. Gates shares that Groskopf was immediately able to put her at ease and helped her to transition into a



Jacqueline Gates found the LRF Lymphoma Support Network in 2015 when she was diagnosed with SLL; She was matched with John Groskopf shortly after.

new life with lymphoma. "Having the opportunity to speak to John, a 23-year-long survivor of this disease, reassured me that I too could have a happy and fulfilling life in the future," she says.

While Groskopf signed up to provide support, he says he has gotten just as much out of his relationship with Gates as he has given. "It was so nice to be able to speak with someone who knew what I was going through for so many years," says Groskopf. "You also end up learning so much about the disease and advancements that have been made through the lens of other people's experiences."

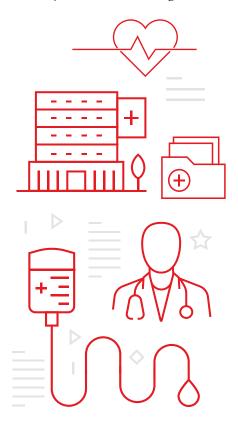
Gates and Groskopf began speaking to each other regularly and made it a point to catch up at least once a month. They exchange words of positivity and are there for each other to lean on for support. Aside from their regularly scheduled calls, they also check-in whenever they have a scheduled doctor's appointment, scan or other events related to their lymphoma. "It is so comforting to know that if I have something

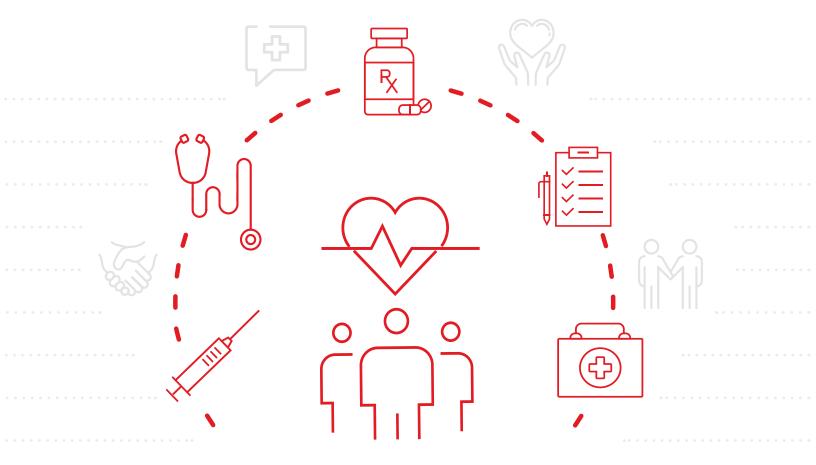
coming up that I am anxious for, or even if I get good news related to my diagnosis, I have someone I can call and talk through things with," Groskopf says.

"It started with an unfortunate link through blood cancer, but it became much more; we truly became friends."

Gates and Groskopf are both dedicated to continuing to support each other and the lymphoma community-at-large. Due to the great connection that Gates created with Groskopf, she plans on paying it forward and volunteering to give support through the LSN in the future. "It would be wonderful to help somebody and to be able to let them know they will get through this," Gates says. "I have learned so much from John over the years, and feel like I would be able to offer the same comfort that he gave to me to someone else."

Groskopf also continues to be an active LSN program member, having had more than 15 buddies since he joined. He encourages





anyone who has been diagnosed with lymphoma to consider being a part of the LSN. "It's the right thing to do for yourself. While family and friends can try to offer you empathy, it doesn't compare to talking to someone who has already been where you have," Groskopf says.

What started as a relationship revolving around lymphoma quickly evolved into a more personal connection. Gates and Groskopf said they began to learn more about one another and shared their experiences. "It started with an unfortunate link through blood cancer, but it became much more; we truly became friends," says Gates.

Groskopf said that even though he and Gates do not live close by, they have created such a strong bond over the years that it is as if they have known each other forever. "At first it was, 'explain to me what

was happening with you medically,' but then we just started learning more about each other's lives — spouses, children, interests, how we spend our days," says Groskopf. "If we lived next door, we would probably hang out a lot." This past year, Gates and Groskopf had even planned a trip to Niagara Falls together with their spouses and to meet face-to-face for the first time, but due to COVID-19, it had to be postponed.

"Peer support is a spiritual connection and a bond between two people that is unique and personal." Gates says. "In this case, it was blood cancer that brought us together, but I feel so lucky to have such a special person like John in my life."

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If you are interested in joining LRF's Lymphoma Support Network, visit lymphoma.org/LSN to sign up online or contact our Helpline at 800 500 9976 or helpline@lymphoma.org.

SHARE YOUR STORY OF HOPE

The Lymphoma Research Foundation's Stories of Hope is part of the Foundation's ongoing effort to give those affected by lymphoma a voice. Everyone's lymphoma journey is unique.

By sharing your story, you can impact other patients, survivors and caregivers who have been affected by a lymphoma diagnosis.

Visit lymphoma.org/SOH to read stories of hope from the lymphoma community and to submit your own story today.

SCIENTIFIC ADVISORY BOARD MEMBERS

Our new members reinforce the unique nature of the Lymphoma Research Foundation's Scientific Advisory Board as the leading advisory body in lymphoma research and education in the United States and around the world.

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The Lymphoma Research Foundation's Scientific Advisory Board (SAB) comprised of 45 world-renowned lymphoma experts, who seek out the most innovative and promising lymphoma research projects for support. Members of the Foundation's SAB are leaders in blood cancer research, with outstanding experience and accomplishments in both lymphoma-specific research and clinical care. They guide the planning of LRF's research program, selecting and monitoring grant recipients.



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The Lymphoma Research Foundation's volunteer Scientific Advisory Board, comprised of world-renowned lymphoma experts, guides the Foundation's research activities, seeking out the most innovative and promising lymphoma research projects for support.

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UPCOMING EVENTS



Update on Follicular Lymphoma, Webinar	8.18
Ask the Doctor About Lymphoma — Virtual	
Blood Cancer Awareness Month/Light it Red for Lymphoma	
World Lymphoma Awareness Day	
25th Anniversary LRF Gala	
Lymphoma Research Ride — Virtual	
Ask the Doctor About Lymphoma — Virtual	
LRF Golf Invitational — Scarsdale, NY	
North American Educational Forum on Lymphoma — Virtual 10.	
Arizona Lymphoma Walk — Phoenix, AZ	



Want to receive information about Lymphoma Research Foundation events happening in your area? Visit **lymphoma.org/emailsignup** to select your email preferences and stay up to date with the latest from the Foundation.



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REGULAR UPDATES ON COVID-19

The health and safety of the lymphoma community is our top priority. We are taking proactive measures to help patients, survivors and their loved ones during the novel coronavirus/ COVID-19 pandemic. Visit the COVID-19 Learning Center at **lymphoma.org/covid19** for ongoing updates on the virus and LRF events and educational programs.

Need to know how COVID-19 is impacting the lymphoma community? Download our fact sheet and listen to COVID-19-specific webinars to stay informed at lymphoma.org/covid19.

The most important thing you can do to prevent coronavirus is **practice good hygiene and social distancing**. Visit the Centers for Disease Control and Prevention at **cdc.gov/coronavirus/2019-ncov** on steps you can take to prevent the virus.

Feeling anxious? It's normal. The LRF Helpline remains a resource for support and to answer questions you may have. Contact the LRF Helpline at 800-500-9976 or helpline@lymphoma.org.

