

# accelerator



MULTIPLE MYELOMA  
Research Foundation

**THE PROMISE OF**

**IMMUNO-  
THERAPY**

**SUMMER 2021**



## MESSAGE FROM THE CEO



**For as long as I can remember, I have always had a passion for healthcare.**

Before coming to the MMRF, my professional experience was in the strategy and management consulting industry helping life sciences organizations advance new breakthroughs for patients—or in other words, I was a problem solver. This experience is what first brought me to the MMRF, where I helped drive the development of the foundation’s new strategic plan to advance its mission for patients. It was the MMRF’s bold vision, commitment to innovation, and unwavering focus on patients that inspired me to join this organization several years ago as the Chief Operating Officer. It is an incredible honor now to be the MMRF’s new President and Chief Executive Officer.

Since the MMRF was founded, we have always stood for several things—putting patients first, leading with urgency, focusing on innovation, and demanding results—and these principles guide us every day in our mission of accelerating a cure for each and every patient. There have been so many recent breakthroughs that are improving the lives of patients, and one of the most exciting areas in cancer research today is in the field of immunotherapy—the subject of this issue of the Accelerator. This new type of treatment recruits a patient’s own immune system to help fight the disease and is leading to novel and more precise treatment approaches that can benefit myeloma patients.

In the following pages, you will learn more about the groundbreaking research underway to advance immunotherapy in the field of myeloma and the important role the MMRF is playing in driving these breakthroughs forward. This work includes our Immune Atlas initiative, which is an extension of our CoMMpass

study. Its goal is to determine how a patient’s unique immune system characteristics can be used to predict which treatments might be best for them over the course of their care. We are also continuing to invest in clinical trials to accelerate the development of new immune targets, therapies, and combination approaches in the highest areas of unmet need within the myeloma community.

The Myeloma Investment Fund, the MMRF’s venture philanthropy subsidiary, has now invested in six promising portfolio companies developing cutting-edge immunotherapeutic approaches and technology platforms to treat multiple myeloma. These investments are accelerating the pace of early-stage research and catalyzing the investment community to improve the probability of success of these therapies for patients.

We have also made tremendous progress on our MMRF CureCloud® program, which is harnessing the power of data to drive new scientific discoveries and improve patient care. Every patient that enrolls in the MMRF CureCloud® gets access to a free blood-based genomic sequencing report that they can use to make more-informed decisions with their treating clinician about their overall care. The aggregated data generated from the CureCloud® program will also help researchers develop new treatments and uncover better care pathways to optimize outcomes for all patients.

Everything we do at the MMRF is inspired by the myeloma community we serve. Patients sit at the heart of our organization, and my personal commitment to you is that, at the MMRF, we will always stay true to our highest-level mission of accelerating a cure for each and every myeloma patient.

Thank you for your ongoing support of our mission. Together, we are getting closer every day to a world without myeloma.

**Michael Andreini**  
President & CEO  
The Multiple Myeloma Research Foundation



MMRF Honored for 19th Year with Highest Rating!

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# UNLOCKING



# IMMUNO-

# THERAPY

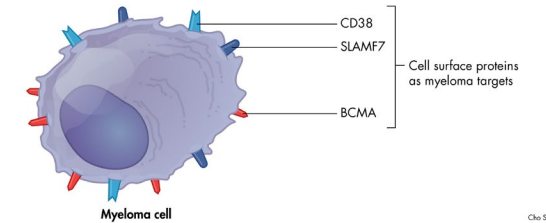
**Multiple myeloma is a type of blood cancer that affects plasma cells. Healthy plasma cells are a type of white blood cell (called B cells) that produce antibodies to fight infection. In multiple myeloma, malignant plasma cells accumulate in bone marrow—the soft, spongy tissue at the center of your bones—crowding out the normal plasma cells as well as other healthy blood cells.**

The use of a patient’s own immune system to fight cancer—referred to as **immunotherapy**—is an exciting area of multiple myeloma research. For myeloma immunotherapy treatments to work, they must be designed to recognize and kill myeloma cells. This has long been a challenge, because myeloma cells—like all cancer cells—have the ability to hide from the body’s normal immune response. Myeloma cells also have the ability to weaken the body’s immune response so that they can continue to grow and thrive. With immunotherapy, researchers hope to identify drugs that work WITH a patient’s immune system to help it recognize and attack the cancer cells, leaving healthy cells unharmed.

### Targeting Myeloma Cells

There are several types of immunotherapy being investigated in myeloma research. How do immunotherapy drugs recognize myeloma cells? The answer lies in proteins, or “markers,” that appear on the surface of myeloma cells and not on the surface of healthy cells. Myeloma immunotherapy drugs are

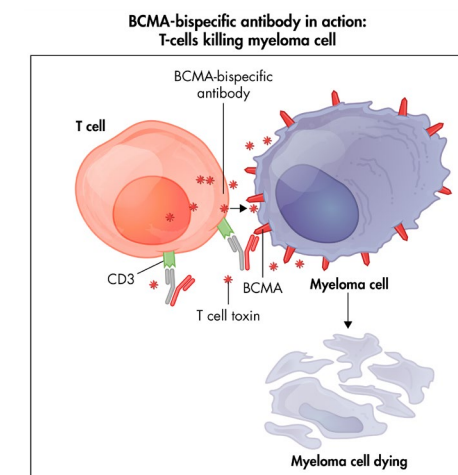
made to recognize and bind to myeloma cell markers, which helps the patient’s immune system recognize the myeloma cells as invaders and kill them. Some common markers are CD38 (where the antibody drugs Darzalex and Sarclisa bind), SLAMF7 (where the antibody drug Emticiti binds), and BCMA, which is the main target of the newer myeloma immunotherapies discussed below.



Choi SF et al. Front Immunol. 9:1821.

### Bispecific Antibodies

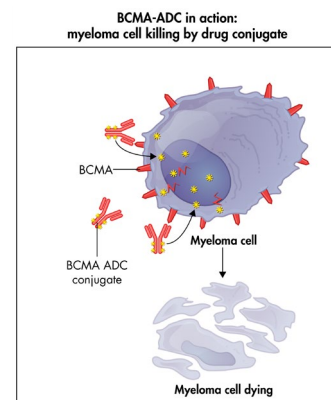
Produced in a laboratory, bispecific antibodies bind to markers on two different types of cells; one part of the bispecific antibody binds to the BCMA marker on myeloma cells, and the other part of the bispecific antibody binds to the CD3 marker on a patient’s T cells, a type of immune cell that can attack and kill invaders. By binding to both types of cells, the bispecific antibody brings the T cell and the myeloma cell close together, the T cell recognizes the myeloma cell as an invader, and then kills it. At this time there are no bispecific antibodies approved for use in myeloma patients, but there are a number of them in clinical trials and the results are encouraging.





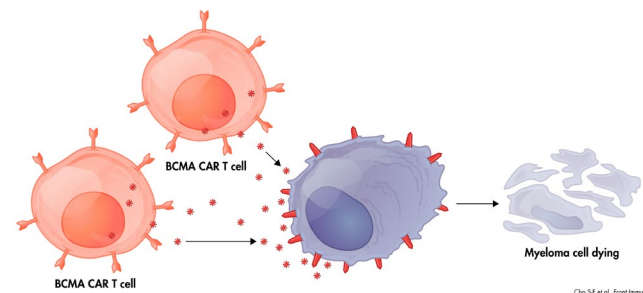
## Antibody-Drug Conjugates

Antibody-drug conjugates (ADCs) are antibodies that are combined with a cancer-fighting substance—either a drug or a toxin. The antibody part binds to a myeloma cell and the cancer drug kills the myeloma cell. Most of the antibodies in this class target BCMA. Blenrep, which was recently approved by the FDA for use in myeloma patients, is an example of this type of immunotherapy.



## CAR T-Cell Therapy

Chimeric antigen receptor (CAR) T-cell therapy uses a patient's own white blood cells—a type of immune cell—to fight myeloma. The white blood cells are collected from the patient, sent to a laboratory and changed so that they can recognize myeloma cells, and are then returned to the clinic to be infused back into the patient. Once inside the body, they immediately begin to recognize and kill myeloma cells. Abecma, which was approved by the FDA earlier this year for use in myeloma patients, is an example of this type of immunotherapy, and other CAR T-cell therapies are in development.



Immunotherapies have the ability to harness the patient's own immune system to fight their myeloma. Because they are designed to attack only myeloma cells,

they can have fewer side effects than other types of therapies that also attack healthy cells. Clinical trials have shown that immunotherapy can be very effective even in myeloma patients who have had many prior treatments. Along with the ones described here, many other immunotherapies are in clinical development and some may soon be approved for treatment of myeloma.

For more information please visit: <https://themmrf.org/multiple-myeloma/treatment-options/clinical-trials-and-experimental-therapies/immunotherapy-for-multiple-myeloma/>

Blenrep: <https://themmrf.org/multiple-myeloma/treatment-options/standard-treatments/blenrep/>

Abecma: <https://themmrf.org/multiple-myeloma/treatment-options/standard-treatments/abecma/>

## DRIVING COLLABORATION WITH MULTIPLE MYELOMA RESEARCH CONSORTIUM

**The development of immunotherapy requires clinical trials, but how do we accomplish this?**

To facilitate faster trial enrollment and drive collaboration between researchers and clinicians at academic medical centers and pharmaceutical and biotech companies with promising treatments in their pipeline, the MMRF established the Multiple Myeloma Research Consortium (MMRC) in 2004.

The MMRC brings together 22 of the best cancer centers in the world to accelerate novel clinical trials and new drug approvals in myeloma. The MMRC utilizes a collaborative research model—sharing data and research freely to speed clinical trials and bring more precise treatments to patients faster. With the MMRC, the MMRF has conducted nearly 100 Phase I and II trials and enrolled thousands of patients to date. We worked to identify and enroll 116 patients on the 12 active clinical studies in the Multiple Myeloma Research Consortium (MMRC) last year.

# CURECLOUD® COLLABORATION

**We are excited to progress the MMRF CureCloud®, a bold and revolutionary initiative that utilizes best-in-class technology to treat patients.**

In December 2020, we were proud to expand CureCloud® to smoldering patients through a partnership with the Dana-Farber Cancer Institute and the PCROWD/PROMISE studies. This collaboration will ultimately help inform how to better identify and treat patients with high-risk of early progression to active disease.

As we move forward in 2021, our team is focused on completing the remaining components of our CureCloud® platform including building out the data visualization modules that will provide contextual information for patients and their clinicians to optimize patient care by looking at aggregated data from similar patient cohorts.

### SANOFI Partnership

As a collaborative partner, Sanofi will serve on the MMRF CureCloud® Advisory Committee and provide strategic and scientific guidance along with principal investigators, bioinformatics leaders and patient advocacy groups on the future direction of the program and data registry. This partnership marks the first of what will be several members of the multiple myeloma community working together to accelerate cures through the MMRF CureCloud®. Through these partnerships, the MMRF will enroll and process new data that will yield a better understanding of how to treat each and every patient individually based on their multiple myeloma subtype.



“CureCloud® is the first direct-to-patient clinical genomics study.”

# MYELOMA INVESTMENT FUND

**Catalyzing investment in myeloma through the MIF. Pushing the research forward and attracting investors to get precision treatments into your hands faster.**

Over the last 20 years, our efforts have contributed to 15 new therapies, with several more to come in the months and years ahead. To ensure that promising, new companies continue to bring their clinical assets to myeloma, the MMRF established the Myeloma Investment Fund® (MIF) in 2019.

The first and only mission-driven, self-sustaining, scalable venture philanthropy fund focused on multiple myeloma, the MIF strives to accelerate the MMRF's mission to deliver transformative treatment options to every patient by bringing the most promising companies, clinical assets, and technologies to multiple myeloma.

The MIF continues to accelerate research and attract promising new companies to the field of myeloma. New investments made in 2020 include **Indapta Therapeutics**, a San Francisco-based biotech developing an allogeneic Natural Killer (NK) cell therapy for the treatment of multiple myeloma, and

**Abcuro, Inc.**, a Newton, Massachusetts-based biotech company that is developing a new immune checkpoint therapy for the treatment of autoimmune diseases and cancer, including myeloma. With each investment, the MIF is advancing the next generation of therapies and also helping to catalyze the biotech and venture capital community to fund the most innovative research in myeloma.

Since its inception, the MIF has developed a robust portfolio of six innovative companies and provided valuable strategic guidance to accelerate their clinical programs. We are proud to share that these investments are paying off with the exit of two of the MIF's portfolio companies. **NexImmune**, our very first investment, had a successful initial public offering earlier this year. And **Tidal Therapeutics**, was recently acquired by Sanofi—a large biopharma company heavily invested in the myeloma space.



## **MIF Invests in Fortis to Advance Novel Immunotherapy**

The Myeloma Investment Fund (MIF), the Multiple Myeloma Research Foundation's (MMRF) venture philanthropy subsidiary, has announced an investment in Fortis Therapeutics, Inc., a San Diego-based biotech company developing a novel immunotherapy for the treatment of relapsed or refractory multiple myeloma. This is the MIF's sixth investment since its launch in 2019.

With this investment, the MIF joins Avalon Ventures, Bregua Corporation, Lilly Asia Ventures, Osage University Partners, Vivo Capital, and the Prostate Cancer Foundation in helping to advance Fortis's antibody drug conjugate (ADC) FOR46 through clinical trials. Early-stage data suggest FOR46 shows effectiveness against the immune modulatory receptor CD46, which is highly expressed in multiple myeloma, prostate cancer, and other tumor types.

The MMRF previously supported early development of FOR46 through an immune translational research grant to Fortis founder Bin Liu at the University of California, San Francisco. The results of that research, published in *The Journal of Clinical Investigation* in 2016, identified CD46 as a promising target for treatment of multiple myeloma.

## **NexImmune Announces Pricing of Upsized Initial Public Offering**

NexImmune, based in Gaithersburg, Maryland, is a clinical-stage biotechnology company developing a novel approach to immunotherapy designed to employ the body's own T cells to generate a specific, potent and durable immune response that mimics natural biology. NexImmune announced in early February the pricing of its upsized initial public offering of 6,471,000 shares of its common stock at a price to the public of \$17.00 per share.

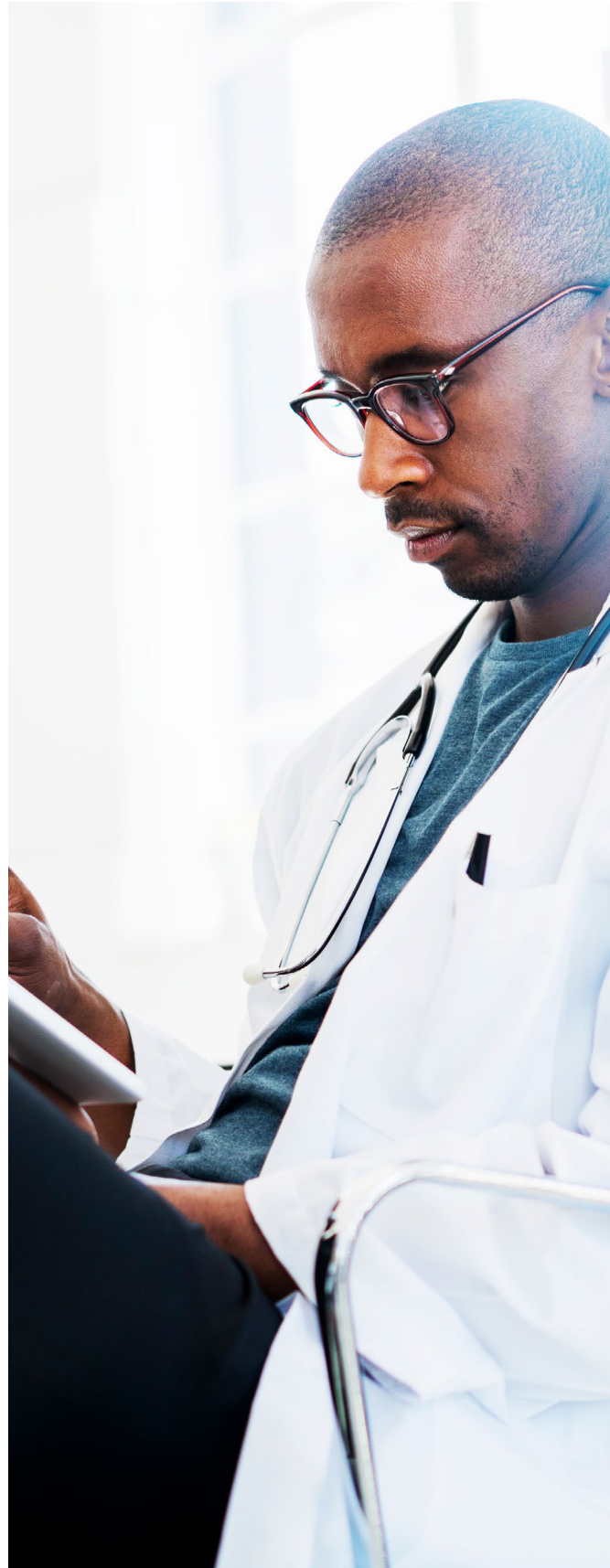


### Sanofi Acquires MIF Portfolio Company Tidal Therapeutics

Global biopharmaceutical company Sanofi has announced the acquisition of the Myeloma Investment Fund (MIF) portfolio company Tidal Therapeutics, a Cambridge, MA-based biotech developing a new technology platform for the treatment of cancer and inflammatory diseases.

Tidal's platform uses mRNA to modify T cells directly in the patient's body, reprogramming them to target myeloma and B-cell malignancies. However, unlike existing CAR T-cell therapies, Tidal's approach does not require the removal and reinfusion of the patient's cells. With its acquisition, Sanofi will further develop the technology platform to expand its research capabilities in immuno-oncology and inflammatory diseases.

"We are thrilled to see Sanofi moving this novel technology forward in immuno-oncology," said Peter Kosa, PhD, MBA, Managing Director of the Myeloma Investment Fund. "Its acquisition of Tidal demonstrates the viability of investing in cutting-edge companies that are driving promising precision medicine approaches to better treat and ultimately cure myeloma. With each investment, the MIF is advancing the next generation of therapies, and also helping to catalyze the biotech and venture capital community to fund the most innovative research in myeloma."



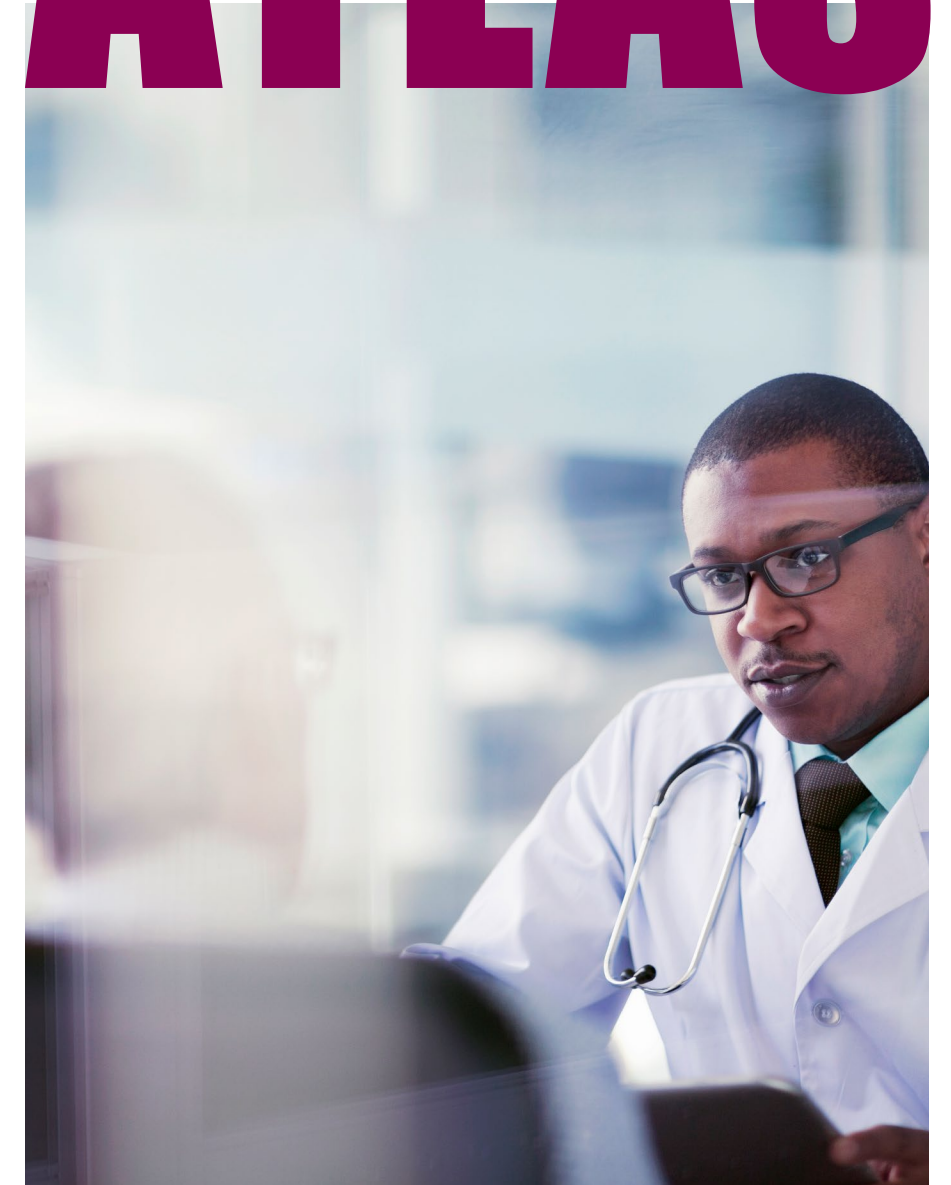
We are thrilled to see Sanofi moving this novel technology forward in immuno-oncology. It's acquisition of Tidal demonstrates the viability of investing in cutting-edge companies...

# IMMUNE ATLAS

## Immune Atlas: What is it?

The goal of our Immune Atlas program is to map the immune landscape of myeloma patients and determine how various immune subtypes impact patient prognosis and response to new immune therapies. Through this initiative, the MMRF is leading the development of immune standards in myeloma that will inform future research and clinical practice in this evolving space. After completing our initial pilot phase last year, we are now moving forward with three studies that will answer important questions for the myeloma community:

1. How do immune subtypes correlate with faster versus slower disease progression?
2. What kinds of immune data can be collected from bone marrow versus peripheral blood?
3. Are there immune predictors of response or resistance to current monoclonal antibody treatments for patients?





# NEW TREATMENT UPDATES

## BLENREP Drug Approval

**BLENREP**, also known as belantamab mafodotin, is a first-in-class B-cell maturation antigen (BCMA)-directed antibody and microtubule inhibitor conjugate (ADC). BLENREP is manufactured by GlaxoSmithKline.

## PEPAXTO® Drug Approval

On February 26 the FDA approved **PEPAXTO®** (melphalan flufenamide) in combination with dexamethasone, for the treatment of adult patients with relapsed or refractory multiple myeloma who have received at least four prior lines of therapy and whose disease is refractory to at least one proteasome inhibitor, one immunomodulatory agent, and one CD38-directed monoclonal antibody.

## Abecma™ Car T Cell

On March 26 the FDA approved **Abecma™** (idecabtagene vicleucel; ide-cel) as the first B-cell maturation antigen (BCMA)-directed chimeric antigen receptor (CAR) T-cell immunotherapy for the treatment of adult patients with relapsed or refractory multiple myeloma after four or more prior lines of therapy, including an immunomodulatory agent, a proteasome inhibitor, and an anti-CD38 monoclonal antibody. Abecma is a personalized immune cell therapy approved as a one-time infusion with a recommended dose range of 300 to 460 x 10<sup>6</sup> CAR-positive T cells.<sup>1</sup> As an anti-BCMA CAR T-cell therapy, Abecma recognizes and binds to BCMA, a protein that is nearly universally expressed on cancer cells in multiple myeloma, leading to the death of BCMA-expressing cells.

# UPCOMING

## EDUCATION EVENTS

FALL/WINTER PATIENT EDUCATION EVENTS

### Tune Into Our Education Events

Stay informed with our educational programming, featuring in-depth learning and discussions with leading multiple myeloma experts. From educational webinars to real-world and virtual patient summits, browse around to stay in the know about new research and breakthroughs.

We have all the educational resources for newly diagnosed patients or those living with myeloma for years. For more information, feel free to start at [themmrf.org/resources](http://themmrf.org/resources)

August 18, 11am-1pm	Precursor Topics (Virtual)	Expert Session
September 22, 2-3pm	Transplant	Webinar
October	Maintenance Therapy	Webinar
November	Precision Medicine in MM	Webinar
December	Flagship Summit	Webinar
December	ASH Highlights	Webinar



## INTRODUCING BRITTANY HARTMANN

### Patient Navigator Center - New Member

Brittany Hartmann, RN, joins the MMRF in the Patient Navigation Center. Brittany worked as a Myeloma Clinical Coordinator in a high-volume call center at the Rutenberg Treatment Center at Mount Sinai Hospital in New York City for the past five years. Here, she supports myeloma patients in a variety of ways from triaging calls, to educating patients on their myeloma, labs and test results, and coordinating with research and management to implement integral changes and streamline processes for access to new treatments. Prior to Mount Sinai, she worked as an oncology nurse at Saint Barnabas Medical Center in New Jersey. Brittany earned her Bachelor of Science in Nursing at the University of Delaware, where she had the opportunity to be a student nurse for a private physician for over a year.





### MMRC Active and Upcoming Clinical Trials

*Recent Updates from the MMRF Collaborators*

#### MyDRUG

There are several very promising treatments in the pipeline. MMRC's collaborative research has driven the first platform study in myeloma that evaluates targeted therapies against specific genomic alterations. This study continues to enroll patients across all studies to gather data for faster and more effective treatments. Two new sub-protocols were added to include Xpovio (selinexor) and Blenrep (belantamab mafodotin) for patients who do not have actionable mutations from genomic sequencing.

#### MyCheckpoint

Our second platform study evaluates two next-generation checkpoint inhibitors in relapsed/refractory patients who have failed standard therapies. After a delayed start from the pandemic, nearly all sites are now open and enrolling patients, with six patients already taking part in the study.

#### Sarclisa-Kyprolis

Sarclisa-Kyprolis is for patients with multiple myeloma that has returned after a period of improvement (relapsed) or has not respond to previous treatment (refractory). This phase Ib trial studies the side effects and best dose of Sarclisa when given together with Kyprolis with or without dexamethasone and Revlimid in relapsed/refractory patients. Immunotherapy with monoclonal antibodies, such as Sarclisa, may induce changes in the body's immune system and may interfere with the ability of tumor cells to grow and spread. Kyprolis may stop the growth of cancer cells by blocking some of the enzymes needed for cell growth. Drugs used in chemotherapy, such as dexamethasone and Revlimid, work in different ways to stop the growth of cancer cells, either by killing the cells, by stopping them from dividing, or by stopping them from spreading. Giving Sarclisa

and Kyprolis with or without dexamethasone and Revlimid may be a better treatment for patients with multiple myeloma.

#### Cevostamab (Roche)

Cevostamab is a new therapy that targets FcRH5 proteins, offering patients who received CAR T-cell therapy or other BCMA-targeting agents a new treatment pathway—unlike first-generation bispecifics that target a myeloma cell's BCMA proteins. Bispecific antibodies, like Cevostamab, bond to a patient's T cells and myeloma cells, bringing them closer together to activate the appropriate—and lethal—immune response against the malignant cells. This breakthrough is a huge milestone in the quest for rapid and sustainable remissions.

# EXPECT PROGRESS

Introducing the  
MMRF CureCloud<sup>®</sup>, the first  
research study with at-home  
genomic testing for multiple  
myeloma patients.

Our groundbreaking research study, the MMRF CureCloud, will help accelerate research with the ultimate goal of identifying smarter treatment options for each and every multiple myeloma patient. Joining the study is free, can help inform your discussions with your doctor, and can make a difference for the entire myeloma community.

**Visit [MMRFCureCloud.org](https://MMRFCureCloud.org) to learn more**





# THE POWER OF PRECISION MEDICINE

## What is precision medicine?

For patients, precision medicine means that their care and treatment is tailored to work best for their own unique subtype of myeloma. To define their myeloma subtype, a patient can undergo genomic sequencing of their myeloma DNA, which may identify DNA mutations, or changes, that can indicate:

1. If their myeloma is a high-risk or normal-risk subtype
2. If their myeloma has mutations that can be specifically targeted by certain drugs

## What are we doing to advance precision medicine?

The MMRF stands at the forefront of precision medicine in several ways:

1. Thanks to our patients, our CoMMpass Study has amassed the largest genomic dataset in any cancer, which is helping researchers discover new myeloma subtypes that could respond better to certain types of treatment.
2. The MMRF has developed the first clinical trial for myeloma patients, the MyDRUG trial, which is treating patients with drugs that target their own DNA mutations based on the results of their genomic sequencing.
3. The MMRF CureCloud® research study provides free genomic sequencing to eligible patients. The results of the sequencing test are sent to both the patient and to their doctor, with suggestions of clinical trials that may be appropriate, and this may help guide future treatment decisions.

## Why is precision medicine important to me as a patient? (Why should I care?)

Treating patients with a course of therapy tailored to their own unique myeloma subtype means that patients are more likely to receive a treatment that will work for them, and may face fewer side effects. It may also lead to better outcomes.

## How long has precision medicine been around?

The first precision medicine, called Gleevec, was approved by the U.S. FDA in 2001 to treat chronic myelogenous leukemia (CML) patients who have the BCR-ABL DNA alteration (also known as the Philadelphia Chromosome) in their cancerous cells. Gleevec specifically blocks the effect of BCR-ABL, leading to durable remissions with better quality of life and fewer side effects for these patients.

## What will it do to me/what are the effects?

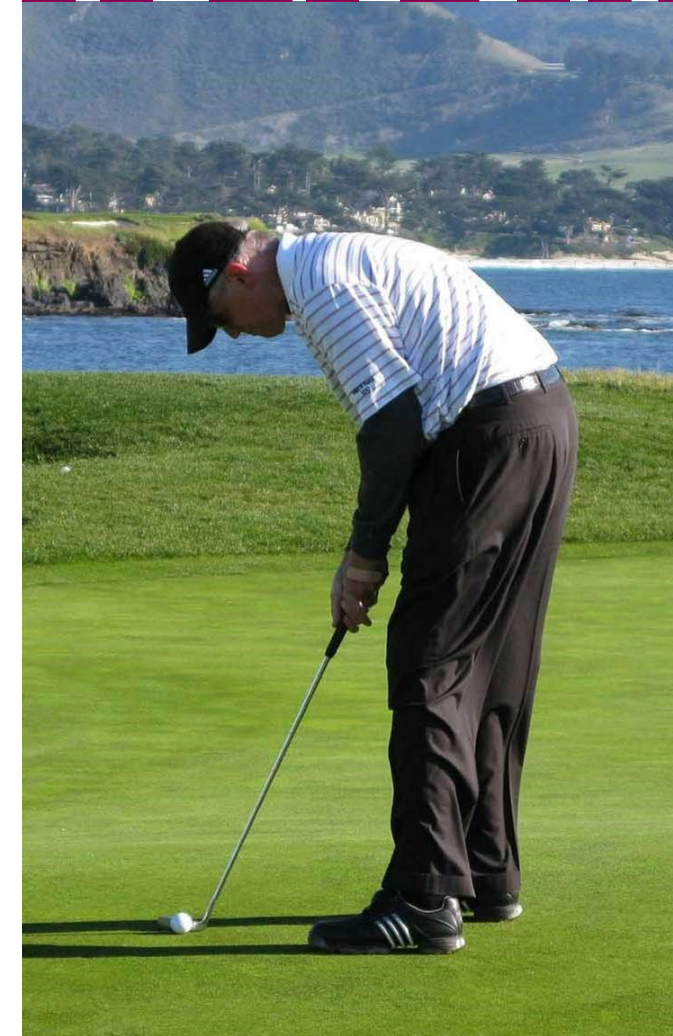
Precision medicine treatments are generally less toxic than other cancer treatments since they only attack cancer cells and not normal cells.

## What is the Right Track?

The Right Track program was developed by MMRF Founder Kathy Giusti in collaboration with four other cancer research foundations working in the Harvard Business School Kraft Precision Medicine Accelerator program. The Right Track describes easy steps that all cancer patients can take to help achieve their best outcome. The steps are:

1. Find the Right Treatment team—the team should include specialists who see and treat many patients with your type of cancer.
2. Get the Right Testing done—this testing, including genomic sequencing, will help define each patient's cancer subtype and will provide a more accurate prognosis and a more tailored treatment plan.
3. Get on the Right Treatment—the right treatment plan should be tailored to the patient's cancer subtype and will offer the best outcome for the patient.
4. Share your Data—sharing your data allows for researchers to find more precise treatment options for you and for every myeloma patient.

# A LIVING LEGACY



In 2009, the Multiple Myeloma Charity Classic (MMCC) was created by close friends of Kent and Debbie Wells upon learning of Kent's myeloma diagnosis. The inaugural event was a golf tournament that quickly expanded to also include a tennis tournament by fellow myeloma patient Tim Johnson and a Capitol Hill reception which has hosted numerous patients, families, and friends for almost a decade and a half. Today, the MMCC has raised over \$1.5 million dollars in support of all myeloma patients and the MMRF mission. This year, on June 10, the MMCC hosted its annual event on what would have been Kent's 67th birthday. We honor and forever remember both Kent and Tim and profoundly thank their families and the entire MMCC community who, despite their personal losses, remain resolute in the united mission for a cure for each and every patient.

"We are proud to play a part in advancing research for all myeloma patients. The MMRF's unique model and urgency is simply unparalleled and has offered families more time, more memories, more hope. To host an event like the Charity Classic, bringing together a community to be an agent for advancing progress while creating memories and friendships—well, it has been our privilege and an honor. The commitment and generosity is a true testament to both Kent and Tim, and a legacy of progress for all patients."  
—Debbie Wells

“The MMRF’s unique model and urgency...has offered families more time, more memories, more hope.”





# DELIVERING PROMISING PRECISION TREATMENTS TO EVERY PATIENT

## A Note From Our Founder and Chief Mission Officer, Kathy Giusti

We have made so much progress since I was first diagnosed with myeloma 25 years ago. Fifteen myeloma drugs are now available, including the recent approval of a new CAR T-cell therapy (CAR-T), and a pipeline full of next-generation CAR Ts, bispecifics, and other potentially transformative treatments.

At the same time, there is a systemic problem in the battle against cancer. The time between discovery of a therapy and getting it into the hands of patients takes far too long. If we are truly going to bring myeloma and other cancers to an end, we desperately need a strategy, like the COVID-19 response, to speed the delivery of precision treatments to every cancer patient.

When I was first diagnosed, there were no treatments for myeloma. In time, new breakthroughs were there to help save my life. I am extraordinarily grateful for this and view every year since my diagnosis as a gift. But I know that not every patient has this experience. We must not allow these critical breakthroughs to pass other patients by because of a painfully slow process of distributing a new therapy at scale.

Take the recent CAR-T approval, for example. I often think of a friend of mine who participated in an early clinical trial for CAR-T. Before she traveled to start the trial, I feared we would never speak again. And yet, she went into remission and has stayed there. She gave an interview to a magazine and credited CAR-T for saving her life.

From the day that article ran, I have received countless calls from other myeloma patients, asking how they could get access to CAR-T. It would take another

five years, until this past spring, for the therapy to be approved for myeloma. It takes much longer to know which exciting immunotherapies will work in which patients and how to optimize combination therapies. Immunotherapies signal a new era of discovery, and we cannot let them slip through the hands of the people who need them most.

There is so much hope on the horizon. A sustained strategy to scale cancer drugs to market will turn this hope into a lifesaving reality for every patient. It also begins with recognizing and ending disparities in clinical research to accelerate cures for all patients.

The MMRF is committed to this effort, and so, too, am I. Through my work with the Harvard Business School Kraft Precision Medicine Accelerator, we are convening stakeholders throughout disease research to develop strategies to address disparities in precision medicine. Far too often, registries and clinical trials are not representative of the patient populations affected by a disease. That means precision treatments are not being tested with all patients who need them. Our goal is to ensure equal and proportionate patient representation in research and clinical trials across diseases, including cancer, so that no one is left behind.

*Kathy Giusti*

**Kathy Giusti**  
Founder and Chief Mission Officer  
The Multiple Myeloma Research Foundation



# OPERATIONAL UPDATES

The MMRF has strengthened its position as a leading cancer research organization with new appointments to its executive leadership. Michael Andreini, who previously served as Chief Operating Officer, has been named President and Chief Executive Officer. Chief Marketing and Development Officer Anne Quinn Young, MPH, has been promoted to Brand President. In addition, Karen Dietz, JD, MBA, will expand her role as the MMRF's General Counsel and Chief Administrative Officer. "The breadth and depth of experience each member of the MMRF leadership team brings to the organization is world-class. They all possess a deep-rooted commitment to our mission and have played critical roles in positioning the MMRF for continued success," said Kathy Giusti, Founder and Chief Mission Officer of the MMRF. "The MMRF is a leader in cancer research because of the tireless work of stakeholders, partners, and staff. As we look to the future, we will continue to

drive forward the innovative work that is bringing us closer to curing myeloma every day."

Mr. Andreini joined the MMRF as Chief Operating Officer in 2019. In that role, he built a strong record working with Ms. Giusti to develop the MMRF's current strategic plan in addition to leading its execution and forging alliances across the organization and the multiple myeloma community. Mr. Andreini's prior experience includes work in the strategy and management consulting industry at IQVIA, where he developed strategies for biopharma, medical device, and nonprofit organizations to drive innovation and operational excellence across a diverse set of business challenges. Mr. Andreini earned a B.A. in chemistry with a minor concentration in economics from Colgate University.



**Michael Andreini,**  
*President and CEO*



**Debanjana Chatterjee, PhD**  
*CureCloud® Clinical Research Manager*

Dr. Chatterjee brings years of experience in design, execution, and management of clinical and translational research at nonprofits. She completed her PhD in Immunology in 2014 from Hannover Medical School, Germany, where she studied mesenchymal stem-cell mediated immunosuppression of natural killer cells. In 2016, she took on the role of senior clinical research coordinator/scientist at Columbia University, where she managed both national and international multisite clinical research studies focusing on genomics, nephrology, immunology, and precision medicine.



**Adrian Rosencranz**  
*Board of Directors*

New board of directors member Adrian Rosencranz is the COO of Salesforce Essentials, where he steers the company's operations, vision, and customer experience. Adrian's passion for helping cancer foundations led him to the MMRF. With over a decade of experience in enterprise software, Adrian is widely respected for being a boots-on-the-ground leader with an extensive track record of driving growth. He has also served as an advisor for Harvard Business School's Kraft Precision Medicine program, accelerating direct-to-patient precision medicine engagement. Adrian earned his BS from Stanford University, where he was the kicker for the football team under Coach Jim Harbaugh.



**Amy Blumkin**  
*Chief Marketing & Development Officer*

We welcome Amy Blumkin to the MMRF as our new Chief Marketing and Development Officer. Amy spent her early career in tourism and hospitality, working first for American Express Travel Related Services and then at the Walt Disney Company. She later became the Chief Marketing Officer for the NY/NJ Superbowl Host Committee until she moved into the nonprofit sector as the Vice President of Brand and Marketing for the Anti-Defamation League and the Vice President of Centennial and Brand Experiences at Hillel International. Amy received her Bachelor's in Business Administration from the University of Vermont and her MBA from Harvard Business School.



**Gary Pettis**  
*Honorary Board of Directors*

Gary Pettis, current third base coach of the Houston Astros, joins us this year as an honorary board member. Prior to coaching, Gary played in the MLB for 11 seasons and won the Gold Glove Award five times. Gary played for the California Angels, Detroit Tigers, Texas Rangers, and the San Diego Padres and later coached the California Angels, Chicago White Sox, New York Mets, Texas Rangers, and now, the Houston Astros. Upon being diagnosed with multiple myeloma in September of 2020, he has been coaching the team via Zoom until he can resume his role in person.



**Kimberly White**  
*Board of Directors*

Kimberly (Kym) White, expert in communications, most recently held the position of the Senior Vice President and Chief Communications Officer of CVS Health, where she oversaw all corporate communications through the COVID-19 pandemic. She was the Senior Vice President and Chief Communications Officer of Vertex Pharmaceuticals, a global biotechnology company. Kym was the Global Sector Chair for Health at Edelman, the world's largest public relations firm. She has also been named a leading healthcare influencer by *PR Week* and *Medical Marketing & Media* in 2016, 2017, and 2020 and was a Cannes Health Lions Pharma juror in 2017.



**Dr. Cartik Saravanamuthu,**  
*Director, Bioinformatics*

Dr. Cartik Saravanamuthu is an expert in the modeling, storage, integration, security, sharing, and analysis of high-volume, multidimensional datasets. At the MMRF, Dr. Cartik is responsible for the development and deployment of the MMRF Data Lake, an ambitious initiative to integrate over 5 petabytes of genomic, immunological, clinical, and patient survey data and to make these diverse datasets available to authorized investigators over a secure biomedical analysis platform, fostering groundbreaking research insights into the etymology and progression of multiple myeloma, which will lead to targeted precision medicine therapies. Dr. Cartik received his PhD in Computer Engineering from the University of Memphis, Tennessee.



# LIVE EVENTS ARE BACK

MMRF Team for Cures is excited to announce a return to live events in the fall, starting with the Chicago 5k on September 12! Team for Cures will continue to feature a virtual component for those who would like to join our mission remotely.

## WAYS TO GET INVOLVED

### Wine and Dine in the D

October 5 & 6

The 11th annual Wine and Dine in the D will be held in Detroit on October 5 & 6, 2021. This in-person strolling dining experience will feature cuisine from some of Metro Detroit's finest restaurants. On Tuesday, September 5, the MMRF will livestream the educational panel discussion featuring myeloma experts including Daniel Auclair, MMRF Chief Scientific Officer at 5:30PM (ET).

For more information: <https://curemultiplemyeloma.org/wine-and-dine-in-the-d/>

### Event Sponsors:



### The Journey

September 17-19

Eric Gelber commemorates the five-year anniversary of his epic Central Park 200-mile run with a new twist.

Longtime MMRF supporter and ultramarathoner Eric Gelber will take on a new endurance challenge—a 200-mile rowing event. This event will be held September 17-19 at Engineer's Gate (89th Street and Fifth Avenue). Help Eric hit a monumental fundraising milestone for the MMRF—\$2 million in lifetime support.

While this event will be held live, the traditional Journey relay series historically held on Randall's Island will continue to be virtual. The Journey hopes to be live again in 2022. For more information on both parts of the Journey series, please visit [themmrf.org/TheJourneyRaceSeries](http://themmrf.org/TheJourneyRaceSeries)



## 2021 Fall Calendar of Events

MMRF ENDURANCE EVENTS		
August 16-21	MM4MM Alaska	Anchorage, AK
September 9-14	MM4MM Machu Picchu	Moved to Denver, CO
September 15-18	MM4MM Mt. Washington	North Conway, NH
September 17-19	200 Miles Towards a Cure	NYC
September 26	Berlin Marathon	Berlin
October 2 & 3	The Journey	Virtual
October 3	London Marathon	London
October 1-6	R2V Oregon (cycling)	Portland, OR
October 10	Chicago Marathon	Chicago, IL
October 11	Boston Marathon	Boston, MA
November 7	NYC Marathon	NYC
MMRF LIVE 5K'S		
September 12	Chicago 5K	Montrose Harbor
September 19	Twin Cities 5K	St. Paul, MN
October 3	DC 5K	National Harbor
October 10	Philly 5K	Philly Zoo
October 23	NYC 5K	Pier 84
October 30	Norwalk 5K	Norwalk, CT
November 21	LA 5K	Griffith Park

Events are subject to change; for more information visit: [TheMMRF.org/Events](http://TheMMRF.org/Events).



### Looking for guidance?

We're here to help. The professionals at our Patient Navigation Center can offer insights, counseling and support throughout your treatment journey.

Give us a call, Mon.-Fri., 9am-7pm ET, 888-841-MMRF (6673) or email us at [PatientNavigator@TheMMRF.org](mailto:PatientNavigator@TheMMRF.org)

### Sponsors

We thank our sponsors for their support of Accelerator, The Magazine of the Multiple Myeloma Research Foundation.



CURE magazine helps patients, survivors and caregivers navigate the cancer experience and understand their diagnosis and treatment. For a free subscription, go to [www.CureToday.com/Subscribe](http://www.CureToday.com/Subscribe)

## MULTIPLE MYELOMA RESEARCH FOUNDATION

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### BOARD OF DIRECTORS

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| Amy Blumkin<br>Chief Marketing and Development Officer  |   |

### HONORARY BOARD

- |  |   |
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|--|---|

The information herein is not intended to replace the services of trained health professionals (or to be a substitute for medical advice). You are advised to consult with your healthcare professional in regard to matters relating to your health and, in particular, regarding matters which may require diagnosis or medical attention.



