Accelerating the Pace of Pediatric Drug Development

Case for Support

CURESEARCH

FOR CHILDREN'S CANCER

Executive Summary

For more than 30 years, CureSearch has been a driving force in pediatric cancer research. Recognizing a broken system, growing obstacles, and unmet needs in drug development, we've launched an innovative and unique strategy to address the urgent, critical need for new childhood cancer treatments.

By supporting CureSearch, you're funding research that's on the path to quickly becoming a drug accessible to the children who so desperately need new treatment options, and you're providing innovative platforms that allow stakeholders to work smarter, faster and more collaboratively.

While survival rates for the most common types of childhood cancer have greatly increased in recent years, there has been little improvement in the prognosis for many less common tumor types. For many high-risk subtypes, long-term survival rates are often less than 50%. Others, like the brain tumor DIPG, remain incurable. For those who do survive a childhood cancer diagnosis, 2 out of 3 will develop one or more chronic health conditions including secondary cancers.

Cancer remains the #1 cause of death by disease in children, yet the current pace of pediatric drug development fails to reflect the urgent need for new treatments. *On average, clinical trials for children begin 6.5 years after adult trials.*[1] Our children deserve better, and CureSearch is leading the way.

With the expert leadership of our Scientific and Industry Advisory Councils, we identify and fund only the strongest research projects that address areas of unmet need and are most likely to quickly reach patients in the clinic or marketplace.

Translational research funding via our Young Investigator and Acceleration Initiative awards support novel projects that address areas of unmet need and are most likely to advance quickly to the clinic in 3–5 years. Through our Catapult Awards, we fund game-changing clinical trials — projects with established commercial potential that will impact patients in the clinic today and have the potential to provide a new, better standard of care for children everywhere.

Our success is measured by the rate of a funded project's progress toward the clinic and marketplace where new treatments can directly impact patients, not by total dollars spent or by publishing in academic journals. We're focused on results, holding our researchers accountable to rigorous six-month milestones; continued funding is dependent on achieving agreed upon goals.

Executive Summary

Since we began funding pre-clinical projects through our Acceleration Initiative in 2013, multiple projects have directly led to the launch of phase one clinical trials offering new treatment options, including trials that are now enrolling Ewing sarcoma and medulloblastoma patients across the country. We're impacting patients today while working to change outcomes for all children in the future.

At CureSearch, we're uniquely positioned to drive critical stakeholder collaborations to accelerate the pace of pediatric drug development.

We know that smarter research funding is just one part of the solution, and that long-term solutions will require a seismic shift to the existing pediatric drug development process and landscape. This change will require strategic collaboration among all players in the pediatric cancer ecosystem, including science, academia, regulatory, funding, patients and industry leaders.

We create connections and community between stakeholders by providing platforms for engagement to allow critical conversations to occur. CureSearch stakeholder meetings such as the annual CureSearch Summit and first-of-its-kind IMPACT Series directly influence and advance pediatric cancer research and drug development.

Together, we're changing the drug development landscape from within and accelerating the development of new treatments for the 43 children diagnosed with cancer each day.

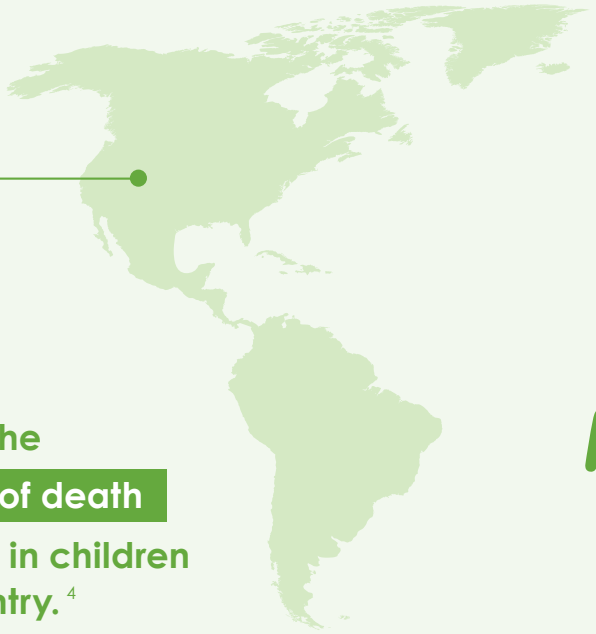
Jacob "Jake" Koenigs

"When our son, Jacob "Jake" Koenigs was diagnosed with rhabdomyosarcoma when he was barely five years old, we did everything we could as he heroically battled his disease. After countless trips to the hospital, trying everything available to us, Jake's doctor explained that there were simply no more options. As I sat by my son's bedside and put him into his favorite Sponge Bob Square Pants pajamas to say goodbye, I looked at him and thought, "I am so, so sorry, Jake...I've got nothing for you." And as I gently kissed his forehead, I watched my only son lose his battle." – Robin, Jake's mom

The Pediatric Cancer Landscape Today

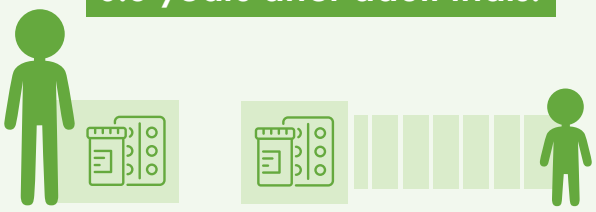
Every year, over **16,000 children in the US** and **300,000 globally** are diagnosed with cancer.[2,3]

Depending on tumor type, **survival rates** can range from **less than 1% to over 90%.**[2]



Cancer is the **#1 cause of death** by disease in children in this country.[4]

On average, clinical trials for children begin **6.5 years after adult trials.**[1]



Most current **standard treatments** for pediatric cancer were **approved before 1990;** half before the **mid-1980's.**[5]

Even as more children defy the odds, the treatments used to save their lives continue to have toxic side effects:

Due to the toxicity of treatments, **2 out of every 3 survivors** will still develop at least one **chronic health condition,** including musculoskeletal problems and second cancers.[6]

Nearly 60% of childhood cancer survivors experience severe or life-threatening **complications in adulthood.**[7]

The Pediatric Cancer Landscape Today

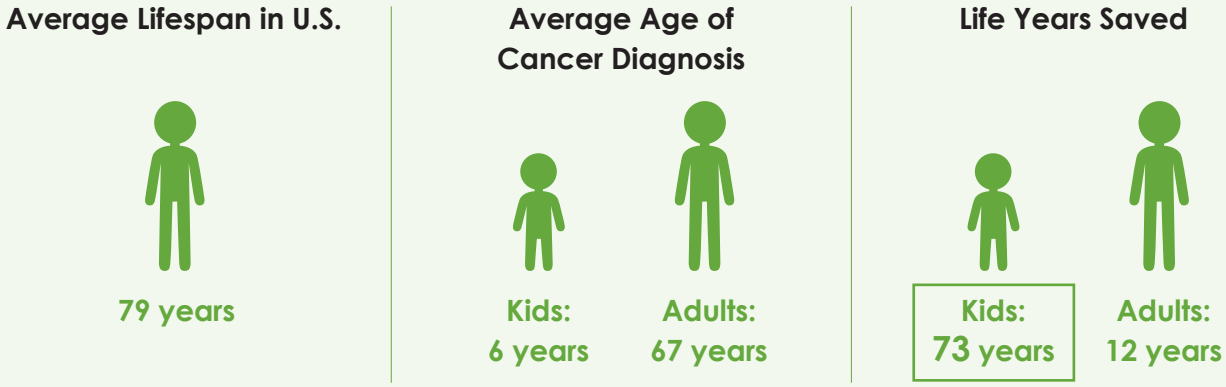
As recently as 1975, only *half* of children diagnosed with cancer survived their disease.[8] The dream of surviving more than five years after diagnosis was kept distant by insufficient and ineffective treatments at the time, including therapies administered at adult dosages that tested the limits of a child's ability to tolerate or survive the treatment itself. With more appropriate dosing and the development of targeted therapies, as of 2016, more than 80% of children and adolescents diagnosed with cancer reach the benchmark survival target of five years post-diagnosis.[2]

Despite progress in treating the most common forms of childhood cancer, survival rates for many other types of childhood cancer remain dismal. For many high-risk subtypes, long-term survival rates are often less than 50%. And some, such as DIPG, are always fatal.

Focused drug development for tumors with insufficient or ineffective treatment options is critical and is a central focus of our research strategy.

From the DNA alterations that drive cancer development to the cells from which tumors are derived, *cancer in children is different from cancer in adults.* Focused pediatric clinical trials are essential, yet do not take place at the rapid pace they are needed for pediatric cancer patients. The need to prioritize and quickly develop new treatments specifically for children is critical, and particularly impactful when considering the quality *and quantity* of life that better childhood cancer treatments will provide.

The Impact of Childhood Cancer Cures — Life Years Saved



Life Years Saved = Lifespan – Age at Diagnosis

The Right Team: Cross-Sector Expertise

The strength of any non-profit organization can be ascertained by looking to its volunteer leadership. Our staff is guided by an independent Board of Directors who provide outstanding executive leadership, experience, and expertise from the areas of business, finance, medical research and philanthropy.

Our world-class Scientific and Industry Advisory Councils are comprised of experts at the top of their fields in science and industry; validation of a research project or stakeholder meeting by our councils speaks volumes in the global pediatric cancer arena. By convening thought leaders and key perspectives, we offer a unique and sophisticated approach that will change the pediatric cancer landscape from within and accelerate the pace of pediatric drug development.

CureSearch Scientific Advisory Council

The Scientific Advisory Council (SAC) includes best-in-class pediatric oncologists who set the academic priorities for CureSearch research initiatives and evaluate projects on scientific merit. With the support of the SAC, CureSearch funds laboratory research aimed at transcending barriers and developing innovative approaches to solve the field's most challenging problems. The SAC is composed of experts from world-renown pediatric cancer research institutions such as the Dana-Farber Cancer Institute, Memorial Sloan Kettering Cancer Center and Children's Hospital of Los Angeles. The SAC also includes representation from the U.S. Food and Drug Administration (FDA).

CureSearch Industry Advisory Council

The Industry Advisory Council (IAC) includes leaders from the largest global oncology and biotechnology companies who champion CureSearch and pediatric cancer programs within industry. The Council reviews potential CureSearch-funded research projects for clinical, commercial and regulatory feasibility and provides objective counsel to assess clinical translation and drug development potential. IAC members include leaders from pharmaceutical companies including Jazz Pharmaceuticals, Novartis and Bayer, biotechs including Day One Therapeutics, and clinical research organizations including PRA Health Services.

Full Council rosters in Appendix A.

Overcoming the Obstacles: The CureSearch Strategy

Obstacle: Ineffective communication between researchers, clinicians and industry

In the pediatric cancer drug development space, as with most ecosystems, each stakeholder has their own focus area and goals. Researchers and clinicians are experts in the lab, drug makers know the ins-and-outs of bringing a drug to market and regulatory agencies ensure public safety and an adherence to guidelines. Lack of structured and frequent communication between these stakeholders is detrimental to progress.

Without strong relationships and continuous dialogue, information sharing between groups is lacking, and the pace and quality of pediatric drug development continues to trail behind adults. For example, before a pharmaceutical company applies for new drug approval in pediatrics with the FDA, the company must create a Pediatric Study Plan (PSP) to address how pediatric patients will be included in a clinical trial. If the PSP is developed without the input of an academic pediatric expert — which is often the case — the trial design may not properly address the needs of the children on the trial or achieve the goal of the trial.

CureSearch Solution: Create a communications infrastructure to facilitate advanced collaboration

Leveraging our unique position and extensive relationships, we convene leaders from all areas of the global pediatric cancer ecosystem — academia, regulatory, pharma, funding organizations, partners, donors and volunteers — to drive the collaborations necessary to accelerate the pace of children's cancer research. And, to ensure the patient voice is heard, we make certain that parents, donors and advocates are included in the dialogue.

CureSearch Stakeholder meetings provide key opportunities for leaders to connect

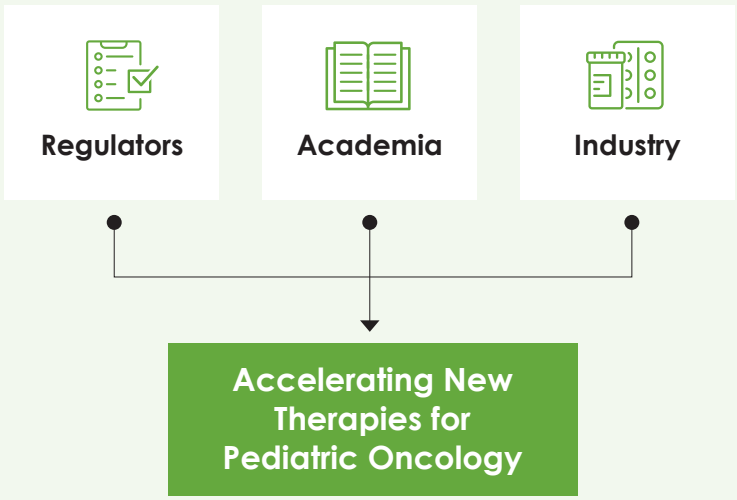
With the guidance of our Advisory Councils, we identify critical topics in the pediatric ecosystem and bring key players together to address specific, timely, high impact opportunities or obstacles to advancing pediatric cancer research. Meetings are outcome-oriented and action-focused; participants collaborate to create strategic, innovative solutions with clear actions and deliverables.

Overcoming the Obstacles: The CureSearch Strategy

CureSearch Solution: Create a communications infrastructure to facilitate advanced collaboration

The IMPACT Series supports earlier conversations for pediatrics

In the current drug development process a new clinical trial will begin by enrolling adult patients. It isn't until that trial reaches Phase 2 that data is shared, and a pediatric application can be considered. Because researchers must wait to access the information needed to make the drug for children, on average, *clinical trials for children begin 6.5 years after adult trials.*[1] We're working to accelerate that timeline and bring our kids to the forefront of drug development.



To align academic pediatric oncology research with drug development efforts earlier in the discovery process, we created the CureSearch IMPACT Series. These confidential forums provide pharmaceutical leaders early insights into the relevance of their private drug pipeline as potential targets for children while giving researchers the opportunity to align their pediatric research sooner.

On March 28, 2019 we hosted the first IMPACT Series Forum with AstraZeneca as our inaugural partner. Six global academics attended with six AstraZeneca participants. Moving forward, CureSearch will host 3-4 IMPACT Series Forums throughout one calendar year. Partner participation will come from large pharmaceutical companies, bio-tech companies, and drug development leaders.

"It would have taken me six months to have one-on-one meetings with each academic, and I would have walked away with half of the information I learned today."

– Lead from AstraZeneca after attending the inaugural IMPACT Series Forum

Overcoming the Obstacles: The CureSearch Strategy

Obstacle: Duplication of efforts and insufficient funding of academic research

Because of the dire need for increased funding for pediatric cancer research, more than 1,000 pediatric cancer foundations have formed across the U.S. to support research needs. A large number of independent research funding organizations inherently leads to duplication of efforts and limits our ability to maximize limited resources. Furthermore, many organizations lack focused funding strategies and the resources to properly vet potential projects for actual patient impact.

With minimal federal and pharmaceutical company support, researchers rely heavily on private funding, which often comes in small increments. Depending on their positions, institutions, and research priorities, investigators can spend anywhere from 15-40% of their time finding and applying for research grants, especially when considering resubmissions and low success rates. This means our most promising minds are spending time fundraising for their work instead of in the lab conducting lifesaving research.

It will require collaboration amongst funding organizations to fully support large-dollar, thoroughly vetted research projects with the greatest potential to improve standards of care for children today, and in the future.

CureSearch Solution: Drive collaboration and partnership with like-minded organizations

In leading a more collaborative approach across the pediatric cancer ecosystem, we recognize that it takes more than just one funding organization to move drug development forward. We have created a strong joint funding environment to support innovative projects, combat duplication of efforts and better leverage a combined funding pool.

In 2017, CureSearch and the Parker Institute for Cancer Immunotherapy (PICI) entered into a $10 million co-funding partnership to utilize respective expertise and networks to identify and fund promising immunotherapy projects for the treatment of children's cancer. PICI accelerates the development of immunological cures for cancer through innovative science, advanced technologies and new modes of research collaboration, a mission that aligns with our strategic goals and research approach; the potential for immunotherapy to advance safer, more effective treatments is one that both PICI and CureSearch recognize.

The first outcome of this collaborative venture is a $1.2M grant announced in 2019 supporting Dr. Crystal Mackall's DIPG CAR T-cell clinical trial to be performed at Stanford University. DIPG is a devasting type of brain tumor that is currently incurable; the median overall survival is less than one year. Over the last three decades, more than 250 clinical trials testing radiotherapy and/or chemotherapy have been performed with no improvements in overall survival. Now, Mackall's innovative CAR T-cell therapy offers a trailblazing new approach to treating this deadly tumor.

Overcoming the Obstacles: The CureSearch Strategy

Obstacle: Academic research is not specifically focused on clinical testing and commercialization

Basic science forms the foundation of biomedical research and is necessary for the understanding of underlying biological processes that contribute to both health and disease. Moving the findings of basic science into safe and effective therapies is a challenge, as several obstacles hinder the translation of basic research to the clinic. These challenges can be seen at institutional, cultural and policy levels.

Support, infrastructure and collaboration are necessary for the success of translational research. Commonly, academia is viewed as an environment where specialization, individual achievement and hypothesis-driven research are rewarded [9] — metrics that do not encourage collaboration. Therefore, in academia, it can be difficult to establish the broad expertise and partnerships required to move work from the lab to the clinic.

CureSearch Solution: A Unique Approach to Research and Drug Development

We're laser focused on driving new treatments to patients in an accelerated timeframe. We only fund projects with commercial potential, anticipated to reach patients in the clinic or marketplace within three to five years. Our translational, preclinical and clinical stage awards give preference to areas of high unmet need - the cancers with the lowest survival rates, fewest or most damaging treatment options, and populations that are underserved, including adolescent and young adults. Within the context of unmet need, we prioritize innovative therapies that have strong potential to lead to more effective and less-toxic therapies, including novel targeted therapeutics, immunotherapy and combination therapies. We support international research because the next game-changing discovery can come from anywhere, and international collaborations can unite the greatest minds for the development of the most effective cures.

Funding Priorities:

- **Projects with commercial potential, anticipated to reach the clinic in an accelerated timeframe or already in clinical trials.**
- **Fund research from U.S., Canada, EU and Australia**
- **Address barriers in areas of high unmet need, including high-risk, relapsed, or metastatic disease, cancers with limited or toxic treatment options, and adolescent and young adult patient populations**
- **Focus on innovative treatment modalities such as novel targeted therapeutics, immunotherapy, and combination therapies.**

Our Research Programs

Our three distinct research programs fund both pre-clinical and clinical research, and are each designed to accelerate the pace of pediatric drug development and deliver new treatments directly to the children who so desperately need them:

CureSearch Young Investigator

Through our Young Investigator awards, we combat the loss of promising scientists from the field by providing significant financial support to investigators early in their research careers. These grants are limited to truly transformational science designed to deliver the next generation of cancer treatment to the clinic in three to five years.

Research Case Study:

Young Investigator Dr. Loretta Li at Northwestern University/Lurie Children's Hospital develops a critical partnership to propel novel B-cell acute lymphoblastic leukemia treatment towards the clinic

- ✔ **Three patents are pending for the scaffolds on which the therapy will be designed**
- ✔ **Inhibitors have been licensed to a startup, building the foundation for a seamless transition into clinical trials and beyond**

CureSearch Acceleration Intiative

Our Acceleration Initiative projects are highly innovative, address a significant challenge in pediatric cancer drug development, and have a strong probably of clinical application — ready to reach patients within three years.

Research Case Study:

Dr. Mary Beckerle and team at Huntsman Cancer Institute provide the preclinical research necessary to bring a novel therapy for Ewing sarcoma to clinical trial

- ✔ **Three years into Dr. Beckerle's project, the FDA approved a compassionate use trial using the therapy that she characterized**
- ✔ **Four years after the project started, the novel therapy was licensed to Salarius Pharmaceuticals who have initiated a Phase I clinical trial**

Our Research Programs

Catapult Awards

CureSearch Catapult Awards propel high-potential research out of the lab into the clinic and ultimately, to the kids who need it most. Our Catapult Awards provide funding for Phase 1 or Phase 2 clinical trials that advance promising therapies for pediatric cancer. The Catapult Award uniquely funds cutting-edge clinical trials that begin enrolling patients in less than a year, and every applicant must be partnered with a for-profit company to ensure they have developed the necessary infrastructure to ultimately move the therapy from clinical trials into the marketplace.

Research Case Study:

Dr. Ranjit Bindra at Yale University fast-tracks therapy to clinical trial in 1.5 years thanks to pivotal funding and clinical trial network relationships

- ✔ **Dr. Bindra partnered with the Pacific Pediatric Neuro-Oncology Consortium (PNOC) to administer the clinical trial at 18 pediatric cancer centers in the U.S.**
- ✔ **The first patient has been enrolled onto Dr. Bindra's clinical trial testing a new therapy for a subtype of glioma that is commonly seen in adolescents and young adults**

"Federal grant funding processes typically take 1–2 years, or even longer, to support pediatric cancer research. In our case, we needed to translate our research from the bench to the bedside to treat kids with cancer at a much faster pace, and CureSearch funding was critical for us to achieve this goal."

– Dr. Ranjit Bindra

Photo credit: Yale School of Medicine

"The trial exemplifies innovation at every stage on the long journey, beginning with a breakthrough in the lab to an application in the clinic, with stops to pick up collaborators, funders, and institutional partners. The trial is also significant for its focus on a group usually overlooked by cancer research — adolescent and young adult (AYA) patients."

– Yale School of Medicine

Research Evaluation and Monitoring

We employ a precise process to review grant applications, ensuring the most innovative projects with the greatest potential to reach patients quickly are selected. **We will not fund a project that does not demonstrate commercial potential.** Submitted proposals undergo a rigorous evaluation of scientific merit, clinical feasibility and commercialization potential through collaboration of our key advisory councils. Each proposal is reviewed by our Scientific Review Committee comprised of experts in academic pediatric oncology, and experts in pediatric oncology drug development via our Industry Advisory Council. The most promising proposals will be further affirmed by our Scientific Advisory Council. *See Appendix B for a detailed overview of the review process.*

We apply a unique measurement and evaluation framework to assess the accomplishments and impacts of our research grants. In bi-annual reports, researchers provide a summary of research deliverables that directly address essential steps in the drug development pipeline, including but not limited to: number of new trials initiated, treatments in clinical testing, drug and clinical database entries and users, services/resources provided, and regulatory filings/approvals. To ensure that researchers are poised for success, we facilitate an open dialogue with our Advisory Council experts who provide feedback and suggestions to assist in the accomplishment of milestones and, ultimately, to drive new therapeutics through the drug development, approval and commercialization process.

Conclusion

A child's diagnosis with cancer is devastating, affecting families from all geographic, ethnic and socio-economic groups. Their challenges are overwhelming: the child's survival, repeated clinic visits and hospitalizations, disrupted relationships, lost school time, and financial hardship, among others. While new treatments - most often designed originally for adults - have improved overall survival rates, children often face longer, more intense treatment schedules that contribute to their life-long cumulative burden of disease. Treatment-related toxicities lead to secondary cancers, organ damage, early onset heart failure, and cognitive/growth deficits that undermine their future health, happiness, and longevity.

We know where the problems lie and work with leaders across the pediatric cancer ecosystem to overcome them; collaboration is crucial for success. We partner with companies and foundations to co-fund pivotal research, and we're building the tools and resources to create a paradigm shift in pediatric drug development. With the help of philanthropic donors and investors, we can do it exponentially better and faster.

Together, we will continue to create connections and community to quickly drive cutting-edge research out of the lab and into the clinic, providing new, less-toxic treatment options for the children who are counting on us.

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Appendix A

Scientific Advisory Council

The Scientific Advisory Council (SAC) includes best-in-class pediatric oncologists who set the academic priorities for CureSearch research initiatives and evaluate projects on scientific merit. With the support of the SAC, CureSearch funds laboratory research aimed at transcending barriers and developing innovative approaches to solve the field's most challenging problems.

***Council Chair* — Richard J. O'Reilly, MD**
Chairman, Department of Pediatrics
Chief, Pediatric Bone Marrow Transplant Service
Memorial Sloan Kettering Cancer Center

Scott A. Armstrong, MD, PhD
Chair, Department of Pediatric Oncology
Dana-Farber Cancer Institute
David G. Nathan Professor of Pediatrics
Harvard Medical School

Malcolm Brenner, MD, PhD
Professor, Department of Pediatrics
Section of Hematology-Oncology
Baylor College of Medicine
Director, Center for Cell and Gene Therapy
Texas Children's Hospital

Lia Gore, MD
Co-Director, Developmental Therapeutics Program
University of Colorado Cancer Center
Ergen Family Chair in Pediatric Oncology
Section Head, Pediatric Hematology/Oncology/BMT
Children's Hospital Colorado

Lee J. Helman, MD
Professor of Pediatrics
Keck School of Medicine
University of Southern California
Head, Basic and Translational Research
Children's Center for Cancer and Blood Diseases
Children's Hospital of Los Angeles

Stephen L. Lessnick, MD, PhD
Director, Center for Childhood Cancer & Blood Diseases for The Research Institute at Nationwide Children's Hospital
Physician, Division of Hematology and Oncology at Nationwide Children's Hospital
Professor of pediatrics, The Ohio State University College of Medicine

Andy DJ Pearson, MD
Retired Professor of Pediatric Oncology
Institute of Cancer Research
Royal Marsden Hospital, England

Gregory H. Reaman, MD
Associate Director, Oncology Sciences
Office of Hematology and Oncology Products
OND Center for Drug Evaluation and Research
U.S. Food and Drug Administration

Donald Small, MD, PhD
Kyle Haydock Professor of Oncology
Professor of Oncology, Pediatrics, Cellular and Molecular Medicine, Human Genetics
Director, Pediatric Oncology
Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins

Loren D. Walensky, MD, PhD
Associate Professor, Department of Pediatrics
Attending Physician in Pediatric Oncology
Principal Investigator, Linde Program in Cancer Chemical Biology
Director, Harvard/MIT MD-PhD Program
Dana-Farber Cancer Institute

Brenda Weigel, MD
Professor and Lehman Family Chair in Pediatrics
Division Director, Division of Pediatric Hematology and Oncology
University of Minnesota
Masonic Cancer Center

Appendix A

Industry Advisory Council

The Industry Advisory Council includes 18 leaders from the largest global oncology and biotechnology companies who champion CureSearch and pediatric cancer programs within industry. The group reviews potential CureSearch-funded research projects for clinical and regulatory feasibility and provides objective counsel to researchers to assess clinical translation and drug development when evaluating each project.

***Council Chair* — Samuel Blackman, MD, PhD**
Chief Medical Officer and Co-Founder
Day One Therapeutics

Elly Barry, MD, MMSc
Senior Director, Pediatric Oncology Therapeutic Area Clinician Leader
Pfizer Global Product Development Oncology
Pfizer, Inc.

Ellen Bolotin, MD, PhD
Pediatric Global Clinical Leader
Development, Specialty Medicine-Oncology
Bayer HealthCare Pharmaceuticals

J. Scott Cameron, MD, PhD
Senior Director and Clinical Program Leader
Novartis Institute of Biomedical Research

Hubert Caron, MD, PhD
Global Development Team Leader, iPODD Pediatric Oncology Team
Senior Medical Director
Roche/Genentech

Davy Chiodin, PharmD
Senior Vice President, Product Development
Day One Therapeutics

Arindam Dhar MBBS, MD, PhD
Clinical Development Lead
Cancer Epigenetics
GlaxoSmithKline

Kevin Heller, MD
Chief Medical Officer
NextCure

Deborah Morosini, MD, MSW
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Hernando Patino, MD
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Child Health Innovation Leadership
Janssen

Rosanna Ricafort, MD
Clinical Program Lead
Hematology-Oncology Research Development
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Raphaël Rousseau, MD, PhD
Executive Vice President
Chief Medical Officer
Gritstone Oncology, Inc.

Jeffrey Skolnik, MD
Vice President, Clinical Development
Inovio Pharmaceuticals, Inc.

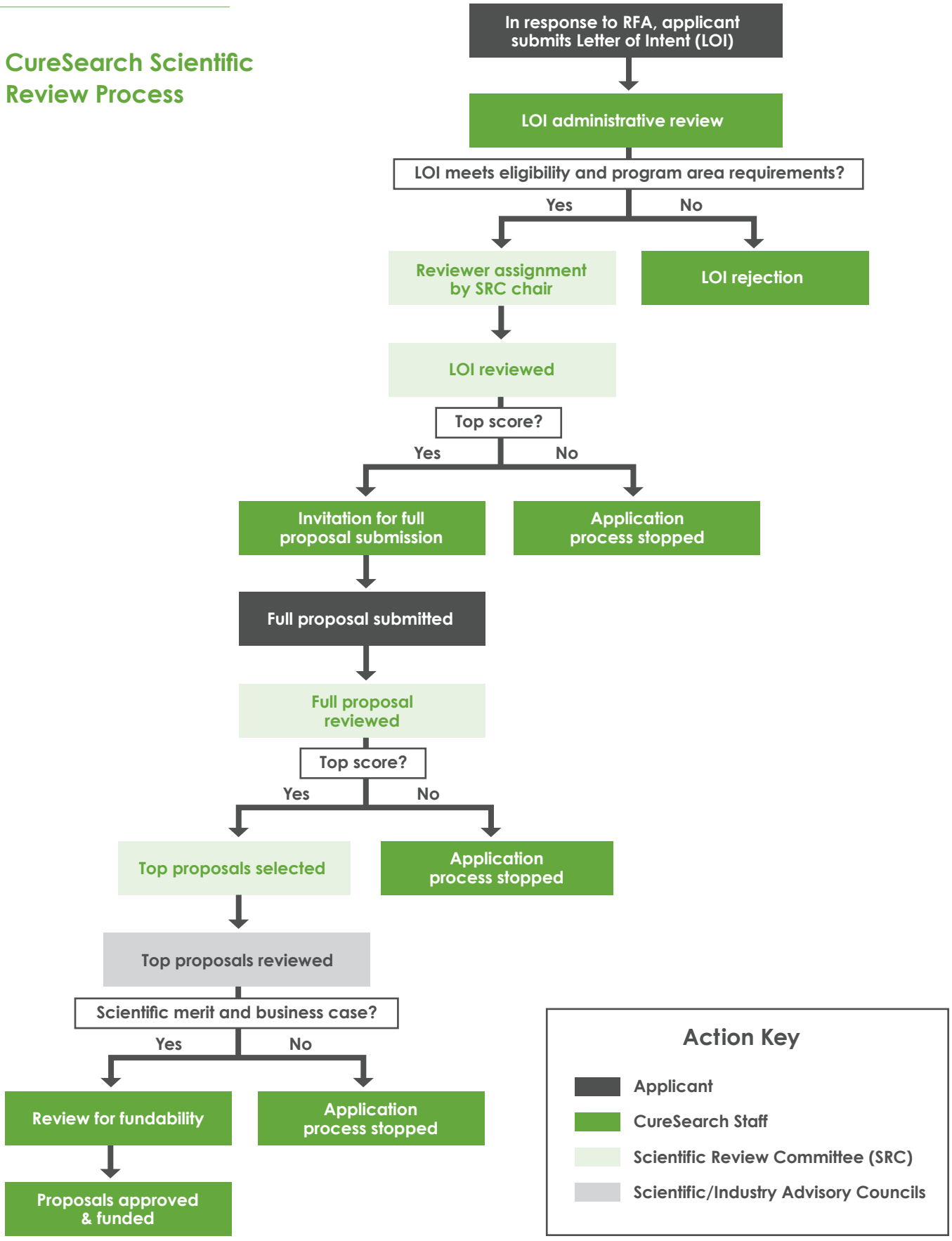
Mark Sorrentino, MD, MS
Vice President
Center for Pediatric Clinical Development
PRA Health Sciences

Allen Yang, MD, PhD
VP, Head of Clinical Development
Acting CMO
Jazz Pharmaceuticals

Su Young Kim, MD, PhD
Medical Director
Abbvie

Appendix B

CureSearch Scientific Review Process



Appendix C

CureSearch Resources and Fundraising Events

For over 30 years, CureSearch has been a driving force behind the development of better, less-toxic treatments for every child diagnosed with cancer. We fund high potential research focused on moving new treatments quickly to the clinic and ultimately, to the children who depend on us. We also provide families with the resources and support they need to navigate a cancer diagnosis, and our nationwide fundraising events bring communities together in support of our shared mission to end children's cancer.

CureSearch has built a highly credible, instantly available library of resources and tools for families affected by children's cancer, including:

A Special Barbie®

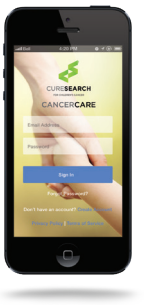
Through a partnership with Mattel, we provide young cancer fighters with a special, brave Barbie. These bald dolls are a great way to help children better understand hair loss associated with treatment.

Educational Resources

On our website, we provide expert-vetted cancer resources and educational videos that are accessed by more than one million people each year.

CancerCare Mobile App

Our free CancerCare mobile app, allows parents and caregivers to organize treatment dates and medication schedules, track patient side effects and blood counts, and so much more.



Clinical Trial Finder

Our clinical trial finder offers a simple way to identify clinical trials in any location that may benefit both current patients and the entire pediatric cancer community.

CURESEARCH WALK

CureSearch Walks bring together families, friends and community members who raise funds to support CureSearch research projects and deliver better, less-toxic treatments for the 43 kids diagnosed each day. Form a team and walk in support of kids currently fighting cancer and in memory of those who lost their battle.

CURESEARCH ULTIMATE HIKE

CureSearch's Ultimate Hike program is a life-changing, lifesaving adventure that provides the opportunity to tell children's cancer to "take a hike." To date, Ultimate Hikers have raised over $5 million in support of CureSearch's mission to end childhood cancer.

CURESEARCH GOLD

CureSearch Gold is a fun way to use your DIY skills to create an awesome fundraising opportunity — a backyard BBQ, baseball competition, outdoor concert or bake sale — the possibilities are truly endless!

CURESEARCH CHALLENGE

Go the extra mile for children fighting cancer! Runners of all fitness levels can participate in a 5K, half marathon or marathon and help raise critical funds. Participants receive complimentary race entries, fundraising support and access to exclusive CureSearch gear.

Get involved or learn more at curesearch.org