

The Mesothelioma Applied Research Foundation

Our mission is to eradicate mesothelioma as a life-ending disease.



BREATH OF HOPE

Second International Symposium On Malignant Mesothelioma

Over 200 members of the meso community - doctors, researchers, patients, family members and advocates - gathered together October 6 - 8 for the Second International Symposium on Malignant Mesothelioma. The three days were full of high-level information,



Research, page 3.)

Advances in detection, multimodal treatment, gene therapy, immunotherapy and new investigational drugs were among the topics that thrilled the audience. Like many, Ann Ferrero and her entire family "reeled from the shock" when her mother was diagnosed with meso a year ago. But, she says, the information presented at the symposium left her "moved, grateful, and dare I say ... hopeful!" Four-year pleural meso survivor Klaus Brauch stated: "The most important sign of progress for me was that we are now talking about second-line treatments, something of great interest to those of us concerned about recurrences. A few years ago just surviving first-line treatment was an achievement."

Attendees were able to meet and ask questions of some of the world's leading meso experts. For patients and family members, the ability to interact with the medical community on such an informal level was unique and invaluable. Many returned home with new information

and new leads for pursuing treatment. In addition, over thirty meso patients, including numerous long-term survivors, were in attendance. Their presence was inspiring to all.

Also inspiring was the presentation of the Pioneer Awards, which MARF introduced this year to honor and encourage companies that, through their investments in meso research, are on the forefront of discovering improved ways to treat the disease. The increasing interest of pharmaceutical and medical companies will provide significant new resources in the fight to eradicate meso. Perhaps even more encouraging is that these companies' objective business judgment confirms MARF's belief that better treatments for meso can be developed. Recognized with the Pioneer Award and thanked for "leading the way to a more promising future for meso patients" were Eli Lilly, Alfacell, Merck, Biogen Idec, Fujirebio Diagnostics, Genentech and Novartis. Alfacell CEO Kuslima Shogen summed up the response of the award recipients as she stated, "it is a great honor to receive one of the first MARF Pioneer Awards," and promised to "continue to work with MARF on the mission to find a cure."



The somber nature of this mission, and the reason accomplishing it is so urgent, were emphasized with a poignant tribute ceremony on Thursday evening. Against the backdrop of a huge memorial wall, the names

of loved ones lost to meso were read. Candles were lit to commemorate their lives, their continued presence in the hearts of all who love them, and the way they inspire us to continue to work for a cure of this disease. Thursday also featured special break-out sessions where patients, caregivers, and those who had lost a loved one to the disease were able to gather as

Fall 2005

INSIDE THIS ISSUE

Symposium	1
Message from Chris	2
Focus on Research	3
Patient Profile	4
Dr. Hassan Joins MARF	6
Chris Botti Event	7
VNN	7

BELIEVE IN A CURE

MARF STAFF

Christopher Hahn
Executive Director
c-hahn@marf.org

Rob Grayson
Director of Development
and Volunteers
r-grayson@marf.org

Jill Wayne
Assistant Director
j-wayne@marf.org

Trish Cerin
Administrative Assistant
t-cerin@marf.org

Copyright © 2005

Message from the Executive Director



MARF's office is just returning to normalcy following the Second Mesothelioma Symposium and the months of intense work leading up to it. We are filled with excitement and a huge sense of relief.

Doubts nagged us in the lead-up to this year's symposium. The first symposium last year had surpassed expectations, and met a long pent-up need. Would we be able to improve the symposium this year? Would the momentum continue and build, or would the energy drain off since the pent-up need was met last year? Could the energy continue to be channeled toward a constructive solution to the tragedy of meso?

To our huge relief, the meso community resoundingly answered these questions. The symposium was even larger and more powerful than last year. World-class meso experts gave presentations that were fascinating, encouraging and very educational. There were even more patients and family members, representatives from drug and medical companies, and front-line doctors than last year, as well as union representatives, U.S. government officials, and a member of the Canadian parliament. The meso community responded in an overwhelmingly positive way to the challenge to move from "victimism" to "activism" - for each person to take as much control as possible over their own situation, and for us individually and as a community to use our tremendous social-justice power to cure meso.

So we are not just relieved; we returned from the symposium inspired anew. Many of the participants had lost a life's partner, parent or child to the disease. Even though the symposium would raise extremely painful reminders of their loss, they chose to participate, so they could be part of the movement to cure meso. That is courage! Patients attended to gain information for themselves, but also to help and encourage others. That is true compassion. The Canadian parliament member (who is also a meso patient) stood up, acknowledged his government's role in exporting so-called "safe asbestos" and asked the experts to honestly tell him what message he should bring back to his government. That is integrity and social concern.

Filled as it is with such courage, perseverance and true concern for the welfare of others, there is no doubt that the meso community will conquer this disease. Indeed, we are already hearing of inspiring steps of activism just since the symposium. The week after they returned, Bob Cosentino and his wife Mary went to the NIH for

treatment of her peritoneal meso. While near D.C., Bob called and made an appointment to see his U.S. Senator, Richard Durbin. Armed with the power of Mary's and his personal story, and having carefully educated himself on the important facts, Bob made quite an impression! Within days I got a call from Senator's Durbin's legislative aid saying, "We just met with one of our constituents, and as a result the Senator has committed to addressing the need for greater meso research funding. Let's work together."

It is clearer than ever that we are making progress, and that with adequate research funding, effective treatments for meso are within reach. Of course, the scientific content of the symposium amply demonstrated this. The next week, the most prestigious medical journal in the world, the *New England Journal of Medicine*, featured not one but two major articles devoted to mesothelioma. MARF's Science Advisory Board Chairman Dr. Harvey Pass is the lead author on the first article, [Asbestos Exposure, Pleural Mesothelioma, and Serum Osteopontin Levels](#). This is a ground-breaking study identifying a second blood marker for mesothelioma. In combination with SMRP, these blood markers offer great promise for means of screening, early detection, and monitoring response to therapy. The second article's lead author is renowned Australian meso researcher, Dr. Bruce Robinson. He provides a comprehensive review of the status of mesothelioma treatment and research. The title says it all: [Advances in Malignant Mesothelioma](#).

Many of these advances are occurring through MARF's research grant program. A symposium highlight was the presentations by fourteen of MARF's most recent research grantees, describing their projects and the important findings they are making. We are now reviewing twenty-eight more excellent research proposals for this year's round of grants.

As part of our annual appeal, meso patient and MARF volunteer Klaus Brauch has written a letter asking each of you to help us fund as much of this critically needed research as possible. Your donations in response, large and small, will be used directly and exclusively to fund this research. At next year's symposium, we will look forward to learning about the further advances in meso research you have made possible by your generosity.

Yours in the fight,

Chris

Focus on Research

SAHA - An HDAC-Inhibitor

Fundamentally, cancer represents a malfunction of an individual's cellular machinery. The mapping of the human genome and advances in the field of microbiology over the last 10 years have opened the door to new understandings of these malfunctions. This is creating exciting potential for new treatments, targeted directly to the malfunctioning cellular processes that contribute to cancer or fail to defend against it. At the symposium, Dr. Sunil Sharma from the Nevada Cancer Institute presented a fascinating overview of researchers' new understanding of one of these processes, and how it can be specifically targeted.

One of the molecular defects that allows cancer to develop is the deactivation of tumor suppressor genes. These genes form a natural defense against cancer by preventing the rampant growth of cells and ensuring that no cell lives past its appointed time. Like all genes, tumor suppressor genes are functional areas on chromosomes, the tightly folded, long, protein chains made up by DNA molecules. In every cell, the DNA molecules are folded or wound around a scaffolding of proteins called histones. In a process called acetylation, these histones can be modified by the addition of small molecules called acetyl groups to control the tightness of the DNA folding and consequently impact the amount of gene expression.

In a normal situation, the acetyl groups allow the histones to operate such that beneficial genes like tumor suppressors can express themselves. HDAC (histone deacetylase) is a family of enzymes that appears to promote cancer and other diseases by neutralizing the acetyl groups that oversee gene expression. By deactivating the acetyl groups, HDACs cause the histone scaffold to change its shape, winding the DNA too tightly to allow gene expression.

Studies of meso and other cancer cells have shown that they over-express HDACs in quantities sufficient to allow tumors to develop. Dr. Sunil presented exciting data showing that blocking HDACs and preventing deacetylation with drugs like SAHA (suberoylanilide hydroxamic acid, trade name Vorinostat) reduces tumor growth significantly. This effect has been observed across a variety of tumor lines in vitro, including meso cells. Preliminary clinical studies of SAHA have also shown responses in meso patients. HDAC promises to become an attractive target for a non-chemotherapy treatment that can restrict tumor growth using the

body's own regulating mechanisms. Researchers are now excited about combining SAHA with anti-angiogenesis drugs, compounds that interfere with the growth of new blood vessels essential to support tumor growth, and with chemotherapy agents like cisplatin and/or pemetrexed (Alimta).

Studies of HDAC inhibitors seem to suggest that the patients require long-term treatment with the drugs in order to obtain a meaningful benefit. The drugs will therefore need to be orally administered and well tolerated. Clinical trials of SAHA to establish safely tolerated levels and efficacy are required before this and similar products can become commercially available to all patients. Research funding and clinical trials of this promising mechanism must continue.

Advances in Peritoneal Meso Treatment

While meso is considered "rare," peritoneal meso is doubly so - it is unusual even among all meso patients. Statistically, it represents only about 10% of all meso cases. Yet about half of the patients attending the symposium, and many of the long-term survivors, were peritoneal patients. The likely explanation for this was one of the most exciting areas discussed at the symposium - peritoneal meso therapy is making great strides. Peritoneal patients are surviving in greater numbers, their quality of life is improving and their median survival time is growing.

In a fascinating session moderated by MARF's Science Advisory Board member Dr. Robert Taub, top experts in treating peritoneal meso described their approaches and results.

Dr. Paul Sugarbaker laid the original foundation for surgery for various peritoneal cancers, including meso. His approach is extirpative surgery, i.e. striving to completely excise all tumor even to the extent of removing affected organs, combined with chemotherapy. Dr. Richard Alexander of the NIH utilizes cytoreduction, surgically removing all visible tumor. He has contributed greatly to the implementation of hyperthermic intraperitoneal perfusion, i.e. pumping heated chemotherapy fluid within the lining of the abdomen at the end of the surgery to help kill any remaining tumor cells. Dr. Brian Loggie has worked to help develop standardization of treatment with a formal Phase II clinical trial of cytoreductive surgery and heated intraperitoneal chemotherapy using carboplatin. He also is using mytocyin C as the chemotherapy, with good results.

Patient Profile - Paul Zygielbaum



Meso is a cunning adversary. No two patients are ever exactly alike, and a baffling array of symptoms can cause critical delays in diagnosis and treatment of the disease. Paul Zygielbaum will tell you that the best chance of overcoming this horrific cancer includes four important steps:

1. be your own best advocate,
2. educate yourself as much as possible about meso generally, and about your particular case,
3. then make the treatment decision that is right for you,
4. keep your spirits up by establishing a goal for yourself to achieve after treatment, focusing on the positive, and maintaining your sense of humor.

Well-reasoned choices, a determination to live, and the courage to make a tough decision helped Paul select his doctors and a protocol that has given him a future.

Trained as a mechanical engineer, Paul had enjoyed a long and varied career working on aerospace, electric power, and electronic manufacturing company labs and shop floors. Paul was often in contact with asbestos used as insulation and fire protection, although he wasn't aware of the hazard.

As he approached 50, Paul began to experience a variety of symptoms that were mysterious and sporadic. After almost five years of odd complaints, he finally got a diagnosis of low-grade peritoneal mesothelioma, epithelial subtype. It was evident to Paul that his case wasn't proceeding on the typical path. "I was sure that I was a statistical outlier, because I had already survived much longer than most patients, even without treatment." Paul's first oncologist called the disease incurable but suggested that Paul could live a long time with it, as long as he had the resulting fluid in his abdomen (ascites) removed periodically.

Paul's own reading of the available literature left him unsatisfied with this answer. Obtaining a second opinion, he came to understand that early, aggressive treatment might be the most likely path to prolonging his life. Since peritoneal meso makes up only 10% of meso cases annually, medical information was difficult to find, and the usual list of options wasn't quite as robust as for pleural meso patients. By February of 2004, Paul was hunting actively for a surgeon who would treat peritoneal meso, from among a very small and select field of specialists.

Paul says, "Because my case was unusual, I did a lot of work to understand it as well as I could. I also asked the doctors I was consulting to address the specifics of my particular situation." Ultimately, he selected Dr. Brian Loggie, at Creighton University in Omaha, whose protocol required the removal of all visible signs of the tumor but with the minimum of invasion of healthy tissue. Following that part of the surgery, Dr. Loggie would perform a heated intraperitoneal chemo wash with mitomycin C, a drug that he trusted and one which had shown high levels of response in his patients. No subsequent chemo, surgery or radiation was planned. "Dr. Loggie told me that mitomycin C would keep further options open in the event of recurrence or a lack of response. In that event I might still be considered chemo-naïve for drugs like alimta and cisplatin," Paul continues, "and additional surgery could still be performed if necessary. Dr. Loggie's conservative approach to treatment and his confidence appealed to Paul, and he decided in mid-April to undergo surgery by Dr. Loggie.

By this point, Paul was beginning to suffer from greater symptoms, including accelerated fluid buildup and fatigue. Still, he was hoping to delay surgery. He had committed to travel to France on a long-planned vacation in June of 2004. This trip was important to him and his wife, since they felt his future was so uncertain. He wondered whether the surgery could be postponed until his return. Dr. Loggie knew better. The go-slow approach had already taken its toll on Paul. The ascites was gradually destroying the protein in his body, and he was wasting away, accounting for his fatigue. Dr. Loggie convinced him that waiting would have been disastrous. "Let's do the surgery right away, and you should be able to go to France on schedule!" Dr. Loggie said. Paul agreed and found new determination by setting himself a goal to be ready to make this trip as planned.

The surgery resulted in the complete removal of Paul's omentum, spleen, gall bladder, and appendix. Parts of the stomach, pancreas and peritoneum were removed, as well as a few suspicious lymph nodes and the falciform ligament that secures the liver. Additional tumors were burned off of his diaphragm, mesentery and other organs. Paul stayed in the hospital for two weeks, seven days longer than expected, because of digestive difficulties and pneumonia resulting from the surgery.

However, true to his word, Dr. Loggie delivered, and Paul made the trip to France on schedule, just five

"There are no sure-fire answers out there, and only by fully educating yourself can you hope to make a choice that you can be confident in."

Paul Zygielbaum, continued.

weeks after leaving the hospital. The upcoming trip had provided a focus to help Paul endure all the medical procedures before surgery and rebuild his strength afterward. Still weak upon departure for France, Paul continued to grow stronger while there, his appetite revived by plenty of outstanding continental cuisine and lots of walking.

Paul's periodic health monitoring by CT scans has not shown any sign of recurring disease. Flush with success from his personal battle with meso, Paul decided to broaden his war on the disease. Involved in litigation, Paul set a goal to challenge his defendants and not to be satisfied until he could secure a large donation for meso research. Despite legal setbacks and dubious unfavorable court rulings, Paul battled on until he got what he wanted. "The defendant didn't want to donate money directly for fear of implying responsibility, I believe, but since my wife and I were willing to commit

to putting the extra settlement towards research along with our own planned donations, the defendants relented and agreed to include the extra amount. I understand that this is one of the few instances ever of a defendant agreeing to set aside funds for meso research." Paul is convinced that it is a valuable precedent and one that future patients should insist on.

"You have to make the decisions for yourself with this cancer," says Paul. "There are no sure-fire answers out there, and only by fully educating yourself can you hope to make a choice that you can be confident in. If you hope to survive, you must be able to live with your decisions and be responsible for them. Also, those who caused this human-health tragedy should start to take responsibility for their decisions." Thankfully, Paul has been able to make both statements come true.



Thank you
Paul and
Michelle for
your generous
\$50,000 gift to
MARF.

Focus on Research, continued.

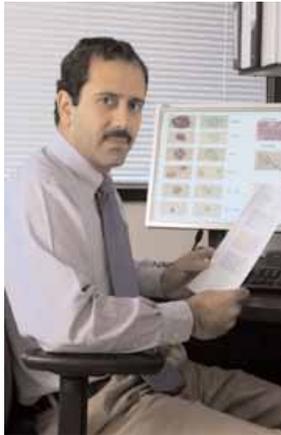
Dr. Taub's surgical colleague, Dr. John Chabot, strives only to remove nodules larger than one centimeter with an initial surgery. The rationale is that chemo can fully penetrate nodules that are one centimeter or smaller. Following surgery, chemotherapy with Cisplatin, gemcitabine, doxorubicin, and Gamma-interferon is administered via a port directly into the peritoneum repeatedly for up to sixteen weeks. Then a second surgery is performed to re-inspect the abdomen for any remaining or regrowing tumor, and to administer a heated wash of additional chemotherapy (cisplatin/mitomycin). Drs. Taub's and Chabot's protocol ends with radiation therapy directed to the whole abdomen. However, because of the sensitivity of the bowel to radiation, and the effectiveness of surgical debulking plus intraperitoneal chemo, their preliminary indications are that radiation may not add enough benefit to justify the risk.

The result is four somewhat divergent views on what constitutes the best treatment, but there are not enough patients for controlled clinical trials comparing one approach to another. However, all of these approaches are reporting encouraging treatment successes, and median survival times for peritoneal meso patients under each of these approaches are now approaching five years.

The longer survival times of peritoneal patients is creating opportunities to explore and develop second and even third line treatments, including systemic chemotherapy with agents like Alimta. Such systemic chemotherapy may add to the effectiveness of intraperitoneal chemotherapy; this is another area that requires further studies.

The highly encouraging peritoneal data presented at the symposium indicate that aggressive local and multimodal treatment are effective in a disease once considered universally fatal. Patients with cytoreduction and chemotherapy can have a prolonged survival with good quality of life. Furthermore, as Dr. Taub declared in his summary of the peritoneal session: "It is possible to cure some peritoneal mesothelioma patients with aggressive local and multimodal treatments. And by that I mean cure with a capital C!"

NCI Investigator Joins MARF's Science Advisory Board



We are pleased to welcome Raffit Hassan, M.D. as the newest member of MARF's Science Advisory Board. Dr. Hassan is a research investigator at the National Cancer Institute, and is the head of the NCI's Mesothelin-Expressing Cancer Unit Laboratory of Molecular Biology.

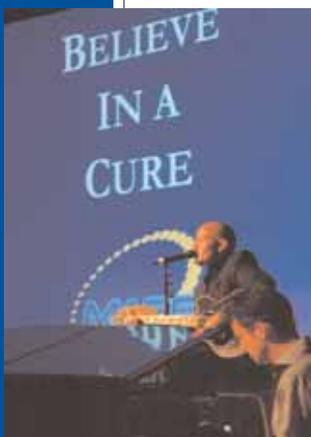
Dr. Hassan's interest in meso research began in 1996 during his medical oncology fellowship training when he joined the laboratory of Dr. Ira Pastan, Chief of the Laboratory of Molecular Biology, at the NCI. Dr. Pastan's group had recently identified mesothelin, a protein highly expressed in mesotheliomas. Since mesothelin is not expressed by normal tissues, Dr. Hassan's research has focused on whether mesothelin could be a target for cancer therapy. Using animal models, he showed that a monoclonal antibody to mesothelin specifically localizes to mesothelin-expressing tumors. He also showed that an immunotoxin using this antibody had significant anti-tumor activity. Subsequent laboratory studies showed that a recombinant anti-mesothelin immunotoxin had even more favorable properties than the original

immunotoxin. This new immunotoxin, SS1P, was therefore developed for use in the clinic. In 2000, at the American Society of Clinical Oncology meeting, Dr. Hassan met MARF SAB member Dr. Claire Verschraegen. She provided him with cell lines from patients with peritoneal meso which were very useful to show that these cells highly express mesothelin and are very sensitive to SS1P.

Currently, Dr. Hassan is conducting a Phase I clinical trial of SS1P at the NCI. Several patients with pleural and peritoneal meso have been treated in this study. After the Phase I, he plans to continue studying the drug in Phase II clinical trials in meso. In the laboratory he is studying possible synergistic interactions between chemotherapy and SS1P which could lead to new combinations of treatment for meso patients. His laboratory is also focused on developing blood tests that may help identify meso patients at an early stage. They have now developed an assay to measure serum mesothelin and the preliminary studies show that it could be a useful test to follow meso patients following treatment. Dr. Hassan and MARF believe that his laboratory and clinical studies will lead to improved outcomes for meso patients.

We are honored that Dr. Hassan has joined the Science Advisory Board and we commend his commitment to meso research.

Symposium, continued.



separate groups to encourage each other and share concerns in a safe, nurturing environment.

This year's winner of the annual "Congressman Bruce Vento Hope Builder Award" was the founder of MARF, Roger Worthington. MARF Board of Directors member Susan Vento presented the award at Friday night's gala dinner. Her husband - Minnesota congressman Bruce Vento, who died from meso in 2000 -

was beloved for his work to build hope for overlooked communities. Roger was honored for working, in much the same way, over the past six years to create hope for the overlooked community of meso patients and those at risk by focusing on the need for effective treatments.

The gala dinner also featured a stirring performance by recording artist Jordan Zevon, whose father, musician and composer Warren Zevon, died of mesothelioma in 2003.

The symposium was made possible through the generosity of financial supporters: Eli Lilly, Simmons Cooper, Waters & Kraus, Stanley, Mandel & Iola, Bergman & Frockt, The David Law Firm, Merck, Alfacell Corporation, and Fujirebio Diagnostics. Attendees, whether patients, doctors, caregivers, volunteers, or industry executives, were moved by the tributes, inspired by the presentations and energized by the resolve of presenters, the organizers and the audience to continue the fight for a cure. Planning for next year's symposium is already underway, and details should be announced soon.

Jazz Trumpeter Chris Botti Makes Beautiful Music For MARF

Roger Worthington, MARF founder, and his wife Ann Worthington hosted a spectacular fundraising event at their contemporary seaside home in Capistrano Beach, CA on Friday, September 2nd. The event featured world renowned jazz trumpet player and composer Chris Botti. Worthington, who tirelessly works to raise money for mesothelioma research teamed up with his childhood friend Chris



Just after the sun set on the beautiful Pacific ocean, Chris Botti took the stage before an audience of over 150 people. Mr. Botti was accompanied by three other musicians, one of which was drummer Billy Kilson. Mr. Kilson knew very little about the event before arriving that evening but as the night progressed he realized that the event was for mesothelioma research. He later

disclosed that his mother had died of mesothelioma a few years before and how grateful he was to be a part of the event.

Mr. Botti delighted the audience with his unique and soulful renditions of many classics such as "When I Fall in Love" and "My Funny Valentine." On the guest list were friends and neighbors of the Worthington's, a number of meso patients including former Olympic

athlete Terry McCann, representatives from various law-firms, and many MARF supporters. At the end of the evening a good time was had by all and the Worthington's raised nearly \$100,000 for meso research.



Chris Hahn, Chris Botti, Ann Worthington, Roger Worthington, and John Markovich.

VNN

(Volunteer Network News)

Over the past few months volunteers have been very busy raising awareness and money for research. Sherry Fox and John Dent along with many other wonderfully caring people from Bio Care Systems hosted their very first Mesothelioma Golf Tournament in Colorado on September 13th. The event was in honor of Joe Pecukonis who founded Bio Care Systems in 1999 and his business partner Alan Sudduth. Joe was diagnosed with meso in late 1999 and died in September of 2001. Several months after Joe's death, Sherry, the widow of Joe Pecukonis, and Allen Sudduth made a decision to continue the work Joe had been doing at Bio Care. In a strange coincidence of events and circumstances, Allen was diagnosed with meso in October of 2004. Allen died two short months later on Christmas Eve 2004.

Sherry and her son John Dent found the strength and commitment to carry on the work of Bio Care and to raise awareness and money for meso research. The event was a terrific success with nearly 50 golfers and it raised over \$3,000. However, the final contribution to MARF will be \$6,000 as Bio Care Systems has offered to match the amount raised by the event. The organizers assured us this is the first of what will become an annual event!

The following weekend another successful golf tournament took place in Tukwila, Washington. The Fred Mirante and Ruby Barber Memorial Golf Classic included a 9 hole competition followed by an awards dinner. The event was produced by Karen Mirante and Chuck Barber. The event raised nearly \$3,000!

The Grand Dames of meso awareness and fundraising, Nancy Buszinski and Alice Steigerwald, hosted the 5th Dance for Meso in Pittsburgh, PA. Since their very first event in 2000 these women have raised over \$28,000! Nancy and Alice - you continue to inspire us!

Anne Arnold will be hosting the 4th Annual MacDaddy Golf Tournament in memory of her husband Edgar "Mac" Arrowood. The tournament will take place November 26, 2005 at the Ocean Ridge Golf Club, Sunset Beach, North Carolina. To date Anne has successfully raised over \$25,000 for MARF for meso research. This year, she has committed to match dollar for dollar proceeds from this event! For more information on this event, please contact Anne directly at annearnold@atmc.net.

The Mesothelioma Applied Research Foundation

Our mission is to eradicate mesothelioma as a life-ending disease.

1123 Chapala Street, Suite 200
PO Box 91840
Santa Barbara, CA 93190-1840

BOARD OF DIRECTORS

M. Ann Abbe
Arlington, Texas

Mathew Bergman, Esq.
Seattle, Washington

Robert B. Cameron, M.D.
UCLA Medical School

Michael Harbut, M.D., M.P.H.
Wayne State University

Ulf Jungnelius, M.D.
Pfizer, Inc.

Susan Vento
St. Paul, Minnesota

Nicholas J. Vogelzang, M.D.
Nevada Cancer Institute

Roger G. Worthington, Esq.
Dana Point, CA

In Memoriam
Congressman Bruce F. Vento

SCIENCE ADVISORY BOARD

Harvey Pass, M.D., Chairman
New York University

Steven Albelda, M.D.
University of Pennsylvania

Raphael Bueno, M.D.
Harvard/Brigham and Women's

Steve Hahn, M.D.
University of Pennsylvania

Raffit Hassan, M.D.
National Cancer Institute

Hedy Lee Kindler, M.D.
University of Chicago

Dan Miller, M.D.
Emory University

Lary A. Robinson, M.D.
H. Lee Moffit Cancer Center

Victor Roggli, M.D.
Duke University

W. Roy Smythe, M.D.
Texas A&M

Robert N. Taub, M.D.
Columbia University

Joseph R. Testa, Ph.D.
Fox Chase Cancer Center

Eric Vallieres, M.D.
Swedish Cancer Institute

Claire Verschraegen, M.D.
University of New Mexico



NONPROFIT ORG
US POSTAGE PAID
PERMIT #553
SANTA BARBARA, CA

Visit us on the web: www.marf.org

Meso Awareness T-shirts Are Here!



The "Believe in a Cure" t-shirt spreads the message of hope that one day we will find a cure for this terrible disease, and the "Meso Kills Our Heroes" t-shirt raises awareness that meso doesn't care who you are or what your occupation - only that it indiscriminantly takes those we love... our heroes!

Both t-shirts have the MARF logo on the front.

Both shirts are available in S, M, L, XL, and XXL.

To order yours visit us online at www.marf.org or call us at: 805.560.8942.