

# The Breast Cancer Research Foundation<sup>®</sup> Founded 1993

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## A Message from Evelyn Lauder, Founder and Chairman



Photo: Rob Rich

All of us live in an interconnected and unified world. That is why, in our sixteenth year, The Breast Cancer Research Foundation's focus is on our global reach. By including international projects in BCRF's portfolio, we have not only helped establish better care in areas of the world like Africa, The Middle East, Southeast Asia, and South America, but also collaborated with doctors and patients around the globe in ways that bring important insights back to the United States.

One of our early reasons for funding international projects is due to the genetic aspect of breast cancer. The more we study specific populations of women around the globe, the more we realize that the genetic picture is bigger than what we know. It behooves scientists to study as many populations as possible to see a more complete picture of the role genetics plays in breast cancer. BCRF will go anywhere in the world where someone is doing great research in order to help stop breast cancer!

In our sixteen years, we have poured more than \$216 million into breast cancer research. This year, we are funding researchers in 12 countries. BCRF's global champions continue to gain momentum, and they are saving more lives each year. We are the most highly rated breast cancer organization anywhere because of our low overhead and our excellent science—with a four-star rating for eight consecutive years by Charity Navigator and an A+ from the American Institute of Philanthropy. BCRF is proud to be the best breast cancer organization poised to prevent and cure this disease.

Especially during these challenging months, we cannot afford to lose even one project, as it will impede our ongoing progress. Please keep BCRF a priority.

Here's to a healthy and happy 2010!

Evelyn H. Lauder

## OFFICIAL RESPONSE

United States Preventative Services Task Force (USPSTF), a private-sector advisory body to the U.S. Department of Health and Human Services, that was published November 16, 2009 in the *Annals of Internal Medicine*. The most controversial aspect of the report was based on mathematical models using old data, which concluded that the best ratio of benefit over risk would accrue to mammographic screening every two years in the general population of women between the ages of 50 and 74 years old. This differed from the previous recommendation in 2002, which advised screening mammography every year starting at age 40.

BCRF Scientific Advisors have reviewed this report carefully, and we do not endorse the proposed guideline changes. There has been a clear and consistent reduction in the rates of death from breast cancer in every country—including the United States—that has instituted a regular screening program. In addition, finding smaller tumors by yearly screening has other advantages, which includes higher rates of breast conserving surgery, less need to use adjuvant chemotherapy, and fewer cases of metastatic disease with attendant suffering and need for treatment. While the USPSTF report focused on death rates—concluding that death rates from breast cancer would be slightly higher were mammograms offered every two years rather than yearly—these other factors were not taken into account. In addition, the USPSTF put a great emphasis on the extra short-term anxiety potentially caused by an estimated 3% increase in negative biopsies over a woman's lifetime by yearly mammography (starting at age 40) compared with the proposed changed guidelines. However, they did not consider that because biannual screening would yield larger tumors, women so diagnosed would experience a lifetime of greater anxiety caused by knowledge of a worse prognosis than had the tumor been found at a smaller size a year earlier.

Furthermore, the clinical data upon which the USPSTF performed their mathematical analyses did not reflect more recent changes in mammographic techniques, use of new adjuvant hormonal treatments (aromatase inhibitors), new and more effective chemotherapy strategies, adjuvant trastuzumab for cases of HER2 positive disease, and the availability of molecular tests that allow physicians to not advise chemotherapy for many cases when the cancer is found early. It is therefore not clear if the results of the USPSTF mathematical models would be applicable in the setting of modern breast cancer management.

## BCRF's Scientific Leaders Respond to the U.S. Preventative Services Task Force

There has been extensive discussion within the medical community and especially in the general press about a report from the

The greatest danger to the widespread adoption of the new guidelines is that they may reduce the rates of regular screening, which are even now—with current guidelines—disturbingly low. More than a third of women who are now candidates for screening have not had a mammogram within two years, and should these rates drop even lower, we will clearly see an increase in breast cancer deaths as a result.

For all of these reasons, we assert that current guidelines, as supported by the American Cancer Society and many professional groups, remain intact. We need to focus on increasing the utilization of regular screening and on improving all aspects of breast cancer management—from prevention to treatment, including detection. Accepting a higher death rate from breast cancer is not consistent with the mission of BCRF.

Larry Norton, MD, *BCRF Scientific Director; Chairman, BCRF Executive Board of Scientific Advisors*  
Deputy Physician-in-Chief, Director of Breast Cancer Programs at Memorial Sloan-Kettering Cancer Center

Clifford Hudis, MD, *Chairman, BCRF Scientific Advisory Committee*  
Chief of Breast Cancer Medicine at Memorial Sloan-Kettering Cancer Center



Leonard Lauder and Elizabeth Hurley



Mika Brzezinski



Wendi Rose; Drs. Larry Norton, Martine Piccart-Gebhart; Marshall Rose

## BCRF Luncheon Focuses on Global Reach

Nearly 1,100 guests convened on October 28th for BCRF's Annual Awards Luncheon at The Waldorf=Astoria in New York City. Over \$2 million was raised, about \$100,000 more than at last year's Luncheon, and the Foundation awarded nearly \$28.5 million in grants to 173 deserving scientists.

The Awards Luncheon opened with a poignant performance by Katie Finneran, Tony Award-winning film, stage, and television actress, who starred in the Off-Broadway play, *Love, Loss, and What I Wore*. The play, by Nora and Delia Ephron, is an intimate collection of stories; Finneran performed a scene, written by BCRF-supporter Geralyn Lucas, about her decision as a cancer survivor to get a tattoo on her newly reconstructed breast.

Mika Brzezinski, co-host of MSNBC's *Morning Joe*, followed, enlightening the audience with her journalistic perspective on breast cancer—how as a newscaster, it is important to be able to report on the reliable and meaningful information that we can act on—from prevention and lifestyle choices to progress in treatments. Brzezinski also cited time as a challenge: “research isn’t fast and furious, like news. It’s thoughtful and deliberative.... That’s the pivotal role BCRF plays—giving researchers the resources to conduct the quest for answers and to get them to breast cancer patients in time to matter.”

The 2009 Jill Rose Award, presented each year in memory of its namesake to honor distinguished scientific achievement, went to



Kristina Davison and Kinga Lampert



Unless otherwise noted all photos are Julie Skarratt

Elizabeth Hurley and Mike George, President, QVC



Photo: Rob Rich

Dan and Cynthia Lufkin



Photo: Rob Rich

Anne Eisenhower Flöttl and Adrienne Vittadini



Photo: Rob Rich

Tim and Jeanette Adams (Front, second and third from right) with the Housewares Charity Foundation Investigators: Drs. Stuart Schnitt, Vincent Cryns, Mitch Dowsett, José Baselga, Stuart Aaronson, Hope Rugo, Joyce Slingerland and Nadine Tung



Photo: Rob Rich

Melinda Blinken; Drs. Michael Gebhart and Martine Piccart-Gebhart; Ambassador Alan Blinken



Katie Finneran, GERALYN Lucas and Daryl Roth



Photo: Rob Rich

Karen LeFrak, Pamela Fiori and Joanne de Guardiola

Dr. Martine Piccart-Gebhart. Piccart-Gebhart, whose numerous international research honors and collaborations include founding the Breast International Group (BIG) in 1996, spoke with deep emotion about her career-shaping breast cancer medicine and research being like a “dream every morning that is realized by the evening.” Piccart-Gebhart created BIG to facilitate breast cancer clinical trials and to reduce the unnecessary duplication of efforts. The organization currently coordinates 44 clinical research groups based in Europe, South America, Australia and Asia.

Leonard Lauder presented Elizabeth Hurley with the 2009 BCRF Humanitarian Award in recognition of her tireless advocacy for breast cancer awareness around the globe. Hurley, who has been traveling the world with Evelyn Lauder since 1994 promoting awareness and underscoring the need for more scientific research, not surprisingly replied in acceptance of the award, “You are my favorite man in the United

States of America.” But Mr. Lauder continued, adding that beginning next October, in Hurley’s honor, BCRF will select a prominent breast cancer scientist in the United Kingdom to be announced annually as The Elizabeth Hurley Researcher Award. Surprised and choked up with emotion, Hurley promised to persevere in her missionary activities until the dreaded disease “is kicked off the planet.”

*The Symposium and Awards Luncheon was made possible by underwriters Roz and Les Goldstein, QVC, Tough Enough to Wear Pink, and Evelyn and Leonard Lauder. The Foundation also thanks co-chairmen Anne Eisenhower Flöttl, Betsy Green, Joanne de Guardiola, Ronnie Heyman, Gail Hilson, Evelyn Lauder, Cynthia Lufkin, Gigi Mortimer, Pauline Pitt, Elizabeth Rohatyn, and Christine Hearst Schwarzman for making this event better than ever.*



Photo: Rob Rich

Joseph Taub, Myra Biblowit, Dr. Neal Rosen, Arlene Taub, Dr. Arnold Levine, Patricia Quick and Craig Reynolds



Shauna Brook, Sybil Yurman and Sandy Krakoff



Photo: Rob Rich

Symposium Panelists: Drs. Eduardo Cazap, Martine Piccart-Gebhart, Ephrat Levy-Lahad, Larry Norton, Clifford Hudis, José Baselga and Alan Ashworth

## ***Breast Cancer is a Global Problem, BCRF is Part of the Solution BCRF’s public symposium focuses on solutions***

The Breast Cancer Research Foundation announced its first international research grant in the fall of 2001. Today, researchers from five continents, whose reach extends to projects taking place in 28 countries, are part of that roster. This year’s public symposium on

October 28th at The Waldorf=Astoria revealed that BCRF’s expanding scope of research on breast cancer around the world is not just a good idea for the women involved, but critical to the ongoing success of finding a cure and preventing the disease for women in all countries. Moderated by Clifford Hudis, MD, Chairman of BCRF’s Scientific Advisory Committee and Chief of Breast Cancer Medicine at Memorial Sloan-Kettering Cancer Center, an international panel of

six BCRF experts gathered to discuss the kinds of research the organization is supporting and how international research is yielding knowledge that cannot be gained otherwise. Presenters Alan Ashworth, BSc, PhD, FRS, of the Institute of Cancer Research, London; José Baselga, MD, of Vall d'Hebron University Hospital in Barcelona, Spain; Eduardo Cazap, MD, Founder and President of the Latin American & Caribbean Society of Medical Oncology, Buenos Aires, Argentina; Ephrat Levy-Lahad, MD, of Hebrew University and Shaare Zedek Medical Center in Jerusalem; Larry Norton, MD, BCRF's Scientific Director and Deputy Physician-in-Chief, Director of Breast Cancer Programs at Memorial Sloan-Kettering Cancer Center, and Martine Piccart-Gebhart, MD, PhD, Professor of Oncology, Université Libre de Bruxelles (ULB) and Director of the Medicine Department, TRANSBIG and Jules Bordet Institute, Brussels, Belgium, shared their perspectives on the importance of breast cancer research conducted throughout the world.

All of the panelists gave examples of how the scientific knowledge gained in one country will expand or fine-tune the basis of treatments in all countries; while some, such as Cazap and Levy-Lahad, explained that standards of detection and care must be improved throughout the world if we are to truly conquer breast cancer. Piccart-Gebhart raised the significant point that, as case numbers of breast cancer shrink in developed countries, working collaboratively across the globe is emerging as the best way to conduct new clinical trials—trials that make optimal use of existing standards of care while expanding upon innovations that will reach hard-to-treat cancers.

In addition to the outstanding research presented by the Symposium panelists, BCRF funds projects on inflammatory breast cancer, new biomarkers and other methods for detection in Nigeria and Egypt, as well as multiple clinical trials in Bangladesh, the Philippines and Vietnam. In many instances, the establishment of clinical trials in Southeast Asian countries also brings modern medical treatments to women with breast cancer there for the first time. The knowledge gained from the studies will make a significant impact; Asian women represent two-thirds of the annual new cases of breast cancer worldwide.

Attendees at the Symposium, which preceded the Annual Awards Luncheon, expressed the need for earlier screening and better treatment in pre-menopausal women, and asked questions about the status of improved treatments for resistant, hormonally-sensitive breast cancer. They also asked questions about prevention following Ashworth's and Baselga's explanation that experimental new PARP Inhibitors, as well as existing treatments, might be effective as breast cancer prevention. Mrs. Lauder raised the issue of how more and more people worldwide now remember their cultural history by learning about their genetics, and Mary Claire-King, MD, cited the "Jewish alleles" found in populations of Spaniards who had emigrated to Mexico to escape political persecution as another example of the importance and power of genetic testing. Drs. Norton and Hudis each reminded the audience that biology is a language that transcends nationhood or cultural identity, and that being strategic in funding international research will only speed cures and prevention.

The day before the Symposium was the annual scientific retreat. The retreat followed a "think tank" format for the second year in a row. Researchers participated in one of six simultaneous sessions: Biomarkers; Cancer Stem Cells and Cancer/Stroma Interactions; Therapeutic Targets/Targeted Therapeutics; Cancer Susceptibility Genes; Molecular Classification, Prognostication and Prediction; and Prevention and Survivorship. Following the two-hour sessions in which participating scientists brainstormed the most important "next steps" for each of the retreat topics, the entire group met to discuss their notes. Before promising to share the action list generated by the afternoon's sessions with the entire group via BCRF's researcher portal, Norton reminded all the participants that despite news reports disputing the benefits of screening for breast cancer, the research advances of the past sixteen years have saved many lives, and will only save more in the future through research collaboration and innovation.



## Q and A with Alan Ashworth, BSc, PhD, FRS

*Professor, Molecular Biology and Director, The Breakthrough Breast Cancer Research Centre  
The Institute of Cancer Research, London, UK*

**Q: Tell us about yourself as a scientist and how you became interested in breast cancer research.**

**A:** I thought about a career in medicine, but after studying chemistry, I became very, very interested in understanding basic mechanisms of biology. I became a research scientist and got my own lab when I was very young, at age 27. I was so naïve; I didn't think there was anything particularly unusual about it!

I wasn't focused on breast cancer until a friend of mine in the U.K., Mike Stratton, asked if I could help him with a project. Basically, he needed more hands on a search for a high-risk gene in breast cancer. This was in late 1994. At that point, BRCA-1 had already been discovered, and together we found BRCA-2 by the end of that year. Things were happening so fast, we found the gene and it was published three weeks later! This was thrilling, but what happened next was even more of a revelation: within days of discovery of the gene, a woman was tested for it at Royal Marsden hospital in London. She had already been scheduled for a prophylactic mastectomy because of breast cancer in her family, but because she could be tested which revealed that she didn't have the gene, she didn't have the surgery. New knowledge steered her and her doctor in decision-making. I then became much more interested in applying basic biology to breast cancer research.

**Q: You are known for your important discovery that drugs called PARP inhibitors could be used to treat BRCA-1 and BRCA-2 related cancers. How did this come about?**

**A:** All cell types sustain DNA damage in their lifespan and need to fix it in order to keep dividing and keep the cell type going. Cancer cells are no different. As with most cells, there are multiple pathways the cancer relies upon for this repair. PARP is one of these pathways.

Not long after our discovery, I had one of those coincidental encounters that change your life: I met someone who wanted to talk to me about some drugs—and by that I mean drugs that his company was developing! They were PARP Inhibitors from a company called Kudos, which is now part of AstraZeneca. Since our lab studies the BRCA-1 and BRCA-2 breast cancer cells, we put the experimental drug on them. What we found was astonishing. The BRCA cells were one thousand times more vulnerable to these drugs than normal cells! They couldn't survive. Their high sensitivity means that the drug could be very effective. The BRCA cells have a different liability than normal cells and PARP Inhibitors target that liability.

**Q: What makes the BRCA-1 and BRCA-2 cells different?**

**A:** BRCA-1 and BRCA-2 have a mutation that turns them into cancer cells. But because of this difference, they also have one DNA repair pathway that is compromised. Treating the tumor with a PARP Inhibitor blocks the BRCA cells' secondary DNA repair pathway. This second level of failure is more than the BRCA cells can handle, and provokes cell death. This is a win for breast cancer treatment because it shrinks the tumor dramatically. PARP Inhibitors take advantage of the tumor's known liability.

**Q: Will PARP Inhibitors work in other kinds of breast cancer?**

**A:** Yes, they should and we've seen evidence suggesting this is the case. In other breast cancers, there are likely faulty DNA repair mechanisms that PARP Inhibitors will exploit. We just happen to know that this is the case with BRCA-1 and BRCA-2 cancers.

There are also ways to provoke faulty DNA repair and other kinds of challenges in tumor cells. This is what happens with chemotherapy, and we are studying whether or not adding PARP Inhibitors to chemotherapy will exponentially kill cancer cells. Early results are promising.

PARP Inhibitors may change the entire landscape of cancer treatment. For example, 80 percent of uterine cancers, 25 percent of colon cancers and 25 percent of melanomas have mutations to a gene called PTEN that causes DNA repair damage. PARP Inhibitors should be effective wherever there is compromised DNA repair.

PARP Inhibitors will likely be relevant to up to 50 percent of ovarian cancers. Ovarian cancers are known to be sensitive to platinum drugs. Platinum, a metal found in existing therapies like cisplatin and carboplatin, works like a "dirty" PARP Inhibitor. So, PARP Inhibitors may do the same job, only better.

**Q: Do PARP Inhibitors have any side effects?**

**A:** So far, they are relatively non-toxic compared to chemotherapy. It is too soon to know the long-term effects, if there are any. The patients in Phase I clinical trials—with us, and with other groups—are essentially incurable. PARP Inhibitors are helping these patients extend their survival. Right now we are looking at PARP Inhibitors in a relatively small fraction of breast cancer patients, and possibly a larger fraction of ovarian cancer. Our priority is to figure out how to use this new drug successfully in a larger group of patients, and earlier in the disease to achieve a cure.

**Q: How will you accomplish this?**

**A:** This is where BCRF is indispensable. Whenever there is a new drug that is effective and safe, even in part of a cancer population, it quickly becomes a standard and some opportunities to refine its use are slowed or lost. PARP Inhibitors are so dramatic in what they do that they should be used to aid as many breast and other cancers as possible. Part of this will rest on figuring out which sensitizing drugs to pair them

with. We are already conducting quite a few obvious and important clinical trials with PARP Inhibitors, but want to design the next wave of clinical trials based on real data about which drugs and what dosages will be the most reliable with PARP Inhibitors.

To this end, we are conducting a massive screening of all possible combinations of drugs with PARP Inhibitors. We are looking at thousands of drugs and many more thousands of combinations. It would take many years of human labor to get this data, but with a robotic system that we are using, we hope to get it within months. Without BCRF funding, this step would not be possible. BCRF has given us the ability to fast track something really important.

**Q: Are PARP Inhibitors going to cure breast cancer?**

**A:** We don't know, but with this kind of discovery, I think we're getting closer. You see, we already have the means to generate all the answers we need. Think of the mapping power of the human genome project applied to thousands of tumors, giving us all the genetic information for hundreds of different kinds of cancer. This is where we're going. If we can manage the huge amount of data that we are generating for ourselves, we'll continue to make significant progress. But this is no small task.

**Q: What's stopping us from just getting all the work done?**

**A:** If you take an average tumor, be it breast or colon cancer, there are about 20,000 genetic changes in that tumor's DNA compared to normal DNA. Much of those changes is noise; perhaps in all 20,000, only 20 or 50 are functionally needed for the tumor. This is the challenge. We need better ways of identifying these "mission-critical" changes, so that we can focus our attention where it will be the most effective.

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Photo: Julie Skarac

## Letter From Our President

The Breast Cancer Research Foundation was created in 1993 to bridge a gap—in time and in knowledge. BCRF operates like a think tank for breast cancer cures. Our Executive Board of Scientific Advisors led by our Scientific Director Dr. Larry Norton, and our Scientific Advisory Committee chaired by Dr. Clifford Hudis, have brought together the world's highest caliber of scientists to collaborate in finding new answers to the problems of successfully treating, and eventually preventing, breast cancer. It is their expertise that guides our grant making. They have identified not only the best researchers in the world, but also the projects that have had the highest yield in moving life-saving research forward. Here are a few areas where BCRF funding has had significant impact:

Did you know that *if not for BCRF, many facts about the genetic basis of breast cancer would not be known*? BCRF-supported scientists have created the most comprehensive database of breast cancer genes ever assembled. They are also studying the inherited genes that may give you a high risk of getting breast or ovarian cancer, or that may protect you from developing either.

*If not for BCRF, breast cancer stem cells would be much more of a mystery.* The BCRF-supported scientists who discovered breast cancer stem cells—the "roots" of breast cancer that behave differently than the rest of tumor cells—are finding out how they work, and are developing therapies designed specifically to kill them.

*If not for BCRF, personalized, targeted therapies would be in our future, rather than available now.* Our scientists are fine-tuning the new drugs that have significantly improved our ability to shrink cancers with fewer side effects by learning how to better choose which women with breast cancer will benefit the most from these drugs. They are also developing new ways of using such medicines to make them even more effective and less toxic. And they are finding new targets and developing new drugs to attack them. Survival and quality of life following treatment have already improved dramatically.

*If not for BCRF, the world of breast cancer research would be smaller than it is today.* BCRF will go anywhere in the world where there is great research. Today, BCRF funds research in more than a dozen countries—dramatically improving diagnosis, prevention, and treatment of breast cancer that aids women across the globe.

There are many examples that point to the positive return on investment of BCRF dollars in preventing and curing breast cancer. We need your support now more than ever to build on the remarkable progress we have made. We hope we can continue to count on you to help us.

Sincerely,

Myra J. Biblowit

Photo: Rob Rich



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## play for p.i.n.k.

Photo: Rob Rich



Carole Ermel, Barbara Dickstein, Doris Mortman, Leslie Friedland, Roberta Server, Myra Biblowit, Elizabeth Hurley, Evelyn Lauder, Laura Lassman, Stephanie Hamburger, Jane Pontarelli, Heidi Komoriya and Deborah Schachter

## 2009: Play for P.I.N.K. Reaches New Heights

It is with great pride to be able to announce that an unsurpassed number of participants and an expansion of clubs and events to more than 190 in over twenty states, has led to an extraordinary amount of funds raised in 2009. PFP is currently funding twelve projects.

Such phenomenal growth would not be possible without our dedicated board, chairwomen, participants, and of course our generous sponsors. **Bloomberg**, our title sponsor, underwrites all of the expenses for Play for P.I.N.K. (PFP), enabling 100% of the funds raised to be donated to BCRF. **The Estée Lauder Companies** and **Wilson Sporting Goods** support us through their contributions of gifts and merchandise.

On October 29th, PFP's board proudly presented a \$3,000,000 check to Evelyn Lauder and The Breast Cancer Research Foundation, bringing its total contribution since inception to \$18.75 million! Representatives from Bloomberg and The Estée Lauder Companies joined the PFP board for this celebratory event. Honored guests included Drs. Robert Benezra and Michael Wigler, two of the PFP-funded researchers; Dr. Larry Norton, Chairman of the BCRF Executive Board of Scientific Directors; and Dr. Clifford Hudis, Chairman of the BCRF Scientific Advisory Committee.

We thank everyone for their tremendous support and look forward to another successful year in 2010!

Think P.I.N.K. Be in the know. Visit [www.playforpink.org](http://www.playforpink.org) or call me at 646-497-2605 to find out about ongoing achievements, happenings, how to get involved, or how to make a donation.

Sincerely,

Stephanie Hamburger  
Director, Play for P.I.N.K.



Photo: Rob Rich

Laura Lassman (3rd from right) with Play for P.I.N.K. Investigators: Drs. Mark Greene, Robert Benezra, Marc Lippman, James Ingle, Tan Ince, Michael Wigler, Benita Katzenellenbogen, Electra Paskett, Edith Perez, Kathryn Horwitz and Nancy Lin. Not pictured: Drs. Julie Gralow and Peggy Porter



New Albany Country Club

## Hard Rock's 2009 PINKTOBER™

Breast cancer survivor and Grammy® winning recording artist Melissa Etheridge was Hard Rock's official PINKTOBER Artist Ambassador. Etheridge launched Hard Rock's PINKTOBER global campaign with an exclusive performance at Hard Rock Café New York. Additionally, on behalf of NYC Mayor Michael Bloomberg, Deputy Mayor Linda Gibbs proclaimed September 29th "Pinktober Day."

The following day, Etheridge participated in a breast cancer awareness symposium at Hard Rock Café Washington, D.C. The Symposium theme was "Breast Cancer and Creativity," where the role of creativity in curing and dealing with the disease was discussed. Joining Etheridge on the panel, moderated by BCRF Scientific Director, Dr. Larry Norton of Memorial Sloan-Kettering Cancer Center, were BCRF-funded researchers Dr. Funmi Olopade of the University of Chicago, and Drs. Susan Domchek and Robert Vonderheide of the University of Pennsylvania, whose grant is made possible by Hard Rock International; and breast cancer survivor Marisa Acocella Marchetto.



*Melissa Etheridge and Delta Pilots*

## Delta Turns JFK Tower Pink, Hosts In-Flight Jam Session

Delta Air Lines kicked off its fifth year of support for BCRF by lighting the New York JFK air traffic control tower pink on September 29th. Delta was joined at the lighting by Melissa Etheridge and representatives from The Port Authority of NY and NJ, who made the lighting possible. Delta then hosted a charter flight for their employee breast cancer survivors and Etheridge fans aboard its signature "pink plane" from JFK to Washington D.C., and honored them with an incredible live in-flight performance by Etheridge.



*JFK Control Tower*



*Dr. Robert Vonderheide; Marisa Acocella Marchetto; Melissa Etheridge; Drs. Larry Norton, Susan Domchek and Funmi Olopade participate at the Symposium held at Hard Rock Café Washington D.C.*

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## World Pink. World Without Breast Cancer. Wear a Pink Ribbon. Make a Difference.

Over 70 countries participated in The Estée Lauder Companies Breast Cancer Awareness campaign this October, which marked the 10th Anniversary of their Global Landmark Illumination Initiative. The Estée Lauder Companies have distributed over 100 million pink ribbons worldwide along with materials about the importance of early detection and good breast health, designed by cartoonist and author Marisa Acocella Marchetto. More than 200 famous landmarks were lit pink and Estée Lauder spokesmodel, Elizabeth Hurley, continued her tireless efforts for this cause by spreading the awareness message.

Each year, the dedicated employees of The Estée Lauder Companies exhibit outstanding support for the Company's Breast Cancer Awareness campaign through a bevy of creative fundraising methods, including grassroots events that engage local communities and through the sale of Pink Ribbon Products. All of the money raised is donated to BCRF.



The annual Sale-A-Bration fundraiser was supported by 11 brands and hundreds of volunteers. The sale raised over \$440,000.



Employees of Estée Lauder North America surprised Evelyn Lauder with a check to BCRF for \$880,000. Pictured: Tim Pickles, Susan Downard, Tricia Butler, Kris Howard, James Horst, Evelyn Lauder, Nancy McKay, Theresa Selvaggio and Mendy Charlton.



Mitchell Kaneff, Rich Lehrer, William Lauder, Greg Polcer at the 7th Annual Estée Lauder "Play for Pink" Golf and Tennis Classic. Over \$138,000 was raised, bringing total contributions to over \$700,000.

## Ann Taylor Continuous Commitment to BCRF

Through the ANN Cares and LOFT Cares expanded breast cancer initiative, Ann Taylor continued its extraordinary dedication to BCRF, successfully generating over \$1 million from its fall 2009 program. The company's total giving to date is over \$2.5 million.

**2010 Unsung Hero Needed** The Unsung Hero Award, established by Roz and Les Goldstein, is presented at the NYC Hot Pink Party to a special individual who has been a source of support, hope, humor, strength and comfort to a woman facing breast cancer. Send nominations to Myra Biblowit: [myrabib@bcrcure.org](mailto:myrabib@bcrcure.org) or 646-497-2601.



Kay Krill, President and CEO, Ann Taylor (center) with Ann Taylor-BCRF researchers, Drs. Annette Stanton and Carol Fabian.

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## Bloomingdale's Lights Up for Breast Cancer Awareness

On October 12th, Michael Gould, Chairman and CEO of Bloomingdale's (2nd from left); Marisa Acocella Marchetto, BCRF Advisory Board member and illustrator of several Bloomingdale's Pink Campaign items; Elizabeth Hurley, Estée Lauder spokesmodel; and actor Dylan McDermott joined Evelyn Lauder in illuminating the Bloomingdale's 59th Street store in New York City pink. The lighting was part of The Estée Lauder Companies' "Global Landmarks Illumination Initiative."



*Dr. Titia de Lange and Anne Keating,  
Senior Vice President, Public Relations, Bloomingdale's*

This year, Bloomingdale's Pink Campaign raised over \$700,000 for BCRF. The program included a variety of products, from The Big Pink Umbrella to The Little Pink Card. Currently, Bloomingdale's is supporting the research of Dr. Titia de Lange, head of the Laboratory of Cell Biology and Genetics and the Leon Hess Professor at The Rockefeller University in New York City.

## The Scarsdale Hot Pink Luncheon

For the fourth year, BCRF Advisory Board member, Shelly Kivell, and co-chairs, Kim Meyers and Debra Ezratty, organized a luncheon at Fenway Golf Club in Scarsdale, NY, raising more than \$100,000 at the event. The highlight of the Luncheon was a discussion led by BCRF Scientific Director, Dr. Larry Norton, who shared his views on the controversial revised breast cancer screening guidelines and updated the audience about progress being made by BCRF researchers.



*Peg Mastrianni, Kim Meyers, Shelly Kivell, Myra Biblowit, Dr. Larry Norton, Debra Ezratty*

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## HHS Advisory News - Charis Eng Appointed

BCRF grantee Charis Eng, MD, PhD, Chair and Director of Cleveland Clinic Lerner Research Institute's Genomic Medicine Institute, has been appointed to the U.S. Department of Health and Human Services Secretary's Advisory Committee on Genetics, Health and Society (SACGHS) to serve a three-and-a-half year term. The committee advises HHS Secretary Kathleen Sebelius on the medical, ethical, legal, and social implications of integrating genetic technologies into clinical and public health practice.



In honor of Prime Outlets' Operation Shop Pink program, special reserved pink parking spaces were created for breast cancer survivors shopping at all 21 U.S. and Puerto Rico locations. Prime donated over \$340,000.



"Inspired Designs: A Showhouse Celebrating Extraordinary Women" at 535 West End Avenue, NYC featured a room inspired by Evelyn Lauder and designed by John Barman. The donated admission fee generated over \$92,000 thanks to organizer, Harriet Weintraub.



BCRF Advisory Board member, Marisa Acocella Marchetto (pictured with Myra Biblowit), signed paperback copies of her book, *Cancer Vixen*, at Bloomingdale's in Chicago.



At Coach's NY Town Hall, Coach presented BCRF with a check for \$500,000. Pictured: Coach Senior Vice President Todd Kahn, Myra Biblowit and Coach CEO Lou Frankfort.



The fourth annual Pilates for Pink program, sponsored by *Shape Magazine*, in Union Square Park, NYC. There were classes throughout the day from some of New York's leading Pilates instructors.



Photographer Kristen Weaver invited photographers from around the world to donate their time and session fees. 239 photographers from 44 states and from 3 countries signed up on her special website to help raise \$12,750!



As part of Mood-lites Brighten Our World campaign, the University of Michigan Comprehensive Cancer Center's University Hospital was lit pink.



During October, students in the Physician Assistant Program at Touro College organized a "Scrub in for a Cure" fundraiser, each donating \$2 per week to wear scrubs to class.



Lyn Kirby, ULTA President and CEO, unveiled ULTA's Windows of Love campaign. During October, every ULTA location filled their windows with stories of honor and encouragement by persons touched by breast cancer. Nearly \$604,000 was raised from the program.



Wilson Sporting Goods teams up with the Chicago Bears NFL football team to kick off National Breast Cancer Awareness Month. Pictured: Caroline Schrenker, Kevin Murphy and Molly Wallace of Wilson, Myra Biblowit, Chicago Bears Mascot 'Staley' and Marge Hamm.



The New York Racing Association hosted a luncheon in Saratoga and named a race in honor of BCRF. Charles Hayward, President and CEO of NYRA, presented Myra Biblowit with a \$10,000 check. The Foundation was honored to have Marylou Whitney join them in the winners circle.



Micol Sabbadini, Evelyn Lauder, and Stefania Sabbadini show off the beautiful Sabbadini pink bee brooch. Also pictured is Alberto Sabbadini.



Students from the Think Pink Society of Georgetown Visitation raised an astonishing \$15,000 for BCRF. Pictured: Georgetown Visitation Dean, Eve Grimaldi (far left,) with students; Evelyn Lauder; Dr. Larry Norton and Myra Biblowit.



Steve Sadove, Chairman and CEO of Saks Fifth Avenue, and Evelyn Lauder hosted the KEY TO THE CURE Luncheon. The program generated \$500,000.

The Breast Cancer Research Foundation  
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You can simply make a donation to Time For Research at [timeforresearch.org](http://timeforresearch.org). Or you can create your own fundraising page in 4 easy steps:



**1** Create your donation page at [timeforresearch.org](http://timeforresearch.org)



**2** Set a donation goal: 1 hour, 2 hours, a day, a week, etc.



**3** Donate. Take the lead and make the first donation.



**4** Share your donation page with friends and family.

### 2010 CALENDAR OF EVENTS

#### FEBRUARY

Symposium and Hot Pink Luncheon  
Monday, February 8  
The Breakers, Palm Beach, FL

#### MARCH

Challenge of the Americas  
Saturday, March 13  
International Polo Club, Wellington, FL

#### APRIL

The Hot Pink Party, NYC  
Tuesday, April 27  
The Waldorf=Astoria

#### MAY

The Hot Pink Party, Boston  
Thursday, May 13  
Four Seasons Hotel

#### JUNE

Evelyn H. Lauder Photo Exhibition:  
Crème de la Crème  
Wednesday, June 2 - Thursday, June 11  
Galerie des Galeries,  
Galeries Lafayette, Paris, France

#### AUGUST

Saratoga Luncheon  
Friday, August 20  
Reading Room, Saratoga Springs, NY

#### OCTOBER

Pink Promises Benefit  
Friday, October 1  
Crest Hollow Country Club,  
Woodbury, NY

Symposium and Annual Awards Luncheon  
Wednesday, October 27  
The Waldorf=Astoria, NYC

BCRF Contact Information  
646.497.2600, Toll-Free: 866.FIND.A.CURE  
email: [bcrf@bcrfcure.org](mailto:bcrf@bcrfcure.org)  
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