



MULTIPLE SCLEROSIS update

(VOL. 9 : SUMMER 2010)

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The Accelerated Cure Project Repository Opens Its Tenth Site

If you are an Accelerated Cure Project supporter in the Palo Alto area of California, and you've been wondering when we'd open a Repository collection site nearby, well, the answer is now! The Repository achieved coast to coast status as of March 24, 2010, when the first subject enrolled at our newest (and tenth!) collection site located at the Stanford University School of Medicine in Stanford, California. The site is up, running, and ready for you to enroll!

We're delighted to welcome Stanford principal investigator, Dr. Lawrence Steinman, and study coordinator, Daniel Lebus to our family of collection sites. They join the principal investigators and study coordinators at our nine other sites (located in Worcester MA, Boston MA, Baltimore MD, New York City NY, Phoenix AZ, Atlanta GA, Aurora CO, Dallas TX, and Columbus OH) as we all work together enrolling people into the largest open access collection of blood samples and data available in support of research into Multiple Sclerosis (MS) and related demyelinating diseases.

Enrollment in the repository consists of a blood draw, interview, and data collected from medical records. Samples and data are stored anonymously and then distributed to researchers studying the

causes of these diseases. Researchers are in need of these valuable samples and data to further research into the causes and disease mechanisms of MS. To date we have enrolled 2100 people into the repository and have provided samples and/or data in support of 34 research studies. Visit our website at www.acceleratedcure.org/repository/status.php for the most up to date information. Participating in the repository is an opportunity to directly accelerate research into determining a cure for MS.

If you live near or are able to travel to the Palo Alto area and have been diagnosed with MS, Clinically Isolated Syndrome (CIS), Transverse Myelitis (TM), Neuromyelitis Optica (NMO) or Devic's, Acute Disseminated Encephalomyelitis (ADEM), or Optic Neuritis (ON), please contact Stanford study coordinator, Daniel Lebus at 650-723-3657, to learn more about participating in the repository.

If you are interested in enrolling at one of our other collection sites, or for general questions, please contact Accelerated Cure Project's repository director, Sara Loud, via email at acp-studydirector0807@acceleratedcure.org or at 781-487-0032.

A Message from Carolyn Cronin, Chief Executive Officer



I believe that you can never tell people “thank you” too many times!

On behalf of Accelerated Cure Project, I want to express my continued appreciation to our dedicated volunteers and amazing staff. As we continue to move our mission forward, we rely

on *ordinary* people doing *extraordinary* things to support our efforts to fight MS.

Highlighted in this edition of our newsletter you will read about those individuals who have been and continue to be great examples to others! These individuals have given their time, talents and energy to support Accelerated Cure Project.

We are thankful to those participants who ran the Boston Marathon and raised money on our behalf. This is a “must experience” event for anyone who has ever run long distances and has considered running a marathon, or indeed anyone who can appreciate setting a goal, accepting a challenge, and working to fulfill a dream.

Hurray for **Jim Lim** who raised close to \$30,000 through his participation in the Boston Marathon and was #5 among all John Hancock Boston Marathon fundraisers! Truly amazing!

We would like to give a special “shout out” to **Max Rudzinsky**, the 12 year old son of long time volunteer **Marie Rudzinsky**, for helping so much with this year’s Boston “Shoe Ball”. Max was a driving force in soliciting auction items for the event – no one can say “no” to Max.

For me, the difference between an *ordinary* and an *extraordinary* person is not the title that person might have, but what they do to make the world a better place for us all. With our dedicated volunteers and staff, Accelerated Cure Project is the catalyst in stopping MS activity, repairing damage due to MS and preventing MS!

Thank you for your continued support!

Best regards,
Carolyn Cronin

Recent Events

Detailed information about all of our recent and upcoming events can be found on our web site at www.acceleratedcure.org/events

March 6, Waltham, MA:

Our “9th Annual Year in Review and Educational Seminar” was a great success featuring a cocktail reception (with live musical entertainment from Board Member George Peabody and his wife, Nancy!), an auction, and presentations from

leading MS Researcher Dr. Phil De Jager, and our staff. Robert Luber, the recipient of our 2009 Founder’s Award, shared his personal MS story and presented a powerful video made by long time volunteer, Alan Weinberg. Please go to www.acceleratedcure.org/events/eventpages/20100306_acpevent.php for pictures!



Educational Seminar musical guests, Nancy Kaplan and George Peabody

April 19, Boston, MA: Accelerated Cure Project staff and friends were posted in front of The Barber Shop on Commonwealth Avenue at the 20 mile mark to cheer on our team of 11 Boston Marathon runners! The group distinguished themselves before the event by raising over \$70,000 for our cause and they continued to shine in the race itself. All of them finished and many of them set personal records! Congratulations runners! (*Read more about the Accelerated Cure Project marathon team on page 3*)

April 23, Boston, MA: There was fun and fashion galore in the Hyatt Regency at the 3rd Annual Hello Stiletto “Shoe Ball”, which raised over \$11,000! Reporters from NECN, the Boston Globe, and Shoetube were all there to record the festivities as our well-dressed attendees walked the pink carpet. Over 70 shoe-lovers competed in our most climactic walk-off yet and another four lucky Sipping for Stilettos winners went home with a new pair of Poetic Licence heels, Manolos, and Giuseppe Zanottis. We can’t wait for our upcoming Shoe Balls in Atlanta and Chicago!

April 24, Somerville, MA: The Medeiros family once again showed they know how to throw a good party with their 8th Annual Sports Scholarship and Multiple Sclerosis Research Fundraiser. This year’s crowd was the biggest in years, as everyone came together to dine and dance in loving memory of Edmund Medeiros. Special thanks to Nancy, Judy, and the rest of the Medeiros family for putting together such an enjoyable and valuable event.

Boston Marathon 2010

For many New Englanders, Monday, April 19th was a day to celebrate the arrival of spring to the northeast. For 11 dedicated runners, it was the culmination of months of training for a marathon known as the world's oldest and one of its most grueling. In both their fundraising in the months leading up to the event and their performance in the race itself, this year's Accelerated Cure Project Boston Marathon team went the distance.

The biggest marathon team in ACP history, this year's group was a diverse mix of runners from throughout the nation. Our top fundraiser, Jim Lim, hails from outside Philadelphia, while Laura Cronin and Lesley Toops flew in for the race from California and Texas, respectively. Others, like Cristina Doherty, live and train in Boston. John Cunniffe, who discovered our team through his running club's message board, had no previous link to MS. However, during his fundraising he found that "many people who donated had a direct connection to [the disease]." Some runners, like Greg Mastel and David Hanthorn, were returning members from last year's team. Zach Natale, who also ran last year, decided to run again when a close friend's mother was diagnosed with MS.

To reach their personal fundraising goal of \$5,000, each of our team members had to be creative and determined in their efforts. All of our runners leaned on their family and friends for support via letter writing campaigns. Some held events at a bar where they provided food and entertainment for their supporters. Jessica Rodenhauer ambitiously organized an entire road race in her hometown of Keane, NH. Joe Canavan

hosted a dinner after the marathon to thank all his friends who generously contributed to his race.

As for the marathon itself, all of our runners performed admirably as their families, friends, the Accelerated Cure community and hundreds of thousands of other spectators cheered them towards the finish line. For first time participants like Rebecca Mackelprang, "it was absolutely a dream come true." Lesley Toops, who has completed over 20 marathons in her quest to run one in all 50 states, said she was particularly excited to run Boston. Greg reflected that "the crowds and community support are almost impossible to describe. I have run almost 50 marathons and this is definitely my favorite." John certainly took a lot from the experience, as he declared "after completing the Boston Marathon I am now more confident in myself and my abilities to conquer life's little roadblocks." Given their accomplishments for us, there may not be a roadblock that our runners couldn't conquer.



Lesley Toops

Go to www.acceleratedcure.org/events/eventpages/20100419_marathon.php#Start to see pictures of our runners. Inspired by our Boston Marathon team? We still have bibs available for the Marine Corps Marathon and Marine Corps 10k on October 31st. For those interested in joining the team or running another marathon for Accelerated Cure Project, please email Pete Damilatis at pete@acceleratedcure.org

Accelerated Cure Project T-Shirt Pictures



Elaine in Bryson City, North Carolina



Michelle in Worcester, Massachusetts

Running Out of Pictures

We're running out of t-shirt pictures! If you have a shirt, we will include your picture in the newsletter and on our web site at www.acceleratedcure.org/events/tshirt.php

Please send pictures to info@acceleratedcure.org or mail them to 300 Fifth Avenue, Waltham, MA 02451.

VOLUNTEERS

Our volunteers are a precious resource! These generous folks have been giving their time to Accelerated Cure Project in recent months:

ADMINISTRATION

Judy Medeiros
Kelly Novak
William Senne

BOSTON MARATHON 2010

Cristina Doherty
David Gordon Hanthorn
Greg Mastel
Jessica Rodenhauer
Jim Lim
Joe Canavan
John Cunniffe
Laura Cronin
Lesley Toops
Rebecca Mackelprang
Zach Natale

CALENDAR FOR A CAUSE 2010

Billie Mendoza
Christina Urbanowicz
Debbie Mann
Jane Harter
Jodi Koehler

COMMUNITY BUILDING

Debbie Mann

EDUCATIONAL SEMINAR 2010

Alan Weinberg
Andrea Morris
Chris Connell
Deb DuFault
Fiona Reardon
George Peabody
Gerry Sussman
Jeff Shapiro
Jim Ranieri
Michelle Mangiameli
Nancy Kaplan
Rob Luber
Ryan Galloway
Sarah Encarnacao
Tracey Cleversey
Tracey Lambert
William Senne

FLYING PIG MARATHON 2010

Billie Mendoza
Debbie Mann

HELLO STILETTO SHOE BALL 2010

ATLANTA
Amanda Viciano
Ben Thrower
Bonnie Hardage
Karen Thrower
Kathy Ramsey
Krissy Hoadley
Quise Grimes
Rossana Carrillo

HELLO STILETTO SHOE BALL 2010 BOSTON

Andrea Morris
Chris Connell
Deb La Rocca
Janet Roche
Jeff Shapiro
Jim Ranieri
Julie Morgenlender
Marie Rudzinsky
Max Rudzinsky
Melissa O'Shea
Nancy Costello
Rachel Elias
Ryan Galloway
Shelley Hachman
Tracey Cleversey
William Senne

MEDEIROS FAMILY FUNDRAISER 2010

Judy Medeiros
Nancy Medeiros

MS GLOBAL 2010

Bill Hamilton
Jill Alford

MS SCHOLARSHIPS 2010

Rick Szczepanski

MUSIC TO CURE MS 2010

Marion Leeds Carroll
Willemien Insinger

New Treatments on the Horizon

By Hollie Schmidt

A new era for people with Multiple Sclerosis (MS) was ushered in during the mid-1990's, when the disease-modifying drugs beta interferon (Betaseron, Avonex, and Rebif) and glatiramer acetate (Copaxone) were approved by regulatory agencies for treatment of MS. More recently, the chemotherapeutic agent mitoxantrone (Novantrone) was approved for treating worsening cases of MS, and natalizumab (Tysabri) won approval as another disease-modifying agent for relapsing forms of MS.

The availability of drugs that can reduce the risk of relapse, decrease the number of new MRI lesions, and slow progression gives people with MS the hope of improved health and quality of life. However, drawbacks associated with the current drugs include variable efficacy (some people seem to benefit while others do not), the potential of serious side effects, particularly for mitoxantrone and Tysabri, and administration by injection or intravenous infusion. Therefore, there is still plenty of room on the pharmacy shelf for new MS disease-modifying treatments that provide benefits such as greater reduction of disease activity or easier administration.

Several pharmaceutical and biotech companies have taken up this challenge and are currently working on MS drugs that they hope will make it to that pharmacy shelf. Some of the new drugs in the pipeline are taken orally as pills, a welcome development for people who have problems injecting themselves with needles. A few require much less frequent dosing compared with the current injectable drugs. Like the current MS treatments, most of the drugs in development target the immune system; a few may be neuroprotective and therefore potentially helpful for people with progressive MS. Some are novel drugs while others have been previously approved for other conditions. Several have unique "mechanisms of action" (the

biochemical process by which a drug exerts its effect in the body).

All of the new drugs in the pipeline will have side effects that may potentially be severe. Infection is a particular concern for drugs that suppress the immune system, but other side effects such as autoimmunity and cardiovascular problems have surfaced in clinical trials for certain drugs. And with any new drug, there is the chance for problems not seen in clinical trials to emerge after a longer period of use, as has happened with Tysabri and the brain infection PML. For each emerging drug, the possibility of significant benefits has to be weighed against potentially significant risks.

It's important to remember that these new drugs will not "cure" MS in the sense of permanently stopping disease activity and/or repairing damage previously done. Not enough is known yet about what causes and drives MS to develop a lasting cure. However, each step closer to the ideal of eliminating disease activity altogether is welcome progress. Plus, the more treatments are available, the higher the chances are that every person with MS will find an option that can address their individual form of the disease.

New drugs in the pipeline

A list of drugs in the MS pipeline found at the web site mspipeline.wordpress.com/ includes 17 treatments in Phase III trials, 51 in Phase II trials, and 20 in Phase I trials, with many other compounds being worked on in the lab. Phase I trials are small and designed primarily to identify safety issues; Phase II trials are slightly larger and evaluate efficacy in addition to safety; and Phase III trials are much larger (often with thousands of participants), performed to confirm the risks and benefits of the treatment and generate the data necessary for approval by the FDA or other agencies.

Here's a brief overview of a few of the drugs currently in Phase II or III that may someday be approved for treating MS:

Oral drugs nearing regulatory

approval: Gilenia and oral cladribine are two drugs whose applications have been submitted to the FDA and its European counterpart, EMEA. The FDA recently lengthened the review process for Gilenia to September, and has held up its consideration of oral cladribine pending additional information from EMD Serono. Nevertheless, it is likely that before very long, people with MS will have the option of choosing an oral disease-modifying drug in addition to the more "tried-and-true" injectables.

In clinical trials, these two drugs produced a relative reduction in relapse rate on the order of 40-60% compared to placebo or beta interferon, as well as better MRI results. The trials also produced evidence that these drugs could delay disability progression.

Gilenia (previously known as fingolimod and FTY720): This drug, developed by Novartis, is a completely new compound with a novel mechanism of action. It interferes with proteins called S1P receptors that are found on the surface of immune cells. This interference prevents T and B cells from leaving lymph nodes, thereby keeping them from circulating to the rest of the body. In addition, Gilenia is able to cross the blood-brain barrier, and laboratory evidence suggests that it may protect oligodendrocytes and stimulate remyelination. Because of this possible neuroprotective effect, Gilenia is currently being evaluated in people with primary progressive MS. Gilenia is taken orally once a day. Side effects seen during clinical trials included effects on heart function and blood pressure, an eye problem called macular edema, and increased risk of infection.

Oral cladribine: Oral cladribine is not a completely novel drug but instead is a new version of an intravenous

chemotherapeutic drug used to treat hairy cell leukemia. Cladribine belongs to the group of drugs known as purine analogues; it is incorporated into the DNA of cells such as white blood cells where it causes the DNA to break and the cell to die. Its effect in the body is to wipe out certain immune cells and thereby dampen the inflammatory response. Oral cladribine is administered as a single pill taken for four or five consecutive days, two to four times a year. The drug's developer, EMD Serono, is also evaluating oral cladribine as an add-on therapy to IFN-beta and as a possible treatment for people with a first symptom suggestive of MS. The primary concerns identified so far are an increased risk of infection and possibly an increased risk of cancer.

Other oral compounds: On the heels of oral cladribine and Gilenia are a few other oral disease-modifying drugs that have anti-inflammatory and possibly neuroprotective effects.

BG-12 (oral fumarate): Biogen Idec's leading oral candidate is a new formulation of Fumaderm, a psoriasis treatment. BG-12 activates an antioxidant pathway involving the protein Nrf2. This pathway not only has anti-inflammatory activity but also appears to be neuroprotective, possibly preserving neurons and protecting the integrity of myelin. Based on Phase II study results describing a reduction in MRI lesions, Biogen Idec has initiated two Phase III trials. Side effects include flushing, headache, and gastrointestinal effects, but no observed increase in risk of infection.

Laquinimod: This oral compound from Teva and Active Biotech has been shown to reduce MRI lesions and is now the focus of two Phase III trials, with placebo and Avonex as comparison treatments. The exact mechanism of action is not yet known, but laquinimod appears to reduce inflammation, prevent immune cells from migrating into the central nervous system, and promote the production of neuroprotective factors. The only safety concern reported so far has been temporary elevation of liver enzymes.

Teriflunomide: Sanofi-Aventis's daily oral drug has an immunomodulatory, anti-inflammatory effect, inhibiting the proliferation and function of activated

immune cells. In a Phase II trial, teriflunomide appeared to decrease MRI lesions and slow progression; Phase II trials combining teriflunomide with interferon beta and glatiramer acetate have also been conducted. The drug is now being studied in Phase III trials for people with MS or a first MS-like symptom. Decreased white blood cell counts and increases in liver enzymes have been associated with teriflunomide.

Monoclonal antibody-based drugs:

Another type of disease-modifying therapy is based on antibodies, which are proteins produced by the immune system that bind to specific targets. These proteins can be synthesized (cloned) and made into drugs that target different proteins or molecules.

Alemtuzumab (Campath): This cancer-fighting agent is an antibody that works by binding to CD52, a protein found on the surface of mature T and B immune cells. The presence of this antibody on a cell targets the cell for destruction by other immune agents. Alemtuzumab is administered by daily IV infusions for 3 to 5 days, once a year. Administration of alemtuzumab results in near-total depletion of T and B cells, followed by a gradual rebuilding of these cell populations over time. Results from Phase II trials have shown striking effects on relapse rates and disability, and Phase III trials are now being conducted by Genzyme. However, there are significant safety concerns with this drug, including increased risk of infections and autoimmune disorders, as well as infusion reactions.

Rituximab: Rituximab (trade name Rituxan) targets the immune protein CD20, which is expressed by B cells. The drug is approved for use in rheumatoid arthritis and non-Hodgkin's lymphoma and is administered via IV infusion on a periodic basis (such as two infusions every six months). Phase I and II trials have shown reductions on relapses and lesions in relapsing-remitting MS and delayed progression in certain primary progressive MS subjects who had increased inflammatory activity. A recent small study in secondary progressive MS provided preliminary evidence for disability reduction. No additional trials

(continued on page 6)

VOLUNTEERS (cont.)

SYSTEM ADMINISTRATION

Peter Schmidt

WALK TO ACCELERATE THE CURE 2010

Jack Ankenbauer
Linda Como

YOUNG PROFESSIONALS GROUP

Carson Lappetito
Chad Muller
Corwin Parker
Jaclyn Mosher
Maggie Phelan
Matt McCarthy
Parul Arora
Theresa Grenier
Vassar Pierce

GOODS & SERVICES

CONTRIBUTED GOODS & SERVICES

A Matter of Face
Ace Ticket
AirTran Airways
Anthony Robbins
Belle Isle Kayak Adventures
Bodyco
Boots International
Boston Red Sox
Brian Butler
Brian Schermer
C.A.K.E
Cafe Video Paradise
California Closets
Cher Kore
Christo Tsiaras
Clockwork Design Group, inc
Converse
Cordani
Dedham Community Theater
Diana Gaikazova
Elie Tahari
FableVision Learning
George Peabody
Giuseppe Zanotti Design
Hemenway and Barnes
Home Depot
Hornick Rivlin Studio
Hyatt Regency
Isabella Restaurant
Janet Weinberg
Jillian's Boston
Ken Medeiros
Kenneth Cole
Kim Kannaley
Kouzina Estiatorio
Leonard, Mulherin & Greene, P.C.
Lisa Sargeant
Lt. Jim Keenan
Mark Kushinsky
Mel's Commonwealth Café
Mike Yashko
Mocha Java
National Amusements
Neiman Marcus
New England Revolution
Nuance
Orchids N' Blooms
Paul Fiore
Paul Malagrifa
Peter H. Reynolds
Pirjo Heels
Planet Shoes
Popchips
Rajeev Chillakuru and Jyl Slopnick
Safar
Sara Campbell Ltd.
Shag
ShoeBuy
Shoedazzle
Tara Simpson
The Blue Bunny
The Capital Grille
The Hempest
Uniquely Global
Vineyard Vines
Vizi
Waterfront Cafe Bar and Grill

New Treatments on the Horizon

(continued from page 5)

appear to be taking place in MS trials at this time. Safety concerns for rituximab include infusion reactions and increased risk of infection.

Daclizumab HYP: Daclizumab is a drug given to transplant recipients to prevent rejection of the new organ or tissue. It works by binding to a protein called CD25 or IL2RA that is present on certain immune cells. Rather than depleting entire classes of immune cells, it appears to suppress activated T cells (which express more CD25) and promote the activity of regulatory immune cells called NK (natural killer) cells. The HYP (“high-yield process”) form of the drug being tested in MS is administered through monthly subcutaneous injections. Development partners Biogen Idec and Abbott are currently conducting Phase II and III trials of this therapy following previous indications of lesion and relapse reduction. An increased risk of serious infection is the primary concern with daclizumab.

Other treatments: Recent years have seen increased research activity in the study of myelination. It is likely that new drug candidates will emerge from this research that are designed to stimulate remyelination in MS lesions. One example is BIIB033, a drug from Biogen Idec that is an antibody to the protein Lingo-1. Lingo-1 prevents myelination in adults, so by blocking Lingo-1, BIIB033 may support remyelination attempts in people with MS.

In addition to treatments that are being developed and funded by drug companies, other potential disease-modifying therapies such as off-patent drugs or dietary supplements are also being studied. Clinical trials of these agents are typically funded by government agencies or foundations. Therapies that are currently being studied in MS include vitamin D, the pregnancy hormone estradiol, and even helminths (parasitic worms). New options for treating MS could certainly emerge from these types of trials as well.

As more treatments become available, people with MS and their medical providers will have more options to consider, weighing factors such as efficacy, known risks, potentially unknown risks, convenience, cost, ease of dosing, etc. Although these decisions involve a good deal of guesswork initially (who will benefit? who is at risk of side effects?), a new era of personalized medicine is approaching in which these decisions will be increasingly made based on individual characteristics. The Accelerated Cure Project plans to help with this goal through our MS repository, which captures information about treatments and responses that can be correlated with biological results from blood sample analysis. Until MS is truly cured, having a wide array of treatment choices that can be selected based on personal characteristics is the next best thing.

Campaign Update

By Erin Fitzgerald

The Accelerated Cure Project “Opening Doors to Cure MS” comprehensive fundraising campaign is continuing to move toward its goal of raising a minimum of \$10 million. These funds will support the expansion of our MS Repository, MS studies and research, and the extraction of new findings from our repository database. Since July 2009, the campaign has raised over \$5.1 million through 1,983 donations.

One recent donation came from Stephen Kaufer founder and CEO of TripAdvisor. For the third consecutive year, he has made a generous donation to Accelerated Cure Project. This year, in an effort to use his gift as a tool to encourage others to support the campaign, Kaufer has made a \$50,000 Challenge Grant – his grant will match every donation made at any of ACP’s nationwide cultivation events dollar for dollar up to \$50,000! This gives potential donors an extra incentive to give as their donation will be doubled.

Since January 2010, Accelerated Cure Project and key campaign leaders have hosted cultivation events in New York, Florida, and Washington D.C., and are working to find hosts in more states, including Colorado, Texas, and California. Cultivation events serve as an opportunity for ACP to update current supporters and introduce new people to our mission, programs, impact within the MS community, and future vision. These events have been both informative and inspiring as our guests have heard from Hollie Schmidt, VP of Scientific Operations at ACP; Carolyn Cronin, President and CEO of ACP; and Michael Lazar and Rob Luber who are both touched by MS on a daily basis.

Both academic and industry colleagues strongly believe that our MS Repository will ultimately play a lead role in curing MS. The more samples we collect and researchers we provide samples to, the faster we will cure this disease by determining its causes. The only limit to our impact is funding, which is where you come in. We hope that you will respond with a donation to the “Opening Doors to Cure MS” campaign through one or more of the available opportunities: cultivation events, newsletters, annual appeals, signature events, and volunteer initiatives.

While large gifts are greatly appreciated and needed to support Accelerated Cure Project’s efforts, everyone is welcome to support the campaign no matter the gift size.

For the full list of campaign participants giving at a \$5,000+ level please visit the “Campaign Donor Recognition” article on page 7.

To learn more about how you can support the campaign, please contact Carolyn Cronin at carolyn@acceleratedcure.org or 781-487-0012.

Campaign Donor Recognition

Opening Doors to cure MS

Legacy Leadership Circle \$3,000,000+

Water Cove Charitable Foundation

Ambassador's Circle \$250,000+

Benificus Foundation
Charles & Marilyn Stuckey
Return Path

Director's Circle \$100,000+

Guthy-Jackson Charitable Foundation
The Kaufer Family
Michael & Lori Yashko
Paul & Joanne Eggerman Family
Charitable Foundation

Includes gifts pledged as of 4/30/2010

Patron's Circle \$50,000+

Biogen Idec
EMD Serono
John Alam & Sylvie Gregorie

Benefactor's Circle \$25,000+

Andrew & Karen Hirshberg
Clockwork Design Group, inc
The Kanner/Baker Family
Michael & Roxanne Zak

Diamond Circle \$10,000+

Craig & Debbie Mann
David & Sharyn Pulsifer
The Deepika & Rajiv Laroia Fund
Genentech/Biogen
Izhar Armony & Noamit Armony-Erel
The Leighton Family
Peter & Deborah Wexler
Simon & Eve Colin Foundation
Transverse Myelitis Association
Tyler Hamilton

Emerald Circle \$7,500+

Montagu Newhall Associates

Sapphire Circle \$5,000+

Al & Alma Brosio Family Fund at the
San Diego Foundation
Arlene J. Harris
Brad & Jennifer Parker
The Brock Family
Carolyn Cronin
Clif Bar Family Foundation
Deutsche Bank
DioGenix, Inc.
Elizabeth Riley
Frederic J. Marx
Goodman-Lipman Family Foundation
Interactive Data Corporation
Joel & Phyllis Baron
Mike Westphal & Michele Sequeira
Piper McNealy
Raymond & Virginia Dolan
Rich & Cindy Cummings
Skelmir, LLC

Upcoming Events

More information can be found at www.acceleratedcure.org/events/calendar.php

August 6, Atlanta, GA: Join us as we host our first Atlanta "Shoe Ball" in partnership with Hello Stiletto at the W Hotel - Perimeter. The night will feature dancing, hors d'oeuvres, cocktails, a silent auction and, of course, shoes! Sport your best footwear to benefit Accelerated Cure Project!

September 13-19, New England: Tyler Hamilton Training and Accelerated Cure Project are teaming up again for MS Global 2010! A team of riders will embark on a multi-day cycling event in scenic New England with US Pro Cycling Champion and Olympic gold medalist, Tyler Hamilton, as they raise funds to fight MS. Interested riders should email pete@acceleratedcure.org for more info.

September 11, Downtown Boston: Get ready for our 9th Annual Scavenger Hunt! This year we will be moving right next to the friendly surroundings of Fenway Park. Teams of 4 will start off at the legendary Cask'n Flagon to meander the streets of downtown Boston in search of clues. Wander the Freedom Trail and storm the Boston Common as you try to outsmart your friends...all in support of Accelerated Cure Project. Want to join? Email pete@acceleratedcure.org

October 23, Boston, MA: Join us for our 2nd Annual "Opening Doors" Symposium and Recognition Dinner. Along with a dazzling gala including a VIP reception, dinner, auctions and live entertainment, this event will highlight the accomplishments of our key supporters. Last year's inaugural event was our most successful fundraiser to date with 200 attendees helping us raise over \$200,000!

October 24, Arlington, MA: If you're a music lover, then be sure to mark your calendar for our 8th Annual Music to Cure MS fall concert! Our longest-running volunteer event will showcase a number of local singers and artists as they raise money for Accelerated Cure Project. Be sure to visit their personal website at www.singtocurems.org

October 31, Washington, DC: We have a limited number of charity numbers left for the 35th Marine Corps Marathon. For your chance to run one of the most beautiful (and flattest) marathons in the country while raising funds for a great cause, email pete@acceleratedcure.org

November 19, Chicago, IL: Join us for the 2nd Annual Hello Stiletto "Shoe Ball" at the Holiday Inn Chicago Mart Plaza, a fabulous evening, for women and men, of footwear, fashion, and fun to benefit Accelerated Cure Project!



Nonprofit Org
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PAID
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Boston, MA
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300 Fifth Ave.
Waltham, MA 02451

Tel: 781-487-0008
Fax: 781-487-0009

www.acceleratedcure.org
newsletter10@acceleratedcure.org

Have you moved?
Changed your email
address? Let us know!
Send changes in
contact information to
newsletter10@acceleratedcure.org
or give us a call at
781-487-0008.

Change Service Requested

ABOUT MULTIPLE SCLEROSIS

Multiple Sclerosis is a chronic demyelinating disorder of the central nervous system that often results in severe disability including the inability to walk, blindness, cognitive dysfunction, extreme fatigue and other serious effects. MS affects over 400,000 people in the US and 2 million individuals worldwide. The disorder occurs twice as often in women as in men. The cause is not known and there is no known cure.

Subscribe to This Newsletter: Call 781-487-0008, email newsletter10@acceleratedcure.org or go to www.acceleratedcure.org and click on "Sign Up." You may also **unsubscribe** using this contact information.

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Go to www.acceleratedcure.org and click the "Sign Up" box at the top of the page.

Have you moved? Changed your email address?

Let us know! Send changes in contact information to newsletter10@acceleratedcure.org or call 781-487-0008.

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