

## Foreword by our Founder and Chair of Trustees



Since starting out as a small memorial charity 29 years ago, Children with Cancer UK has pioneered over 200 cutting edge research projects into the treatment of childhood cancer.

In that time we have helped improve survival rates. Children and young people are more likely to survive

cancer than ever before; survival rates increasing from 63.7% in 1990 to 82.4% in 2015. Sadly however over a similar period the number of cases diagnosed has also increased. 10 families every day receive the devastating news that their child has been diagnosed with cancer.

Whilst success against some childhood cancers has improved, prognosis for other childhood cancers remains poor. Even for those cancers where more children are surviving it is crucial that we continue to invest in pioneering kinder treatments that could reduce the burden of toxicity and improve survival rates in even the hardest to treat cancers.

Progress in molecular and cellular biotechnologies has heralded the advent of an era of precision cancer medicine in which molecular genetics can be harnessed to deliver more effective, less toxic therapies. The Trustees are keen to make a major contribution to funding this technology in the UK. We will also focus on the progress in immunotherapy of childhood leukaemia, drug delivery in childhood brain tumours and the ongoing evolution of factors involved in causation of childhood cancer. Improving treatments and survivorship has to be the key focus of research moving forward.

Our progress would not have been possible without the generosity of supporters and for that we are enormously grateful. To date, with your help, we have raised over £210 million in our fight against childhood cancer - £125 million of that in the last ten years.

A great amount has been achieved, but there is still much to be done. Without our valued supporters, vital research and welfare projects could not be funded.

I offer my heartfelt thanks to everyone who has so kindly supported our work to help more children with cancer and their families. I look forward to all we can continue to achieve together in the future.

Iddie O'Lyman

Eddie O'Gorman OBE Founder and Chair of Trustees



Diana, Princess of Wales helped to form the charity, which she then inaugurated.

## IN 2016 WE'RE PROUD TO TELL YOU



## WE FUNDED RESEARCH

5 NEW RESEARCH PROJECTS COVERING 'PREVENTION, CAUSES, TREATMENT AND EDUCATION' INCLUDING:

4 NEW BRAIN TUMOUR INITIATIVE PROJECTS

RESEARCH FELLOWSHIP

3 RESEARCH STUDENTSHIPS

PLUS: BRAIN TUMOUR WORKSHOP

1 INTERNATIONAL SCIENCE CONFERENCE



## WE FUNDED WELFARE PROJECTS

PROVIDED THE FUNDING TO HELP BUILD

NEW PATIENT AND FAMILY ACCOMMODATION BUILDING

1 NEW SUPPORT SERVICE FOR YOUNG PEOPLE WITH BRAIN CANCER

PROVIDED FUNDING FOR EXCEPTIONAL GRANTS THROUGH 'PAUL'S FUND'

FUNDED ASSISTIVE
TECHNOLOGY FOR OVER
CHILDREN AND YOUNG
PEOPLE WITH CANCER
IN HOSPICES AROUND THE UK



## WE RAISED AWARENESS

153,647 WEBSI

WORKED WITH OTHER
CHARITIES TO LOBBY
THE GOVERNMENT, WHICH
RESULTED IN NEW BRAIN
TUMOUR PRIORITIES

1 NATIONAL NEWSPAPER CHRISTMAS CAMPAIGN

FINALIST AT THE CHARITY FILM AWARDS

Phoebe, pictured on the front cover, was diagnosed with Wilms' tumour in 2012.

## RESEARCH HIGHLIGHTS

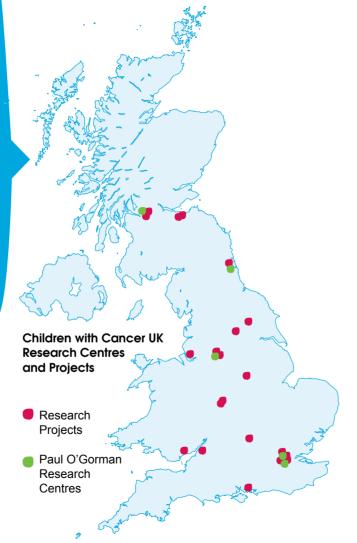
We are currently funding over 60 active research projects worth over £17 million at centres of excellence around the UK.

In 2016 we made 25 new research awards totalling £4.3 million. This includes research grants for prevention, causes, treatment and education. These ranged from large project grant funding, capacity building through our fellowships and studentships and supporting specialist childhood cancer meetings.

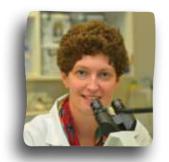
All the research we fund is rigorously scrutinised by our Scientific Advisory Panel and reinforced by expert peer review. This ensures that we only support the highest quality research that will have the greatest impact in terms of patient care.

Information on all the projects we are funding is available on our website; here we have selected a small number of the new projects we have funded in 2016.





## Development of GD2-specific Bi-specific T-cell Engagers (BiTEs) for treatment of neuroblastoma



#### Dr Karin Straathof, UCL Great Ormond Street Institute of Child Health

Neuroblastoma is the second most common solid tumour outside of the brain and less than half of children diagnosed with the high-risk form can be cured. Current care for

high-risk neuroblastoma not only causes significant side effects during treatment but also long-term issues such as impaired kidney function and fertility problems. New treatment strategies are needed to improve the cure rate and reduce the unwanted effects of treatment.

Immunotherapy is a new treatment approach which involves the use of the body's own immune cells to target cancerous cells. It has gained momentum in the treatment of leukaemia and researchers are investigating whether it can also be used to treat neuroblastoma. One form of immunotherapy is called BiTEs. BiTEs are small proteins that recruit the patient's own immune cells to the tumour where those immune cells then destroy the tumour cells.

In this project, Karin will be constructing a series of BiTEs which bind exclusively to neuroblastoma cells and act

as sign posts for the immune cells to target. Her team will identify which BiTE is the most potent at facilitating the destruction of neuroblastoma tumour cells. They will extensively experiment with BiTEs of different shapes and sizes, each with differing binding properties to identify the optimal design. The second aim of the project is to determine how best to incorporate the use of BiTEs into the current treatment schedule of neuroblastoma. In other words, are BiTEs most effective at shrinking the tumour or is perhaps their optimal use preventing the tumour returning? To answer these questions the team working on this project brings together leading researchers and clinicians with unique expertise in design and development of immune cell-based treatments to develop the next generation of immunotherapy for neuroblastoma.

Treating neuroblastoma by recruiting immune cells via BiTEs may provide a completely new type of therapy and could contribute to a cure to those children who cannot be saved with conventional treatments.

Like other types of immunotherapy BiTEs have the potential to have far fewer long-term effects than is currently seen with chemotherapy and radiotherapy. If successful within the laboratory, the researchers expect to launch a clinical trial within five years and allow patients to access this experimental therapy. The success of this project could also see the use of BiTEs to treat other types of childhood cancer.

## Sequencing the unsequenceable: development of ground-breaking technologies to investigate the role of complex genomic sequences in childhood cancer

## Professor Christine Harrison and Dr Sarra Ryan, Newcastle University

Cancer is a genetic disease and our understanding of the genetic process that leads to childhood cancer has vastly grown in recent years. However, around 10% of the human genome remains unexplored, with some of the uncharted regions believed to play a role in the development of childhood cancer. These regions have proven to be notoriously difficult to investigate in detail due to the limitation of current technologies and their ability to sequence the highly repetitive structure of DNA.

This research builds upon their previous discovery that a rare constitutional chromosomal abnormality is associated with the development of leukaemia. It is thought that this chromosomal "trigger" for leukaemia is found in the uncharted regions of the genome. The researchers will employ pioneering and revolutionary technologies to explore this region for the first time and elucidate the complete DNA sequence. They aim to identify any genetic variation that may have a biological function in the development of cancer and investigate how it may be prevented.

Professor Christine Harrison (left) and Dr Sarra Ryan (right).



Christine is Professor of Childhood Cancer Cytogenetics at the Northern Institute for Cancer Research, Newcastle University. She is a world-leader in childhood leukaemia research, having played an important role in improving our understanding of childhood leukaemia genetics over the last 30 years. Sarra is a sequencing expert, who works alongside Christine in the group. Their research will involve a number of UK research institutions and will also collaborate closely with technology experts at the University of California, Santa Cruz.

Detection of genetic risk factors will help improve the prognosis of leukaemia patients through early detection and the development of new treatments.



## CHILDHOOD CANCER RESEARCH CONFERENCE

2016 saw us host our fourth Childhood Cancer Conference. The conference examined how the current revolution in translational science is being harnessed to further improve survival and quality of survival for children suffering from cancer. The three day event featured some of the world's leading scientists working in childhood cancer sharing their knowledge and expertise on Precision Medicine and Immunotherapy, and discussing the influenceable causes of childhood cancer.



## OUR FOCUS FOR 2017



We are committed to making Precision Medicine a reality for childhood cancer patients and intend to drive forward progress through strategic investment and collaborative working. Developing Precision Medicine in the UK should help reduce the long-term adverse impact of aggressive treatment and also give us a better understanding of the causes of cancer in children and young people. In September we will be holding our newly reformatted scientific conference, exploring the latest state-of-the-art translational science being used in the diagnosis and treatment of childhood cancer.

## CLINICAL STUDENTSHIPS

This is the second year of our Clinical Studentship scheme. In 2016 the remit of the scheme was broadened to fund clinicians wanting to undertake a Masters level research project (MRes). This is often a clinician's first opportunity to be exposed to highquality research and helps focus them towards a field of speciality. This type of funding helps build capacity in childhood cancer research and also entices talented doctors to pursue a career in paediatric oncology. This strategic development was supported by the Royal College of Paediatrics and Child Health (RCPCH) which is keen to see doctors embrace and undertake high quality research. The scheme was therefore promoted by the RCPCH to maximise our exposure.

## Targeting c-MYB in acute leukaemia through drug repositioning



#### Katherine Clesham PhD

Although the survival rate for childhood leukaemia has significantly improved, patients who have relapsed still have a poor prognosis. These high-risk patients have to undergo more intensive treatments, causing more pronounced short- and long-term side effects.

Katherine's project aims to test whether repositioned drugs (drugs not originally approved for their anti-leukaemic properties) could provide targeted and

less toxic treatment for high-risk patients. The benefit of this approach is that it is considerably quicker and cheaper than developing new therapies which have to undergo more extensive clinical trials. The drugs being tested are those that are known to affect a transcription pathway relevant in leukaemia. This cellular process is responsible for the activation of genes linked to leukaemia development and maintenance. Katherine's research also aims to offer further insights into the mechanisms behind the drug activity and therefore reveal other potential targets to treat acute leukaemia.

Katherine graduated in medicine in 2005 and has been training as a haematologist since 2009. Undertaking a PhD will enable her to learn and perform scientific methods needed to undertake this vital research. She will be able to use these skills throughout her career as a consultant haematologist enabling her to be involved in clinical trials investigating novel therapies for children and young adults with acute leukaemia.



## The developmental history of bilateral neuroblastoma



#### Sarah Farndon MRes

Sarah aims to increase our understanding of the development of bilateral and other inherited neuroblastoma by looking at the genetic changes (mutations) that cause it and the order in which they occur.

Neuroblastoma is the second most

common childhood solid cancer outside of the brain. It occurs as a result of abnormal development of cells that form part of the nervous system. Bilateral neuroblastoma is a rare variant of this condition where two tumours appear to grow at the same time on opposite sides of the body. It is unclear what causes the two tumours to arise together. Sarah's research will examine, in detail, the DNA of two children who suffered from bilateral neuroblastoma and also their families. By cross-referencing and comparing the mutations Sarah will be able to identify the mutations that occur during embryonic development which lead to tumour formation. This project will be the first attempt at understanding the life history of neuroblastoma development and could be used to provide insight into the role mutations play during embryonic development for other childhood cancers.

Sarah is a doctor currently specialising in paediatrics after graduating in 2010. This award will form the foundation of her future career in research and paediatric oncology, as her career as a consultant haematologist develops.

## Mutational dynamics and their effect on chemoresistance and metastasis in a genetically engineered model of relapsed neuroblastoma



#### Dr Elizabeth Calton PhD

Children diagnosed with highrisk neuroblastoma still have an exceptionally poor prognosis, with five year survival of around 50% despite intensive treatments. Despite a concerted world-wide effort to develop new drugs progress has been hampered

because laboratory models do not sufficiently mimic the human disease. These differences make it much harder to test new therapies before trying them in children. Libby's research aims to produce a laboratory model that closely replicates both the pathology and molecular characteristics of the cancer as seen in actual patients. Improved models will help researchers fully understand the mechanisms involved in drug resistance and also improve the development of new cancer therapies.

Libby is a Specialty Registrar in Paediatrics and intends to further train as a childhood cancer specialist after completing her PhD research.

## BRAIN TUMOUR INITIATIVE

2016 was the final year of our Brain Tumour Initiative. It commenced with our international brain tumour workshop in February. We invited the UK's leading scientists and clinicians as well as international experts to discuss and debate the current challenges within brain tumour research.

From the lively debate and discussion it was clear that delivering targeted therapeutics into a patient's brain still represented the biggest challenge to the research community so we decided to focus the second phase of the Initiative to address this problem.

We awarded four project grants through the second phase of the Brain Tumour Initiative. These projects adopted distinctly different approaches, ranging from immunotherapy to the use of nanotechnology, to deliver therapeutics directly to where they are needed.

THROUGH OUR BRAIN TUMOUR INITIATIVE WE HAVE FUNDED 9 PROJECTS:

INVESTED £3.253 MILLION

HELD 1 INTERNATIONAL BRAIN TUMOUR WORKSHOP

DEVELOPED 1 PAEDIATRIC BRAIN TUMOUR DELIVERY CONSORTIUM

## BRAIN TUMOUR INITIATIVE GRANTS

Precision delivery of chemotherapeutics across the blood-brain barrier for treatment of brain tumours



#### Giuseppe Battaglia

This research explores the use of engineered nanoparticles to cross the brain's natural barrier and deliver their payload of therapeutic drugs directly at the site of the tumour. These nanocarriers possess the same characteristics as natural nutrients important to the brain and

so can move freely to previously inaccessible regions. They will exclusively seek out cancer cells, and once found, they will dissolve to release large amounts of therapeutic drugs that kill their target. This is particularly important for tumours that cannot be removed by surgery (like DIPG) and are reliant on therapy through drugs.

If successful this will cause dramatic improvements in survival and will also have a tremendous impact in other areas of neuro-oncology such as diagnostics and immune therapy.

# Convection enhanced delivery of N3-propargyl, a novel analogue of temozolomide



#### **Beth Coyle**

The chemotherapy drug (temozolomide) used to treat adult high grade gliomas is less effective in children due to a highly active repair mechanism. The aim of this project is to test the effectiveness of a more potent modification of temozolomide

(N3-propargyl), which can overcome this repair mechanism. N3-propargyl will be delivered directly into the tumour using a technique called convection enhanced delivery (CED). CED allows drugs to be delivered directly into the brain through surgically implanted micro catheters. This direct approach restricts the toxic effects of the drug to the site of the tumour rather than the rest of the body. The research group, a close collaboration between Nottingham and Bristol Universities, will need to modify the drug further for use through CED and then determine the optimal dose strategy (release profile) for effectiveness. This will be undertaken in laboratory models but will have the potential to lead to a clinical trial in patients.

# TCR-transduced T cells for immunotherapy of paediatric high grade glioma

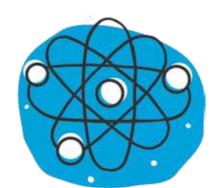


#### John Anderson

In collaboration with the University of California, San Francisco, the researchers will use a novel immunotherapeutic approach to target diffuse midline gliomas.

They aim to genetically modify cells involved in the patient's immune system to specifically

target and kill childhood glioma cells whilst leaving healthy cells unharmed. The aim of this project is to perform the essential preclinical evaluations of this approach and translate the findings into clinical trials for patients in the UK and the USA.



Investigation of a harmless prokaryotic virus for intravenous targeting delivery of therapeutic nucleic acids to diffuse intrinsic pontine glioma



#### Amin Hajitou

Diffuse intrinsic pontine glioma (DIPG) is a type of brain tumour which is currently incurable.
This project aims to use genetic engineering to reprogramme harmless bacteria viruses, to deliver therapeutic nucleic acids to DIPG cells in a preclinical setting.

These viruses can readily cross the physiological brain barriers and also target tumour cells specifically, leaving normal tissue unharmed. If successful, this phage guided anticancer therapy can rapidly enter clinical trials and could also be applicable to other brainstem gliomas.

## Sebastian

"Sebastian has a long road ahead of him with surgery, radiotherapy and then more chemo. And then there are the effects of the radiotherapy.

He is such a good boy with a loving smile. He is getting us through and keeps us strong. He really is our superhero.

Everyone says 'I don't know how you cope', but it just becomes routine and a different way to live life. Yes, at times it is really upsetting seeing our boy in pain, but we know it's not forever and that everyone is doing their best to help him make a full recovery."

Sebastian's mum, Natasha

In October 2015 Sebastian was diagnosed with botryoid embryonal rhabdomyosarcoma.



# YOUNG LIVES VS CANCER CLIC SARGENT

## WELFARE HIGHLIGHTS

Our Welfare funding makes a huge difference to children and families affected by childhood cancer. In 2016 we were able to fund a number of exciting projects that helped make life more comfortable for children with cancer and their families.

## CLIC Sargent

We continue to work with our friends at CLIC Sargent to make a big difference to families affected by childhood cancer. In 2016 we supported CLIC Sargent through their 'CLIC Sargent grants'.

CLIC Sargent grants provide families with vital extra support whilst their child is undergoing cancer treatment. Parents of a child with cancer will spend, on average, £600 a month on additional expenses during treatment. These grants may help families not only with their travel costs, but extra childcare costs for siblings and higher costs of gas, electricity and food bills resulting from side effects of treatment. These grants allow families to worry about one less thing whilst their child is undergoing cancer treatment.



#### **Brainstrust**

We were able to provide a grant to Brainstrust to help develop a new, innovative support service for children diagnosed with a brain tumour. Little Brainstrust is able to provide coachingled support by phone (24/7) or email, helping families overcome challenges and find the best possible outcome for their child, and their family.





Bristol
Children's
Hospital
We are
pleased to
have given
financial
support
to Bristol

Children's Hospital towards a new accommodation unit, so families can stay together and be very close to the hospital when their child is undergoing cancer treatment at the hospital. This accommodation will make a huge difference to many families who may be making regular long-distance trips to the hospital and for children who may be facing months of gruelling treatment and extended stays in the hospital.



#### Together for Short Lives

We were able to give financial support to Together for Short Lives –

one of the UK's leading charities for children with life-shortening conditions. Together for Short Lives provides information and support to families of children with cancer, when a child needs palliative care.



Lifelites
Once again,
we were
pleased
to be able
to support

Lifelites with a grant towards their work with young cancer patients. Lifelites

provides specialist entertainment, educational and assistive technology packages to children and young people with rare, life-limiting and complex disabilities. Our grant enabled Lifelites to provide leading technology and equipment to children with cancer. The equipment encourages them to communicate, be creative and, most importantly, control elements of their lives that they might otherwise be unable to.





## OUR FOCUS FOR 2017

We plan to continue our welfare efforts, with a particular focus on providing support for accommodation for families near hospitals.

## RAISING AWARENESS

#### **Brain Tumour Awareness**

We campaigned for further funding into brain tumour research; working together with other charities, including Brain Tumour Research, we asked our supporters to sign a petition calling for more funding into brain tumour research. Having received over 100,000 signatures from around the UK, the petition was debated in the House of Commons and the government announced a series of new priorities including:



- an increase in the number of brain tumours diagnosed early
- an increase in the amount of funds invested in brain tumour research
- an increase in the awareness of brain tumours, including possible symptoms.







## September is Childhood Cancer Awareness Month.

During the month we launched new, innovative online videos to showcase how important our life-saving research is - our 'Little Translators' film featured some of the children we have supported 'translate' the science behind some of our research projects. To great acclaim, one of the films was a finalist in the Charity Film Awards.

To highlight what it is like for children and young people to go through the cancer journey, we put together a series of podcasts featuring survivors of childhood cancer, a parent and a doctor talking about childhood cancer in more detail. They explained how they coped, what treatment was like and how their families managed through treatment. See https://www.childrenwithcancer.org.uk/about-us/what-we-do/childhood-cancerawareness/#podcasts

JET supported us by helping to raise awareness during Childhood Cancer Awareness Month with this fantastic red petrol tanker. The petrol tanker featured our brand colours, logo and the Childhood Cancer Awareness Month ribbon. JET also had 50 tankers across the UK adorned with our logo and gold ribbon.

#### The Sun Smiles at Christmas campaign

We were delighted to have been chosen by 'The Sun' to be one of four benefitting charities for their Christmas appeal, called 'Smiles at Christmas'. As well as raising money and donating toys for children with cancer, throughout December The Sun highlighted our life-saving work through personal interviews and videos with families we have helped support. They shared these moving stories in print and online.





## OUR FOCUS FOR 2017

To ensure we reach even more people we are launching a new mobile-friendly website to communicate our life-saving work in a clear way and telling the personal stories of children and families affected by childhood cancer. We are also going to optimise our social media channels to ensure we engage more with families and supporters.

## THANK YOU TO ALL OUR SUPPORTERS, HERE ARE OUR FUNDRAISING HIGHLIGHTS



In 2016 we continued to invest in **Linda's Lottery**, our weekly lottery programme. This was possible thanks to Linda Robson, our long-term friend and Trustee who generously lent her name to this exciting fundraising initiative.

Linda's Lottery has now raised nearly £500,000 and helped to fund lifesaving research into more effective and kinder treatments for childhood cancer.

#### 2016 Top Model

Top Model is the leading professional model search in the UK. The grand finalists have the opportunity to win soughtafter awards and gain invaluable experience in the modelling industry.

A key part of this prestigious event is the Charity Public Vote Award, which sees finalists raising money for Children with Cancer UK. In 2016 over £35,000 was raised in support of our work.

#### **London Marathon**

On 24th April 2016 we saw 1,400 runners take on the gruelling 26.2 miles of the Virgin Money London Marathon. We had an incredible year of fundraising and raised over £2.8 million.



#### Musical Extravaganza

The charity hosted an evening of musical entertainment at the St James Theatre in Victoria. We are very grateful to Jamie Lonsdale who both sponsored the event and organised the show. This took place on Sunday 24th April with almost 300 guests attending, including patient families and some of our researchers and raised over £27,000 for the charity.



#### Artemis Cycle London to Edinburgh 2016

In September 2016, a group of colleagues from the company Artemis took part in a 539 mile cycle from London to Edinburgh, in aid of Children with Cancer UK.

11 team members took part in total, with a further 13 joining the team for one stage of the trip. The challenge took six days in total to complete, with them raising over **£73,000** for Children with Cancer UK in the process. We would like to thank everyone at Artemis for their hard work and dedication throughout this challenge.





Through our partnership with St. Baldrick's we received £55,367 from a series of head-shave events that took place throughout the UK in 2016. As children with cancer often lose their hair during treatment, "shavees" show their support by shaving their heads voluntarily. These events have taken place in a variety of places including pubs, restaurants and the workplace. 'Shavees' ask their friends and family to make donations 'on their head' and help to raise vital funds in support of our work.

## THANK YOU TO ALL OUR SUPPORTERS, HERE ARE OUR FUNDRAISING HIGHLIGHTS

#### Opera at Syon

In 2016 we celebrated 25 years of Opera at Syon with two wonderful performances by Diva Opera of Donizetti's Don Pasquale and Mozart's Cosi fan Tutte, raising over £116,000 for the charity. The opera was performed in The Great Conservatory at Syon House, the London home of the Duke of Northumberland. On 2nd November we organised a 'thank you' drinks reception at The Honourable Society of Gray's Inn, where we also celebrated over £1.2 million raised by the event over 25 years.



## 2016 Prudential RideLondon – Surrey 100

Over 400 cyclists cycled through the Surrey Hills and the streets of London last August and raised over £330,000 to support our work.



#### The Children with Cancer Ball

Our Children with Cancer Ball raised over £610,000 in November 2016 – more than ever before. We are very grateful to all the wonderful guests who contributed to this terrific achievement, in particular the organising committee chaired by Stephen Haines. Entertainment was provided by comedian Jack Whitehall, Björn Again, opera singer Saira Luther and 'Rat Pack' singer Alan Beck and guests danced into the small hours to Rollacoaster.

Live auction highlights included a very special VIP day out for children with cancer and their families at the wonderful Grand Pier in Weston-Super-Mare and we are so grateful to the Grand Pier for hosting the day.

#### Spring into Summer Party, Marbella

On Sunday 12th June, Sandro Morelli organised his annual Summer Party at his stunning restaurant Villa Tiberio in Marbella, helped as always by Caroline Randerson. The host for the evening was award-winning Scottish comedienne Janey Godley.

Entertainment was organised by Jason Haigh-Ellery, with talented performers including stars of the West End stage Charlotte Jaconelli and Lauren Samuels. We are grateful to Caroline as well as to her friend Jenny Ingram, who organised a fashion show in the UK in May and the two events raised over £45,000 for the charity.



#### **Rat Race**

Over 1,000 people took part in a Rat Race Event in 2016 throughout the year, including taking part in the world's largest obstacle course "Dirty Weekend". Through their fundraising and our partnership with Rat Race, the team helped to raise over £250,000 in support of our life-saving work.



## OUR FOCUS FOR 2017



Our 2017 fundraising strategy will deliver a national advertising campaign to recruit new regular supporters, invest in new technologies like mobile giving, and develop existing activities like our long-standing Grand Draw raffles. These campaigns will raise the vital funds that we need to find better and safer treatments for childhood cancer, and support even more children and their families across the UK.



## Isaac

"After Isaac was diagnosed, we just wanted to know what they were going to do about it. His treatment plan was explained, focusing on the first phase of his treatment but informing us of the fact it would consist of five phases and would take more than 3 years. And so the journey commenced.

Isaac has completed the intensive four phases of his treatment and is now into phase 5, maintenance, which will continue until May 2019.

For the entirety of Isaac's maintenance phase (2 years 8 months) he will have blood tests and clinic appointments weekly or every two weeks, he is on daily and weekly chemotherapy drugs that he takes in tablet form, he has to have antibiotics every weekend, every 28 days he has to have another chemotherapy drug through a canular, every five days in 28 he has to take steroids, and every 12 weeks he has to have a general anaesthetic for a lumbar puncture and chemotherapy.

What I do remember more than all else is the way Isaac has responded to the diagnosis over the last year. He has asked questions and found it hard at times but he has not moaned, or whinged. He has shown remarkable courage and joy and has matured in confidence beyond his years."

Isaac's mum. Liz

Isaac was diagnosed with acute lymphoblastic leukaemia in February 2016.

## CORPORATE

#### One Aldwych

Since choosing us as their charity partner in 2012, One Aldwych has raised over £80,000 for our life-saving work.

To help raise awareness and funds during Childhood Cancer Awareness Month in 2016, One Aldwych's Executive Chef, Dominic Teague, invited four of his Michelin star friends to put on a once-in-a-lifetime dining experience in aid of Children with Cancer UK. Dominic was joined by Jeff Galvin of Galvin La Chapelle in London, Chris Eden of Driftwood in Cornwall, Phil Thompson of Thompson in St Albans and Tony Fleming of the soon-to-open L'Oscar Hotel in London. All proceeds from the dinner went directly to our work, raising over £9,000.

Dominic Teague, One Aldwych's Executive Chef, said: "The evening was a chance for us chefs to give back a little. There is something particularly special when you know you are cooking for a great cause like Children with Cancer UK. It's not often that you find five top chefs in one kitchen – it's as much a rarity for us as it is for the diners. We had a great night and I hope the guests did too."

#### BGC

We were delighted that in 2016, we were selected as one of BGC Partners chosen charities at their annual Charity Day.

Every year, BGC Partners hold their special day dedicated to charities in memory of BGC colleagues and friends who perished in the disaster of 9/11. This amazing event is held worldwide and raises over £12 million for charities all over the globe year on year.

On the day, charities invite their celebrity ambassadors, and we were joined by Chris Eubank and Chris Eubank Jnr, and two of our patient families, The Dawson Family and The Kayum Family, who had the chance to join in on the fun and games meeting their sporting and Hollywood Heroes.

The day raised £40,000 for our vital work, which specifically contributed towards our Brain Tumour Initiative



## Sam

"We find the five days a month when he has steroids very challenging - but his friends are very accepting, his friends' parents very understanding and his school very accommodating. They know that it's Sam's chemo making him emotionally and physically less able and they all work together with us to help him cope. We are incredibly lucky and it has made his illness less isolating.

A while back Sam said: "Mummy, these may be the best three and a half years of my life". He's still saying that after two and a half years. So I feel, as a mum, that I am doing the best job that I can. Trying to make these years as fun as I can, so we have more happy memories than sad ones.

We are so fortunate to be treated at such an amazing hospital and to have also met some wonderful families on this journey."

Sam's mum, Tamsin

Sam was diagnosed with acute lymphoblastic leukaemia in November 2013.



#### Coral

We were delighted that our partnership with Coral was extended throughout 2016. By the end of 2016 Coral had raised an incredible £2.2 million towards our life-saving work during their three year partnership with us. This amazing milestone was achieved thanks to Coral's team of dedicated staff, who raised money through various fundraising activities ranging from climbing Kilimanjaro to holding bake sales, taking on quizzes to hosting summer parties and Christmas parties, and holding their very own football tournament.

In addition to this fundraising activity, we have also benefitted from the sale of Coral scratch cards. Through this incentive, Children with Cancer UK receive 20% of sales of Coral's £1, £2, £5 and £10 cards, which has **raised over** £1 million alone for our vital work.

Steve Humphries, Central Operations Director at Coral, on visiting one of our lab tours, said:

"I found the whole day a little like being on a rollercoaster – one minute feeling huge sadness for those impacted by childhood cancer, unable to avoid putting myself in their shoes, to the next minute being totally humbled by the commitment, dedication and passion shared by the team in fighting it. Before the session I would count myself as an apostle of what you are trying to achieve, now I'm all the more so."

#### **Andrew Reynolds' Entrepreneurs' Bootcamp**

In October 2016, Brighton was the venue for the latest of the award winning Entrepreneurs' Bootcamp series of events. Hosted by self-made millionaire, Andrew Reynolds, the three day Bootcamp was attended by almost 3,000 aspiring entrepreneurs and start-up business owners.

100% of the ticket sales were donated to Children with Cancer UK and combined with additional donations during the event, a grand total of £229,842 was raised! This incredible amount will be put to extremely good use in our fight to save even more young lives.

Andrew Reynolds, Founder of Andrew Reynolds' Entrepreneurs' Boot Camp tells us "Spending three days with 3,000 aspiring entrepreneurs - each of whom had donated their ticket money to this amazing charity - was an incredibly humbling experience. One that we hope to repeat in 2017 too."

## Bella-Rose

"Bella was extremely unwell when first diagnosed. In fact she was so poorly that she nearly ended up in intensive care. Our lives had stopped. I held my little girl in my arms for days, while trying to come to terms with the fact my three-year-old had cancer.

I sit in the chapel here at the hospital crying so much my tears flood the floors. I wake up during the nights crying. And Bella's consultant has told me that if she was to have a transplant she would have an 80% chance of relapsing again.

During all of this I am still training for the marathon. It gives me a purpose to what feels like a hopeless existence."

Bella-Rose's mum, Abbie

Bella-Rose was diagnosed with acute lymphoblastic leukaemia in November 2014.



## How your donations help children with cancer

We always adhere to the UK regulatory framework (in 2016 the FRSB and Fundraising Regulator).

Children with Cancer UK is committed to best practice in fundraising and follows the Fundraising Promise and the Institute of Fundraising's Code of Fundraising Practice.

#### **Our Fundraising Promise**

The Fundraising Promise is a key part of the FRSB scheme. It outlines how we, as a member, will behave when undertaking our fundraising and ensures fundraising is legal, honest, open, transparent and accountable.

- We are committed to high standards
- We are honest and open
- We are clear
- We are respectful
- We are fair and reasonable
- We are accountable

#### **Our Supporter Care Charter**

- We recognise the true value of each and every supporter
- We respect our supporters
- We value supporter relationships
- We know who our supporters are
- We listen to our supporters' feedback
- We go "The Extra Mile"





#### How your donations help children with cancer

We are pleased to report our income for the year was £16.5 million in 2016. We receive no government funding and rely exclusively on the voluntary generosity of our supporters.

For every £1 we spend on fundraising, we raise over £5 more.

For every £1 donated, we spend 82p on fighting childhood cancer

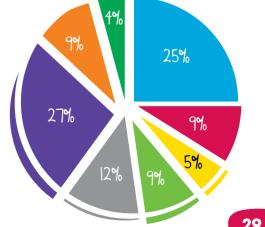
- 47p on research projects
- 14p on welfare projects
- 21p on raising awareness
- We invest 18p in £1 to raise more money.



**18p** is spent on raising further vital funding

#### Our total fundraising income

- Appeals and associated donations 25%
- Committed giving 9%
- Community fundraising 5%
- Corporate and trust donations 9%
- Legacies 12%
- Sports events 27%
- Scratch cards 9%
- Special events and trading 4%



## Thank you

A very special and heartfelt thank you to all the families who have kindly shared their experiences in 2016. Your involvement is essential in raising awareness and vital funds to help children with cancer.

Although we are only able to highlight a very small number of our supporters below, we offer our sincere and wholehearted thanks to everyone who so generously supported our work during 2016:

All our runners and challenge participants.

The team at London Marathon Events.

Our many generous Trust and Foundation supporters, including the Band Trust and the Joseph and Lillian Sully Foundation.

Our dedicated Ball and Opera at Syon chairs and committees, notably Stephen Haines, Margrete Hargreaves-Allen and Lady Julia Craig Harvey.

Caroline Randerson for the fashion show and Spring into Summer Party in Marbella.

Martin Burton and Zippos Circus.

Cos Onisiforou and John Durden of Fare and Harbour & Jones for generous catering at our Zippos Circus event.

Sandro Morelli at Villa Tiberio in Marbella.

Kerry Michael and The Grand Pier in Weston-Super-Mare for hosting our event for families in April.

Jim Mee and the team at Rat Race Events.

Sanrio.

RBI Visual.

And finally, a special thank you to our dedicated team at Children with Cancer UK.

#### **Fundraising Friends:**

Ant and Dec • Brian Blessed • Brenda Blethyn • Frank Bruno • Sir Michael Caine • Jasper Carrott • Dame Joan Collins • Phil Collins Dame Judi Dench • Kian Egan • Philippa Forrester • Sir Chris Hoy • Chris Jarvis • Sir David Jason • Pui Fan Lee • Lennox Lewis Gary Lineker • Joanna Lumley • Sandy Lyle • Sir Paul McCartney • Sir Trevor McDonald • Stephen Mulhern • Des O'Connor Robert Powell • Pauline Quirke • Sir Steve Redgrave • Linda Robson • Jonathan Ross • Phillip Schofield • Chris Tarrant Rob Templeman • David Tennant • Kevin Whately • Holly Willoughby • Paul Young



# Dylar

"There are constant side effects of all the treatments including mood swings, hair falling out and mouth sores. Any sign of a temperature means he has an infection and has to be admitted to our local hospital, which has happened many times.

As I write this Dylan is in remission, but I'm fully aware that he can relapse at any time. It's hard to rejoice until all his treatment is over — I know we are all still walking on egg shells.

If anything positive has come out of Dylan's diagnosis it is all the help and support we've had from family, friends and complete strangers."

Dylan's mum, Lorraine

Dylan was diagnosed with acute lymphoblastic leukaemia in January 2015.

#### **Summarised Financial Statements**

Consolidated statement of financial activities for the year ended 31 December 2016 (incorporating an income and expenditure account)

	Total restricted funds	Total unrestricted funds £	Total 2016 £	Total 2015 £
Income from:				
Donations and legacies	303,238	15,279,183	15,582,421	16,666,630
Other trading activities	-	750,973	750,973	728,190
Income from investments	-	142,735	142,735	139,814
Other income	-	48,287	48,287	9,630
Total Income	303,238	16,221,178	16,524,416	17,544,264
Expenditure on:				
Raising funds	_	2,523,052	2,523,052	3,465,102
Charitable activities	1,842	11,787,454	11,789,296	14,573,438
Total Expenditure	1,842	14,310,506	14,312,348	18,038,540
Net change in investments	-	186,499	186,499	(38,168)
Net (expenditure)/income	301,396	2,097,171	2,398,567	(534,444)
Transfers between funds	(301,396)	301,396	-	-
Net movement in funds	-	2,398,567	2,398,567	(532,444)
Reconciliation of funds:				
Total funds brought forwar	d -	8,430,813	8,430,813	8,963,257
Total funds carried forward	l -	10,829,380	10,829,380	8,430,813

#### Balance sheet as at 31 December 2016

Company Number: 4960054

	2016 Group	2016 Charity	2015 Group	2015 Charity
Fixed assets	£	£	£	£
Investments	10,417,452	10,417,552	11,855,726	11,855,826
	10,417,452	10,417,552	11,855,726	11,855,826
Current assets				
Debtors and prepayments	2,351,499	2,387,565	2,185,935	2,227,396
Cash deposits	10,272,332	10,272,332	4,118,836	4,118,836
Cash at bank and in hand	402,077	366,152	519,967	476,630
	13,025,908	13,026,049	6,824,738	6,822,862
Creditors: amounts falling due within one year		, ,		
Grants	(6,303,885)	(6,303,885)	(3,657,849)	(3,657,849)
Other	(678,968)	(679,209)	(812,755)	(810,979)
Net current assets	6,043,055	6,042,955	2,354,134	2,354,034
Total assets less current liabilities	16,460,507	16,460,507	14,209,860	14,209,860
Creditors: amounts falling due after more than one year				
Grants	(5,631,127)	(5,631,127)	(5,779,047)	(5,779,047)
Net assets	10,829,380	10,829,380	8,430,813	8,430,813
Represented by:				
Unrestricted funds Restricted funds	10,829,380	10,829,380	8,430,813 -	8,430,813 -
	10,829,380	10,829,380	8,430,813	8,430,813

2016

2015

2015

## Report by the trustees on the Summarised Financial Statements

The Summarised Financial Statements are extracted from the full statutory trustees' annual report and financial statements which were approved by the trustees and signed on their behalf on 19th July 2017. The full financial statements, on which the auditors Crowe Clark Whitehill LLP gave an unqualified audit report, will be submitted to the Charity Commission and to the Registrar of Companies.

The auditors have confirmed to the trustees that, in their opinion, the summarised financial statements are consistent with the full financial statements for the year ended 31 December 2016.

These summarised financial statements may not contain sufficient information to gain a complete understanding of the financial affairs of the charity. The full statutory trustees report, financial statements and auditors' report may be obtained from Children with Cancer UK, 51 Great Ormond Street, London WC1N 3JQ or www.childrenwithcancer.org.uk

Signed on behalf of the trustees on 19th July 2017.

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The Rt Hon the Earl Cadogan, KBE, DL Trustee addio O Guman

Eddie O'Gorman OBE
Founder and Chair of
Trustees

Grants to third parties	Research into prevention and causes 2016	Research into treatment 2016	Welfare Ed 2016	ducation 2016	Total 2016
	£	£	£	£	£
Dr Maria Vinci, Institute of Cancer Research, The role of interclonal communication and the tumour	•				
microenvironment in driving paediatric GBM and DIPG migration and invasion	413,545	i			413,545
Dr Amin Hajitou, Imperial College London, Investigation of a harmless prokaryotic virus for intraven	ous				
targeting delivery of therapeutic nucleic acids to DIPG		333,809			333,809
CLIC Sargent, To fund Paul's Fund, which provides much needed financial assistance to the familie	es				
of children being treated for cancer			332,596		332,596
Professor Giuseppe Battaglia, University College London, Precision delivery of chemotherapeutics					
across the blood-brain barrier for treatment of brain tumours		327,500			327,500
Professor John Anderson, UCL Great Ormond Street Institute of Child Health, TCR-transduced T	cells				
for immunotherapy of paediatric high grade glioma		323,585			323,585
Dr Elizabeth Coyle, University of Nottingham, Convection enhanced delivery of N3-propargyl, a no	vel				
analogue of temozolomide		258,845			258,845
Professor Chris Jones, Institute of Cancer Research, The role of histone H4K20 methylation in pae	diatric				
glioblastoma and DIPG	258,458	}			258,458
Professor Persis Amrolia, Great Ormond Street Hospital (via GOSH Children's Charity), Immunothe	erapy				
with CD19 CAR redirected T cells for relapsed paediatric ALL (CARPALL). Extension of grant award	ded in 2014	253,824			253,824
Professor Louis Chesler, The Institute of Cancer Research, Development of experimental models a	and				
therapeutic strategies to target treatment-resistant, metastatic neuroblastoma		251,989			251,989
Dr Karin Straathof, UCL Great Ormond Street Institute of Child Health, Development of GD2-specif	ic				
Bi-specific T-cell Engagers (BiTEs) for treatment of neuroblastoma		251,392			251,392
Dr Elizabeth Calton, Institute of Cancer Research, Mutational dynamics and their effect on					
chemoresistance and metastasis in a genetically engineered model of relapsed neuroblastoma			250,000		250,000
Bristol Children's Hospital, 'Keeping Families Together', to provide family accommodation at					
Bristol Children's Hospital		250,000			250,000
Dr Katherine Clesham, UCL Great Ormond Street Institute of Child Health, Targeting c-MYB in					
acute leukaemia through drug repositioning		249,999			249,999
Dr Marc Tischkowitz, University of Cambridge, Investigating microRNA processing genes in					
rhabdomyosarcomas and other DICER1-related childhood tumours	225,510	1			225,510

Grants to trilla parties	earch into ention and suses 2016	Research into treatment 2016	Welfare E 2016	ducation 2016	Total 2016
	£	£	£	£	£
Dr Suzanne Turner, University of Cambridge, CRISPR-based genome-wide knockout and					
overexpression screens to identify acquired resistance mechanisms to ALK inhibition in neuroblastoma		223,310			223,310
Professor David Walker, University of Nottingham, Children's Brain Tumour Drug Delivery Consortium				194,180	194,180
Together for Short Lives, To provide help for young people and their families with cancer to ensure that					
they have the best quality care and support from the moment of diagnosis			180,000		180,000
Brainstrust, Expanding an effective brain tumour support service for children and their parents			152,000		152,000
Professor Ruth Jarrett, University of Glasgow, Evaluation of CCL17 as a diagnostic biomarker for					
classical Hodgkin lymphoma		149,968			149,968
Professor Louis Chesler, The Institute of Cancer Research, Molecularly guided treatment in childhood can	cer	125,666			125,666
Lifelites, To help enhance the lives of children with cancer in hospices through the use of specialist techno	logy		120,000		120,000
Dr Sarah Farndon, UCL Great Ormond Street Institute of Child Health, The developmental history of					
bilateral neuroblastoma	65,311				65,311
Professor Christine Harrison, Newcastle University, Sequencing the unsequenceable: development of					
ground-breaking technologies to investigate the role of complex genomic sequences in childhood cancer	55,022				55,022
Dr Helen Bryant, University of Sheffield, Novel therapies for MYCN-amplified neuroblastoma		49,300			49,300
Dr Ian Carr, University of Leeds, Identification of MSH6 null individuals in patients suspected of suffering					
from Constitutional Mismatch Repair Cancer Syndrome		31,587			31,587
Dr Mathuros Ruchirawat, Chulabhorn Research Institute, The 8th Princess Chulabhorn International					
Science Congress	12,000				12,000
Professor David Walker, University of Nottingham, An international workshop to develop a web based					
paediatric pre-operative cerebellar mutism risk stratification tool		10,000			10,000
Dr Rod Mitchell, University of Edinburgh, 1st UK Fertility Preservation Annual Meeting		8,975			8,975
Dr Ruman Rahman, University of Nottingham, Brain Tumour Initiative – Drug delivery development grant		5,000			5,000
Dr Evon Poon, Institute of Cancer Research, Advances in Neuroblastoma Research Congress 2016		2,120			2,120
Professor Terry Dwyer, University of Oxford, International Childhood Cancer Cohort Consortium (I4C)					
Meeting 2016	1,000				1,000
Total grants to third parties	1,030,846	3,106,869	1,034,596	194,180	5,366,491



Children with Cancer UK is the leading national children's charity dedicated to the fight against childhood cancer.

Read our Annual Review online, watch videos, download our complete Annual Report and Accounts 2016 and full list of our Grant Awards at childrenwithcancer.org.uk/about-us/our-impact-and-success/

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