

The Society of MSK's 2026–2027 Campaign

Living Treatments. Lasting Hope.

Advancing Cellular Immunotherapy at MSK



80 YEARS OF IMPACT



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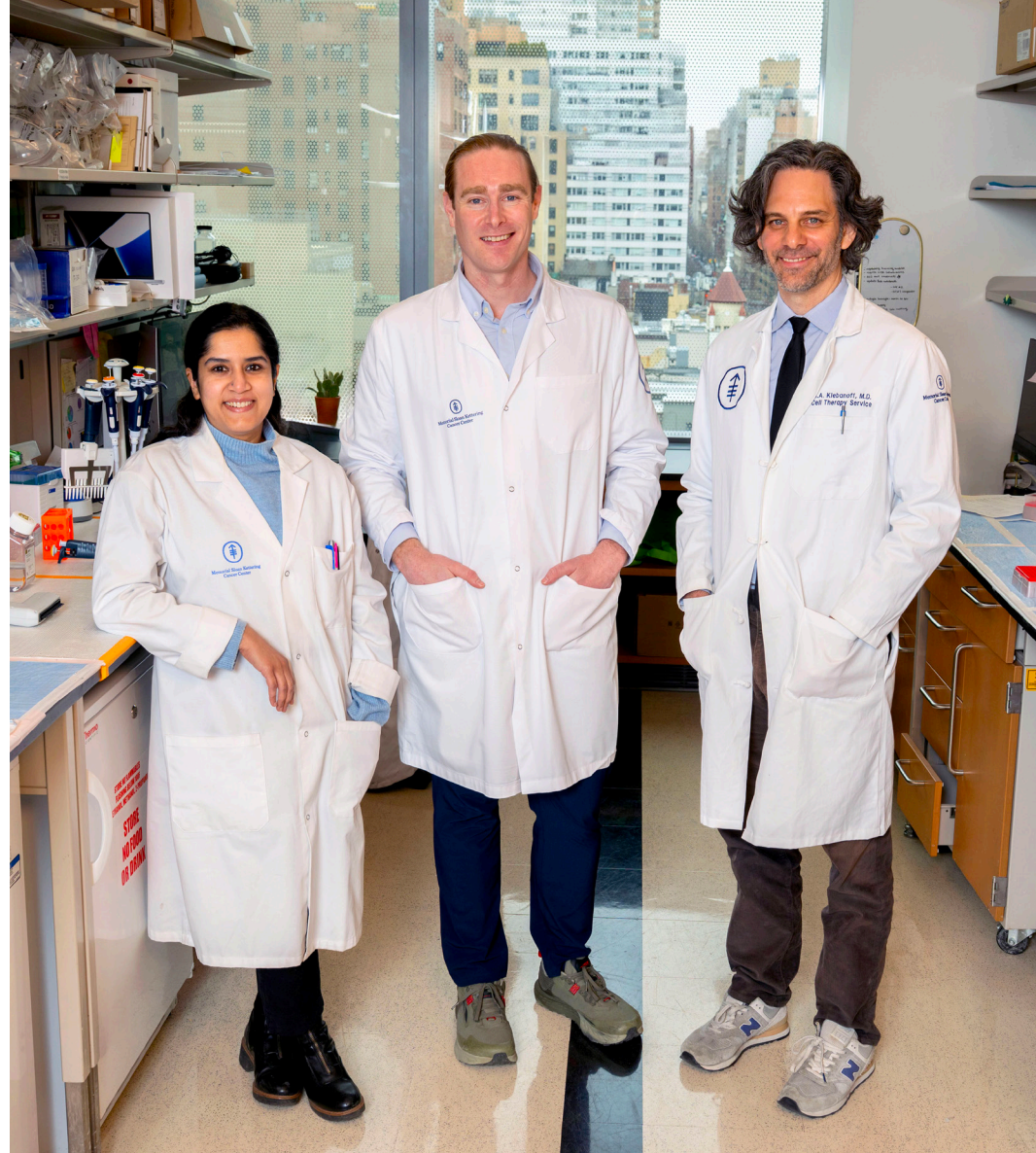
These are not conventional medicines. They are living treatments.

Every generation of cancer care is shaped by breakthroughs that change what is possible. Cellular immunotherapy has the potential to be one of them.

Unlike conventional medicines, cellular immunotherapy empowers a patient's own immune cells to become the treatment. Scientists collect these cells, engineer them to better recognize cancer, multiply them in the laboratory, and return them to the patient's body, where they can seek out and attack cancer cells.

Memorial Sloan Kettering Cancer Center (MSK) has played a defining role in the development of cancer immunotherapy. Today, the Center for Cellular Immunotherapy is building on that legacy with an ambitious goal: to bring the transformative potential of cell-based treatments to many more people with cancer.

Under the leadership of **Christopher Klebanoff, MD**, a medical oncologist, cellular therapist, and translational researcher, the center is developing new ways to direct immune cells with greater precision against a broad range of cancers. This work seeks to expand cellular therapy to cancers that remain difficult to treat, including cancers of the pancreas, breast, colon, ovary, and lung; certain leukemias; and cancers affecting children and young adults.



Klebanoff Lab Group, 2026

A cancer treatment made from living cells — cells capable of expanding, persisting, and continuing to recognize cancer — presents an extraordinary scientific opportunity.

Through its 2026–2027 Campaign, **The Society of MSK** can help move that opportunity closer to patients.

Creating New Treatments for Solid Tumors

One of the field's greatest challenges is bringing the success of cellular therapy to solid tumors — cancers that form masses in the body — including cancers of the pancreas, breast, colon, ovary, and lung.

Dr. Klebanoff and his colleagues are pursuing a powerful approach called **T cell receptor**, or **TCR**, therapy.

TCRs give immune cells a kind of **X-ray vision**. Instead of recognizing only markers on the surface of a cancer

cell, TCRs can identify telltale signs of cancer that originate from proteins inside the cell. Researchers can then engineer a patient's T cells to recognize these cancer-specific signals, with the goal of attacking cancer more precisely while limiting injury to healthy tissue.

The long-term vision is bold: develop a library of cellular therapies directed at cancer-driving mutations, allowing treatments to be matched to the biology of an individual patient's tumor.

The goal is clear: translate discoveries in the laboratory into clinical trials for people whose cancers have returned, spread, or stopped responding to available treatments.

Omar Abdel-Wahab, MD; Leukemia Specialist; Chair of SKI Molecular Pharmacology Program and Salima Benbarche, Senior Research Scientist



Extending the Promise of Cellular Therapy to More Blood Cancers

Cellular immunotherapy has transformed treatment for some blood cancers. But many others, particularly myeloid cancers such as acute myeloid leukemia (AML), remain much harder to target.

To overcome these barriers, MSK investigators are developing new chimeric antigen receptor (CAR) T-cell and T-cell receptor (TCR) therapies, which reprogram a patient's immune cells to recognize and attack cancer.

One approach is called “**armoring**.” Scientists engineer therapeutic immune cells with additional capabilities intended to help them resist exhaustion, remain active longer, and overcome defenses that cancer uses to suppress an immune response.

The challenge in AML is particularly complex: many of the features that distinguish leukemia cells are also found on the healthy blood-forming cells patients need. Researchers must therefore find ways to attack the leukemia while protecting these essential healthy cells.

By discovering better targets and building stronger, more precise immune cells, MSK investigators aim to bring the promise of cellular therapy to patients who have not yet benefited from its advances.





Andrew Kung, MD, PhD

Bringing the Next Generation of Cellular Immunotherapy to Children and Young Adults

The Center for Cellular Immunotherapy is also working closely with MSK Kids, MSK's pediatric cancer program, to develop new approaches for rare cancers affecting children and young adults.

One important focus is **desmoplastic small round cell tumor (DSRCT)**, a rare and aggressive cancer that primarily affects adolescents and young adults.

MSK Kids is pursuing better treatments for young people facing this disease, guided by **Andrew Kung, MD, PhD**, Chair of the Department of Pediatrics and Lila Acheson Wallace Chair for Pediatric Research, and MSK pediatric oncologist **Emily Slotkin, MD**.

Today, MSK's deep understanding of DSRCT is converging with advances in cellular immunotherapy.

Researchers are working to develop immune-cell therapies that recognize molecular features of DSRCT, with the goal of translating promising approaches from the laboratory into clinical trials.

Together, this work brings MSK's expertise in rare pediatric cancers and its leadership in cellular immunotherapy to bear on behalf of young people who urgently need better options.



Emily Slotkin, MD

The Service of Hope

At MSK, cellular immunotherapy is changing not only what treatment can do but also what treatment can represent for people facing advanced cancer.

MSK cellular therapist **Anthony Daniyan, MD**, has described the Cellular Therapy Service as the “**Service of Hope.**”

The name captures something important. Patients often enter the hospital because cancer has caused complications, treatment has led to serious side effects, or options are becoming limited. They come to the Cellular Therapy Service for a different reason: to receive a highly specialized immune-cell treatment designed to give their immune system new tools to fight their cancer.

Some cellular therapies can be delivered in a single infusion of specially prepared immune cells. Once inside the body, these cells can multiply and may remain active long after the infusion itself is complete — in some patients, for months or even years. And for those who experience a lasting response, that single treatment may be the last cancer-directed therapy they need.

That is the promise behind the “Service of Hope”: **not certainty, but possibility — grounded in science.**

Realizing that possibility requires an unusual combination of laboratory discovery, clinical expertise, sophisticated cell-manufacturing capabilities, and the ability to learn from every patient treated. MSK brings these elements together. The challenge now is to extend the benefits of cellular therapy to many more people.



Anthony Daniyan, MD, Physician-scientist; Medical Oncologist, Leukemia Service

Join Us

The Society of MSK has always understood the power of philanthropy to move cancer care forward.

Through the 2026–2027 Campaign, you can help advance a new generation of cancer treatment — one that harnesses living immune cells to recognize and fight disease.

With your support, the Center for Cellular Immunotherapy can build on MSK's legacy of innovation, extend the reach of the “**Service of Hope**,” and bring the promise of living therapies to more people with cancer.

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Cellular immunotherapy is a unique form of cancer treatment because it is a living therapy — one that empowers a patient's own immune cells to fight their cancer.

These highly specialized cancer-fighting immune cells can grow, divide, and remain vigilant in the body, giving us a therapy that may continue fighting cancer long after it is given.

Christopher A. Klebanoff, MD

Director, Center for Cellular Immunotherapy



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