

Business & Regulatory Report

Clinical Trials:

Genzyme To Conduct Mutation Analysis For CALGB Trial In Lymphocytic Leukemia

Genzyme Genetics, a business unit of Genzyme Corp. (NASDAQ: GENZ), said it is participating in a Cancer and Leukemia Group B study sponsored by NCI for chronic lymphocytic leukemia.

The multi-center 1,700-patient study would test the hypothesis that early treatment of patients with negative risk factors leads to longer survival. Genzyme will perform the IgVH mutation analysis for the study.

“This study is critical in helping us to understand the natural history of CLL with respect to early versus delayed progression,” said John Byrd, director of hematologic malignancies and co-director, Division of Hematology-Oncology, Department of Medicine, Ohio State University
(Continued to page 2)

Deals & Collaborations:

Bristol-Myers Squibb Plans Review To Increase Productivity, Profitability

Bristol-Myers Squibb Co. (NYSE:BMJ) of New York said it would conduct a comprehensive review of its business and research and development operations, and outline its strategy to improve shareholder value, increase profitability, and improve top-line growth.

The overview would provide investors with insight into how the company intends to transform itself through its productivity initiative into a next-generation biopharma company. The plan would focus the commercial and scientific units on specialty and biologic medicines, while enhancing productivity and rewarding entrepreneurship, the company said.

BMS said it plans to reallocate resources to make acquisitions, such as the recent acquisition of Adnexus Therapeutics, as well as pursue partnerships and other collaborative arrangements. The alliances would add to the company portfolio and pipeline to on growth areas, such as specialty medicines and biologics.

Senior management will examine the scope and details of its Productivity Transformation Initiative, which was begun earlier this year, the company said. Over 300 initiatives have been identified that will enhance efficiency, effectiveness and competitiveness, and cost base.

Productivity initiatives include reducing general and administrative operations by simplifying, standardizing and outsourcing, where appropriate, processes and services, rationalizing the company’s mature brands portfolio, consolidating its global manufacturing network while eliminating complexity and enhancing profitability, simplifying its geographic footprint and
(Continued to page 3)

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Clinical Trials:

AstraZeneca Completes Enrollment Of ZEST Trial In Lung Cancer

... Page 2

Deals & Collaborations:

Firms Target Adult Stem Cells

... Page 5

FDA Actions:

Cephalon's Treanda Granted Priority Review

... Page 7

Oncology Management:

Health Plans To Reward Practices Involved In ASCO's Quality Improvement Initiative

... Page 8

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Study Designed To Help Individualize CLL Treatment

(Continued from page 1)

and a primary investigator. "We chose Genzyme to perform the IgVH analysis because of its expertise in molecular testing."

IgVH is an independent prognostic marker, which can segregate all stages of CLL, the company said. Data show that CLL patients with mutations in their IgVH gene have a longer median survival—293 months, than CLL patients without the mutations—117 months. Fifty to 70 percent of CLL patients have evidence of mutations. NCCN recommends IgVH Mutation Analysis for CLL. The assay can be performed on either peripheral blood or bone marrow aspirate. Genzyme said it launched its IgVH mutation analysis test in February.

"CALGB is pleased to partner with Genzyme in this important study that will help to individualize the treatment of CLL," said Richard Schilsky, professor of medicine at the University of Chicago and chairman of the CALGB.

The CALGB study will be open to its affiliate centers in the U.S. as well as the Eastern Cooperative Oncology Group and Southwest Oncology Group.

In another development, **Genzyme Corp.** (NASDAQ:GENZ) of Cambridge, Mass., said it has completed enrollment in a phase II trial of the safety and effectiveness of Clolar (clofarabine) in untreated, older adults with acute myelogenous leukemia who are

unlikely to benefit from standard induction therapy.

Treatment consists of an induction cycle of intravenous clofarabine administered as 30mg/m² per day for five consecutive days then, based on response, receive up to five additional cycles of treatment at a dose of 20 mg/m² per day for five consecutive days, the company said.

The first stage of the trial required at least 11 responses in the first 59 patients to continue to the second stage of the study. In September, Genzyme said the number of responding patients had exceeded the requirement.

AstraZeneca (NYSE:AZN) of Wilmington, Del., said it has completed enrollment in the ZEST (Zactima Efficacy Study versus Tarceva) study, the first of four phase III trials for the oral anti-cancer drug vandetanib.

ZEST is a randomized, double-blind, multi-center 1,150 patient-study to assess the efficacy of vandetanib versus erlotinib in overall survival and progression-free survival with locally-advanced or metastatic non-small cell lung cancer after failure of first-line anti-cancer therapy, the company said.

The other studies, which are recruiting patients, are ZODIAC (vandetanib + docetaxel versus docetaxel alone); ZEAL (vandetanib + pemetrexed versus placebo + pemetrexed); and, ZEPHYR (vandetanib + best supportive care (BSC) versus placebo + BSC), the company said.

The phase III program in NSCLC follows results from two phase II trials where vandetanib was studied either alone or in combination with standard chemotherapy (docetaxel), the company said.

Vandetanib is also being evaluated as a treatment option in medullary thyroid cancer and has been awarded FDA Orphan Drug status and Fast-Track designation for the indication, the company said.

EntreMed Inc. (NASDAQ:ENMD) of Rockville, Md., said it has begun a multi-center phase II trial of MKC-1 in advanced pancreatic cancer.

The primary objectives are to determine the antitumor activity of orally-administered MKC-1 in unresectable or metastatic pancreatic cancer with at least one prior chemotherapy regimen failure, the company said.

The study will also assess the safety, tolerability and overall median survival. Massachusetts General Hospital Cancer Center is the lead institution for the study and Eunice Kwak, assistant in medicine, Tucker



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Gosnell Center for Gastrointestinal Cancers, is principal investigator, the company said.

MKC-1 is an orally-active cell cycle inhibitor with in vitro and in vivo efficacy against solid tumor cell lines, including multi-drug resistant cell lines, the company said.

Genmab A/S (OMX: GEN) of Copenhagen said it has initiated a phase I/II safety and dose finding study of HuMax-CD38 for multiple myeloma.

The 122-patient study will treat multiple myeloma that has relapsed or been refractory to at least two different treatments and has no further established treatment options, the company said.

HuMax-CD38 is a fully human antibody that targets the CD38 molecule expressed on the surface of multiple myeloma tumor cells, the company said.

Nventa Biopharmaceuticals Corp. (TSX: NVN) of San Diego said it has completed enrollment and initiated dosing of the second cohort in its phase I dose escalation trial of HspE7 for cervical dysplasia.

HspE7 is vaccine for human papillomavirus-related diseases, the company said. The cohort has received the first of three immunizations of 500 mcg of the agent with 500 mcg of adjuvant.

United Therapeutics Corp. (NASDAQ:UTHR) of Silver Spring, Md., and its wholly-owned subsidiary, Unither Pharmaceuticals Inc. said they have completed two trials of OvaRex MAb for advanced ovarian cancer.

Preliminary analysis demonstrates that the studies failed to reach statistical significance, the companies said.

The randomized, double-blind, placebo-controlled identical studies, known as IMPACT I and II, Munotherapy Pivotal ovarian Cancer Trial, enrolled 367 patients. The objective was efficacy of the mono-immunotherapy during the period following front-line carboplatin-paclitaxel based chemotherapy, the companies said. The studies demonstrated no difference between active and control populations.

The results of IMPACT I and II were consistent with each other. There were no statistically significant differences in safety profiles and the quality of life between the active and control groups, the companies said.

OvaRex MAb-B43.13 (oregovomab) is one of five investigational immunotherapeutic monoclonal antibodies, which Unither Pharmaceuticals licensed

from AltaRex Medical Corp., a wholly-owned subsidiary of ViRexx Medical Corp. Based on preliminary results from the IMPACT trials, Unither Pharmaceuticals said it would terminate the license agreement and intends to cease further development of the entire platform of antibodies.

VION Pharmaceuticals Inc. (Nasdaq Capital Market: VION) said it has begun an investigator-sponsored phase I trial of Cloretazine (VNP40101M) in combination with hematopoietic cell transplant in advanced hematologic malignancies.

The trial is being conducted by Roy Jones, professor, Department of Stem Cell Transplantation, University of Texas M.D. Anderson Cancer Center, the company said.

Trial objective is the maximum tolerated dose of Cloretazine (VNP40101M) when given to 18 to 65 year olds with poor-prognosis leukemia, lymphoma, and Hodgkin's disease who are undergoing either an allogeneic or autologous HCT, the company said.

Deals & Collaborations: **BMS Plans Overhaul To Focus On Productivity**

(Continued from page 1)

implementing a more efficient go-to-market model, the company said.

Specific productivity goals include: reducing the number of brands in the company's mature products portfolio by 60 percent between 2007 and 2011; reducing the number of manufacturing facilities by more than 50 percent by the end of 2010; and reducing total headcount by approximately 10 percent between 2007 and 2010, the company said.

Some positions have been eliminated in 2007 and the substantial majority of positions will be eliminated in 2008 and 2009, the company said.

While reducing headcount in certain functions, BMS will continue to invest in R&D, biologics and commercialization talent, the company said.

The company announced that the Board of Directors declared an 11 percent dividend increase, the first increase since 2002. The dividend increase will result in a quarterly dividend of 31 cents per share on the company's Common Stock for an indicative dividend for the full year of 2008 of \$1.24 per share, subject to the normal quarterly review by the board. The next quarterly dividend on the \$.10 par value Common Stock of the company will be payable on Feb. 1 to stockholders of

record at the close of business on Jan. 4.

The board also declared a quarterly dividend of 50 cents per share on the \$2 Convertible Preferred Stock of the corporation, payable March 3 to stockholders of record at the close of business on Feb. 8.

AEterna Zentaris Inc. (NASDAQ: AEZS; TSX: AEZ;) of Quebec City it has completed the sale of all issued and outstanding shares of its wholly-owned Salt Lake City, Utah-based subsidiary, **Echelon Biosciences Inc.**, to **Frontier Scientific Inc.**

The transaction represents \$3.2 million, including \$2.6 million upfront and payable immediately with a \$0.6 million in contingent consideration, the company said.

The companies said they address a common life sciences research customer base, which includes pharmaceutical companies and research universities. The companies said they would maintain their facilities in Logan and Salt Lake City and work toward a common senior management structure.

Abeome Corp. of Athens, Ga., and said it has entered into an agreement with **Millipore Corp.** (NYSE: MIL) for Millipore to distribute a monoclonal antibody for stem cell research.

Under the agreement, Millipore is granted an exclusive worldwide license to market and distribute the antibody for research use, the companies said. Abeome received an upfront payment and will also receive royalties on sales by Millipore.

The antibody was developed by Abeome in collaboration with Novocell Inc.

ARIUS Research Inc. (TSX: ARI) of Toronto said it has entered into a manufacturing supply and technology transfer agreement with **Avid Bioservices** for its CD44 Cancer Stem Cell antibody a cGMP manufacturing services for the biotechnology and biopharmaceutical industries provider.

Avid manufactures a supply of the drug for clinical trials, which it plans to initiate next year. ARIUS said it has scheduled a pre-IND meeting with FDA.

ARIUS said it is advancing the formal pre-clinical toxicology program for CD44 Cancer Stem Cell program, an anti-cancer antibody targeting an epitope of CD44 found in breast, colon, and prostate cancers. Pre-clinical data from a dose-ranging pilot toxicology study in non-human primate models demonstrated no dose-limiting toxic effects at doses up to 95 mg/kg and significant tumor growth inhibitory activity in in

vivo animal models of breast, prostate, liver, and AML cancers. The CD44 Cancer Stem Cell program was generated using the ARIUS proprietary FunctionFIRST technology, which selects antibodies based on their ability to kill cancer cells, the company said.

Compendia Bioscience Inc. of Ann Arbor, Mich., said it has licensed Oncomine, its compendium of oncology gene expression profiles and analysis tools, to **AstraZeneca** for cancer research programs.

The agreement gives AstraZeneca access to Oncomine Concepts Edition, a value-added product extension of Oncomine that combines 7,000 proprietary cancer gene signatures with 11,000 gene, protein, drug, and pathway signatures collected from public sources, the company said. The Concepts Map application uses gene sets as a common language to compare and link disparate biological concepts.

A study published in Nature Genetics (2007 Jan; 39(1): 41-51) used Oncomine Concepts Map to analyze prostate cancer gene expression in the context of the other gene signatures available in OCM, the company said. The result was an important new model describing the progression of prostate cancer, the company said.

Oncomine combines a compendium of 20,000+ cancer transcriptome profiles with an analysis engine and a Web application for data mining and visualization, the company said.

Exelixis Inc. (NASDAQ:EXEL) of South San Francisco said it would receive a \$5 million milestone payment from **Bristol-Myers Squibb** (NYSE: BMY) triggered by an IND application, or foreign equivalent, for a compound discovered and developed under their Liver X Receptor collaboration.

Exelixis and BMS established the collaboration in January 2006 for two years. Under the collaboration, the companies would identify drug candidates that are ready for IND-enabling studies, with BMS then undertaking further preclinical development. BMS also has responsibility for clinical development, regulatory, manufacturing and sales/marketing activities for such compounds. At time of signing, Exelixis said it received a \$17.5 million upfront payment and a commitment from BMS to provide R&D funding of \$10 million per year for the two year period.

In September, Exelixis said the collaboration had been extended through January 2009. Terms of the extension include additional research funding paid to Exelixis in the amount of \$7.5 million.

Fate Therapeutics of Seattle, announced its formation by a group of stem cell scientists from Harvard University, Stanford University, University of Washington, the Scripps Research Institute, and Massachusetts General Hospital, in partnership with investor groups.

The company plans to develop drugs to modulate adult stem cells.

“We are proving that adult stem cell proliferation and differentiation can be modulated in the human body, and we now have the ability to induce pluripotent stem cells from adult human tissue rather than relying on the use of stem cells derived from embryos,” said Ben Shapiro, retired executive vice president of Worldwide Basic Research, Merck Research Labs., and a member of the Fate Therapeutics science advisory board.

The company said it expects to have a lead adult stem cell modulating drug, in a cancer-related indication, enter the clinic in 2008.

The Fate Therapeutic platform is two-fold, the company said. It focuses on both regenerative and reprogramming medicine, the company said. The regenerative medicine platform involves developing drugs that awaken adult stem cells to repair damaged cells and tissues. The reprogramming medicine platform involves developing drugs to reprogram mature adult cells into stem cells which when differentiated can become healthy heart, bone, brain or other tissues.

Applications of the two approaches include treating the effects of neurological diseases such as Down syndrome, Alzheimer’s and Parkinson’s; healing damaged heart tissue after heart attacks; increasing bone and muscle strength in the severely frail; and protecting organs after infection or transplantation, the company said. Fate said it will also tackle cancers, such as pancreatic and colorectal cancer, by developing drugs to prevent the expansion and maturation of cancer stem cells.

Fate said it has a different approach from others working with stem cells. The company said it focuses exclusively on traditional therapeutics, namely small molecules and protein therapeutics, to direct cell fate. In addition, the work has application across all degenerative diseases, developmental disorders and cancers, and in enabling the creation of healthy patient-identical cells for transplantation.

Fate founders include researchers from multiple scientific disciplines, including basic biology, biological chemistry and translational medicine: Philip Beachy, Stanford University Institute for Stem Cell Biology and Regenerative Medicine and HHMI; Sheng Ding,

Scripps Research Institute; Randall Moon, University of Washington, director, Institute for Stem Cell and Regenerative Medicine, HHMI, and UW Department of Pharmacology; David Scadden, Harvard University, co-director and co-founder, Harvard Stem Cell Institute, director Massachusetts General Hospital Center for Regenerative Medicine, Leonard Zon, Harvard University, director, Stem Cell Program, Children’s Hospital of Boston, and HHMI.

Fate Therapeutics has additional stem cell scientists, research leaders, and drug development experts on its scientific advisory board: Robert Langer, Institute Professor of Chemical and Biomedical Engineering, Massachusetts Institute of Technology; Ram Sasisekharan, professor of biological engineering and health sciences and technology, Massachusetts Institute of Technology; Ben Shapiro, retired executive vice president of worldwide basic research, Merck Research Laboratories.

The investment team includes venture capital firms ARCH Venture Partners, Polaris Venture Partners, Venrock and OVP. The syndicate group has a combined \$7 billion under management, the company said.

Fate Therapeutics was co-founded by Alex Rives, of ARCH Venture Partners. The board of directors includes Amir Nashat, general partner, Polaris Venture Partners; Robert Nelsen, co-founder and managing director, ARCH Venture Partners; and Bryan Roberts, managing general partner, Venrock.

GlaxoSmithKline of Redwood City, Calif., and **OncoMed Pharmaceuticals** of London said they have entered into a worldwide strategic alliance to discover, develop and market antibody therapeutics to target cancer stem cells.

The alliance with GSK will be conducted through its Center of Excellence for External Drug Discovery, the companies said.

The alliance leverages the OncoMed knowledge of cancer stem cell antibody therapeutics and provides GSK with an option to license four product candidates directed at multiple cancer stem cell targets from the OncoMed library of monoclonal antibodies, the companies said. OncoMed will receive an undisclosed initial payment comprised of cash as well as an equity investment. OncoMed is eligible to earn milestone payments up to \$1.4 billion from GSK based on the achievement of specified discovery, development, regulatory and commercial milestones. OncoMed will also receive double-digit royalties on all collaboration product sales. GSK will have an option to invest in a

future initial public offering by OncoMed.

OncoMed would use its *in vivo* xenograft cancer stem cell models to identify monoclonal antibodies in a cancer stem cell pathway. Upon the OncoMed achievement of clinical proof of concept in an agreed indication, GSK will have an exclusive option to license such monoclonal antibody. GSK would then assume responsibility for funding of further clinical development and commercialization on a worldwide basis.

Caris Diagnostics of Irving, Tx, said it has entered into a definitive agreement to combine with **Molecular Profiling Institute Inc.** of Phoenix and its subsidiary, the Tissue Banking and Analysis Center Inc., to develop and commercialize molecular diagnostic tests based for genomic and proteomic profiling.

MPI is a specialty reference laboratory that applies the discoveries of the Human Genome Project to personalized medicine. The company provides testing facilities, prognostic testing services, and resources for genomic and proteomic profiling for cancer treatment.

Through its Tissue Banking and Analysis Center, MPI also has biospecimen procurement, storage, tracking, analysis, and reporting for research institutes, pharmaceutical and diagnostic companies, and medical centers, the company said.

Panacea Pharmaceuticals Inc. of Gaithersburg, Md., said it has developed PAN-622, a fully human sequence monoclonal antibody against HAAH, in collaboration with Massachusetts Institute of Technology.

PAN-622 would have fewer adverse effects compared to chimeric or humanized monoclonal antibodies, the company said. Clinical trials with the agent should begin in early 2009.

Human Aspartyl (Asparaginyl) Beta-Hydroxylase is an enzyme that modulates signaling factors such as Notch, and is over-expressed in malignant cells, the company said. When HAAH expression is silenced or its enzymatic activity is neutralized on the cell surface, the cancer cells revert to a normal phenotype.

Raven Biotechnologies Inc., of South San Francisco said **Wyeth Pharmaceuticals**, a division of Wyeth (NYSE:WYE), has exercised an option to extend its evaluation of selected Raven MAb antibodies.

As a result of the option, Raven said it would receive an undisclosed milestone payment.

The antibodies included in the agreement were discovered using Raven proprietary immunization

technology and tumor-derived stem-cell lines and were screened to select antibodies that are active alone or in a conjugated form, the company said.

Starpharma Holdings Ltd. (ASX: SPL; Pink Sheets: SPHRY) of Melbourne, Australia, said it has signed a collaborative research agreement with **Stiefel Laboratories Inc.**, to apply the Starpharma dendrimer nanotechnology to drugs used dermally.

Translational Genomics Research Institute of Sunnyvale, Calif., said it is using technology from SGI (NASDAQ:SGIC) to analyze molecular profile data sets for cancer research.

Purchased through an NIH grant, the SGI Altix 4700 assists TGen in genomic variation—a process that requires comparison searches of enormous data sets—used to individualize diagnosis and treatment.

The system will be housed at Arizona State University in Tempe with operational support provided by the ASU Fulton High Performance Computing Initiative, the company said.

Wellness Community and **Lance Armstrong Foundation** are collaborating in Live Well! Life Beyond Cancer Program that facilitates the transition for cancer survivors from active treatment to post-treatment care.

“The program provides information, skills and tools to address exercise, nutrition, emotional health, quality of life and medical management after treatment ends,” said Mitch Golant, senior vice president of The Wellness Community. “Together with the Lance Armstrong Foundation, we are poised to develop a state-of-the-art, evidence-based survivorship program that helps fill the gap between cancer treatment and life beyond cancer.”

The free program will be offered in 10 cities and will be held for two and one-half hours once a week for six weeks. For more information: <http://www.thewellnesscommunity.org/>.

In another development, the Lance Armstrong Foundation awarded \$1.5 million to community-based cancer survivorship initiatives across the country.

The grant funding includes \$1.4 million to 15 community-based non-profit organizations for cancer survivorship programs and \$162,000 to six cancer survivorship community-based participatory research projects.

ICx Technologies (NASDAQ:ICXT) of

Washington and La Jolla, Calif., a developer of advanced technology solutions for homeland security and force protection, said it is working on a research study with **Merck & Co. Inc.** and **Fred Hutchinson Cancer Research Center**.

The study would test and refine a set of protocols for detecting and recovering circulating nucleic acids from blood to support the development of an investigational cancer therapy. The study is being conducted by its La Jolla, Calif.-based Biosystems unit with participation by the Hutchinson Center, the company said.

Innovex of Bracknell, U.K., said it has entered into a services agreement with **PharmaMar**, a subsidiary of Zeltia SA, to create an oncology sales team in Western Europe to promote Yondelis, the PharmaMar treatment for soft tissue sarcoma.

PharmaMar, which holds the marketing authorization, will be responsible for marketing the drug, the company said.

Biocept of San Diego said it is initiating a collaborative study with the **University of Texas M.D. Anderson Cancer Center** to investigate the ability to isolate circulating tumor cells in blood.

The study will use the Biocept proprietary Cell Enrichment and Extraction technology, designed to capture rare cells from a larger heterogeneous cell population for treatment of ovarian cancer, the company said.

Product Approvals & Applications: **Cephalon's Treanda Granted Priority Review By FDA**

Cephalon Inc. (Nasdaq: CEPH) of Frazer, Pa., said FDA accepted and granted priority review designation to the New Drug Application for Treanda (bendamustine HCl) in chronic lymphocytic leukemia.

Cephalon said an FDA review decision would occur by the end March.

FDA granted Orphan Drug status for the drug in CLL in August 2007, which would entitle the company to a seven-year period of marketing exclusivity in the U.S. if approval is granted.

Treanda is a rationally designed purine analog/alkylator hybrid, the company said. Preclinical data demonstrate the hybrid acts in two ways to kill cancer cells: by damaging the DNA which leads to apoptosis and stops cancer cells from dividing to create new cancer cells.

The Treanda NDA for CLL is based on a large, international multi-center phase III trial that evaluated the safety and efficacy of bendamustine HCl, the active ingredient in Treanda, compared to chlorambucil in an untreated group, the company said. Chlorambucil, a chemotherapy drug, is FDA-approved as a first-line therapy for CLL. In the trial, bendamustine HCl met both primary endpoints—overall response rate and progression-free survival—and demonstrated a manageable tolerability profile. The company anticipates that results from this study will be released at the upcoming American Society of Hematology annual meeting in December 2007.

Celldex Therapeutics of Phillipsburg, N.J., said FDA has granted Orphan Drug designation to CDX-110 for EGFRvIII expressing glioblastoma multiforme.

CDX-110 is an immunotherapy that targets the tumor-specific growth promoter EGFRvIII, the company said.

Celldex also said it reached a definitive merger agreement with AVANT Immunotherapeutics Inc. (NASDAQ:AVAN) in October.

Cephalon Inc. (NASDAQ:CEPH) of Frazer, Pa., said FDA has accepted and granted priority review designation to the Treanda (bendamustine HCl) New Drug Application for the first-line treatment of chronic lymphocytic leukemia.

Treanda is a rationally designed purine analog/alkylator hybrid. The Treanda NDA is based on a multi-center phase III trial that evaluated the safety and efficacy of bendamustine HCl, the active ingredient in Treanda, compared to chlorambucil where no treatment had taken place, the company said. Bendamustine HCl met both primary endpoints—overall response rate and progression-free survival—and demonstrated a manageable tolerability profile.

Medarex Inc. (NASDAQ:MEDX) of Princeton, N.J., said it has filed the allowance of two separate investigational new drug applications with FDA for MDX-1342, one for chronic lymphocytic leukemia and the other for rheumatoid arthritis.

MDX-1342 is a fully human antibody that targets CD19, a molecule expressed on normal B-cells and malignant B-cells in diseases such as CLL, acute lymphoblastic leukemia, follicular non-Hodgkins lymphoma, diffuse large B-cell lymphoma and mantle cell lymphoma, the company said.

Oncology Management: **Health Plans To Reward Participation In QOPI**

American Society of Clinical Oncology said it is collaborating with participating health benefits companies and associations, including Aetna, Blue Cross Blue Shield Association, UnitedHealthcare, WellPoint, Wellmark Blue Cross and Blue Shield of Iowa and Wellmark Blue Cross and Blue Shield of South Dakota, to recognize physicians who participate in the ASCO Quality Oncology Practice Initiative, an oncologist-led, practice-based quality improvement program.

“It’s important for ASCO members to see that health plans across the country value their ongoing efforts to improve the care they deliver to their patients daily,” said Nancy Davidson, president of ASCO and director of the Breast Cancer Program at the Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins University. “The QOPI Health Plan Program is an important step in promoting oncologists’ commitment to quality.”

The program adds to the benefits of QOPI participation. “The QOPI primary programmatic goal is to provide a defined methodology, measures and system for quality improvement within the oncology practice,” said Joseph Simone, chairman of the ASCO QOPI Subcommittee. “Through the program, ASCO offers its members a way to self-assess and continually improve.”

Practices that devote the time and resources to abstract medical records and submit de-identified data to the central QOPI database are rewarded with detailed reports that compare their own practice with the QOPI aggregate. The reports provide the basis for data-driven improvement efforts, the group said.

For this reason, ASCO said it has promoted the use of QOPI participation and data for multiple purposes since the program’s open enrollment began in 2006, including for continuing medical education credit and the practice performance requirement for maintenance of certification by the American Board of Internal Medicine. The QOPI Health Plan Program adds value for QOPI participants by allowing recognition by health plans and seeks to reduce competing data collection programs initiated by plans.

Health plans have acknowledged the QOPI quality improvement and additional plans are expected to join the program in 2008, said ASCO. The health plans will recognize physicians that participate in the QOPI

program through a method or initiative that each deems appropriate, such as including a special designation for QOPI participants in physician directories or providing financial incentives for participating.

“Blue Cross Blue Shield Association supports collaboration with medical specialty societies that have established meaningful quality measures, and our organization believes it is important to recognize physicians who are committed to quality improvement and who participate in the QOPI program,” said Carole Redding Flamm, executive medical director for Blue Cross Blue Shield Association.

“The establishment of QOPI illustrates the important commitment that ASCO and its members have made to promote quality care for patients with cancer,” said Sam Nussbaum, executive vice president and chief medical officer of WellPoint. “Collaborations between health benefits companies and specialty societies on initiatives such as QOPI will encourage an environment that brings to patient care continuous scientific advancement in the practice of clinical oncology.”

Ultimately, “engaging physician leadership is a crucial step in improving quality of care for patients,” Simone said. “QOPI enables oncologists to set meaningful standards of quality cancer care, learn from one another, and build improvement resources. Health plan recognition of these activities will be an important force in the QOPI ongoing growth and development.”

Oncology practices seeking more information about the QOPI Health Plan Program can phone 703-519-2943 or email qopi@asco.org.

US Oncology of Houston said it has named Glen Laschober executive vice president and CEO effective Jan. 2.

“Glen’s Fortune 500 operating experience, combined with his work in large diversified healthcare organizations, greatly strengthens our existing operating team,” said Bruce Broussard, president of US Oncology. “His proven success in working with physicians and healthcare professionals, in areas such as care management programs, process efficiency and leadership development, will accelerate the implementation of our initiatives, such as Practice and Quality Efficiency and Comprehensive Disease Management, including Cancer Care Pathways.”

Laschober was CEO for Omnicare, a Fortune 500 healthcare company with revenues of \$6.5 billion, the company said. He has also been executive operating officer at CVS, Provantage, and Caremark. Laschober will be based at headquarters in Houston.