THE CANCER LETTER INTERACTIVE

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NCI To Merge Two Intramural Divisions To Form Center For Cancer Research

NCI Director Richard Klausner plans to merge the Institute's two intramural research divisions to form a single entity

The Division of Clinical Sciences and the Division of Basic Sciences—both created five years ago in a reorganization—will be folded into a new Center for Cancer Research, Klausner said to **The Cancer Letter.** Klausner was expected to announce the changes at the annual intramural principal investigators' retreat on Jan. 11.

Klausner said he plans to appoint DBS Director Carl Barrett as director of the new center. Barrett, a molecular geneticist, joined NCI nine months

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In Brief:

Rep. Regula To Lead House Labor, HHS; Specter Likely Senate Labor, HHS Chairman

107th CONGRESS: House Appropriations Committee Chairman **C.W. Bill Young** (R-FL) announced Jan. 4 that **Rep. Ralph Regula** (R-OH) will succeed retired **Rep. John Porter** (R-IL) as chairman of the Labor, Health and Human Services, Education and Related Agencies Subcommittee. Regula, second in seniority to Young on the Appropriations Committee, was chairman of the Interior Subcommittee. He has no previous experience in the areas of Labor, HHS. . . . **SEN. ARLEN SPECTER** (R-PA), who has been chairman of the Senate Labor, HHS, Education and Related Agencies subcommittee since 1994, is expected to return to that position. Specter, in a protest last fall over the budget, said he would step down from the chairmanship. However, Capitol Hill sources say he's likely to take up the post again. **Sen. Tom Harkin** (D-IA) continues as the senior Democrat on the subcommittee. Under "power sharing" rules adopted by the Senate last week, Democrats and Republicans will have equal representation on committees and subcommittees, but committee leadership will not be shared. . . . **FEDERATION OF** American Societies for Experimental Biology praised Congress and the Clinton Administration for providing a $2.523 billion budget increase for NIH, bringing the Institutes' budget to $20.313 billion, a 14.2 percent increase. "We are so grateful to the Administration and to the lawmakers who, in a bipartisan spirit, supported the third year of significant increases to the NIH's budget, continuing the momentum to double the agency's budget by 2003," said FASEB President **Mary J. C. Hendrix**. "The fact that members of both parties, both chambers and the Administration were able to come together

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Consolidation To Encourage Collaboration, Klausner Says

(Continued from page 1)

ago from the National Institute of Environmental Health Sciences.

Edison Liu, director of DCS for more than four years, has accepted an offer to become the executive director of a new genome program funded by Singapore. Liu plans to leave NCI in March (see story, page 2).

An internal committee has been studying ways to improve the Institute's intramural research program for the past six months, Klausner said. "It's a process of continuing to look at the intramural program and optimize its structure so that it is truly a great cancer research community," Klausner said to **The Cancer Letter**.

"Stimulated by Ed's decision to leave, I decided, after talking to people both inside and outside of NCI, and our Board of Scientific Counselors, to make this change that is responsive to the issues the working group is struggling with," Klausner said. "The Center for Cancer Research will not look like any particular cancer center, but this is part of a national struggle to look at the internal structure of research activities so that they are not built around silos that inhibit research and discussion across different areas."

The intramural working group, a subcommittee of the NCI Intramural Program Advisory Board, has not made formal recommendations to the Institute, Klausner said.

"These are large changes, which I think we are ready for," Klausner said to **The Cancer Letter**. "As with most changes we've made, I assume that the community will welcome it. I've discussed this with our board and other people outside the Institute, and I think there's great enthusiasm for it."

Klausner, a Presidential appointee, was required to submit his resignation to HHS for forwarding to President-elect George Bush's transition team (**The Cancer Letter**, Dec. 15, 2000, Vol. 26 No. 46).

In an interview Jan. 10, Klausner said he has not been informed whether his resignation would be accepted. "I don't think this sort of internal change within an institute is of a magnitude of issue that an Administration change attends to," Klausner said.

Clinical Sciences Director Liu To Head Singapore Program

Edison Liu, director of the NCI Division of Clinical Sciences, will leave the Institute in March to become executive director of the Singapore Genomics Program.

Liu, a medical oncologist, has led NCI's intramural clinical research division since September 1996, following a reorganization that separated the Institute's intramural research and extramural funding programs. NCI Director Richard Klausner recruited Liu from the University of North Carolina Lineberger Comprehensive Cancer Center, where was chief of medical genetics at the UNC School of Medicine and principal investigator of an NCI SPORE grant in breast cancer.

"We'll miss Ed. His opportunity in Singapore is interesting, and beautifully fits his interest in genetics, genomics, and technology," Klausner said. "We're tremendously appreciative of all he did for clinical sciences at NCI over the past four years. Ed did a tremendous amount to activate a vision of rejuvenated translational research at NCI and raise the expectations for our commitment to intramural clinical research."

Singapore plans to spend about $4 billion (U.S.) over the next four to five years on a life sciences initiative that is to include intramural genome research and a research infrastructure to encourage biotechnology firms to do business in the country, Liu said.

"This is a chance for me to return to science full-time in the context of big platform science, and

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it's a chance to make an impact in a country that wants biology to be its lifeline for the future," Liu said to **The Cancer Letter**. "To take on a more narrow bandwidth of science will be delightful, and to do it in an exotic environment is exciting. It's also a chance for me to give back to Asia, at a time when there is peace and economic opportunity."

Liu was born in Hong Kong and emigrated to the U.S. in 1957. He received a Bachelor's of Science degree (1973) and MD (1978) from Stanford University.

"The focus of our work will be initially several sectors that represent the strengths on the ground in Singapore: pharmacogenomics in the global sense, how people respond to drugs and how to map drug effects using genomic tools; molecular geneology, to take genomic techniques into large population studies; comparative genomics, looking at biological intersects between human, rodent, and fish; and finally, to use genomics in the context of cancer cell biology," Liu said. "We will center these components around the patient, to develop diagnostics and tailor therapy to define the best subgroups and optimum treatment."

Liu said plans for the Singapore Genomics Program call for recruitment over the next two years of about 200 to 250 employees. "We will be recruiting people from all over the world to make the genome program competitive," he said.

Liu said Singapore has the potential to become a leading center for life sciences. "It's the most wired country in Asia, has the highest educational standards in math and science in the world, and English is the spoken language," Liu said. "The operating practices are very consonant with Western business operations. You don't feel like you are in a foreign country.

"It's like a cross between Hawaii and San Diego, with a little more humidity.

"The population is very computer-literate and hardworking," Liu said. "If there is a problem of procurement, they take care of it, or with building codes, they take care of it. They don't expect short-term returns, understanding that advances in life sciences take time. They are without a lot of arrogance. They understand where their limitations are, and seek advice from best scientists from around the world."

The Massachusetts Institute of Technology, Johns Hopkins University, and the University of Chicago have extension campuses in Singapore, and NIH has begun a training initiative with the country, Liu said.

"Singapore scholars are sponsored to go to some of best institutions in the world," Liu said. "Many of them are going into life sciences and will return in next four to seven years, so my job is to develop the infrastructure that will be there when they return."

Database of Asian Genomic Structures

Singapore Deputy Prime Minister Tony Tan outlined the government's hope for life sciences as an engine for economic growth in an interview with Channel News Asia last summer:

"For Singapore, one possibility is to ride on the advances which are being made in Europe and in America, in the field of, for example, drug discovery, which will result from these advances in genomics. And then see whether we can play a middleman role and help to customize some of these drugs for populations in Asia.

"It is well-known for example that drugs do not have the same effect on everyone. The same drug when used on a Caucasian will have a different effect from a drug which you use on an Indian, or a Chinese or Malay.…

"The work on the Human Genome Project which has been done up to now, has been done mainly in Europe, in America. So the samples which are used are mainly Caucasians which are relevant to their own populations. That is why we are starting this Singapore Genomics Program now to try and develop a database of Asian genomic structures, to study diseases and illnesses which are more prevalent in Asia than in Europe or in America, to see how different drugs will react differently when used on Asians, as against when used on Caucasians. And if we can find a little niche there, then I think this is hopeful for Singapore, then it makes worthwhile all the resources which we are going to put into this new field."

(The full text of the interview is available at : http://www.gov.sg/sgip/intervws/0700-03.htm.)

"It's not so black-and-white," Liu said of Tan's discussion. "But there are racial differences in drug metabolism. For example, it's known that some Asians have difficulty in drinking alcohol because of a genetic defect in the aldehyde dehydrogenase gene.

"We are certainly going to try to look at diseases pertinent to Asian populations, but also what it means on the global scale," Liu said. "If you have opportunity to look at differences in different populations, you can compare to other populations and possibly identify characteristics or genes responsible for certain diseases."

Accomplishments at NCI

When Liu arrived at NCI in September 1996, he inherited an intramural clinical program that had gone through extensive reorganization and personnel changes, and more was to come.

"Only history will tell whether or not the programs we have put in place will have a lasting effect, but I think we have accomplished a lot," Liu said.

The division was formed in October 1995 to consolidate the Institute's intramural clinical programs that had been spread over four divisions. The division has more than 1,400 employees, including 100 principal investigators and 400 trainees.

Liu said a primary goal was to bring the clinical program up to national standards and make innovative changes. "We expanded the number of data managers and research nurses and empowered them to do high-level intellectual pursuits that are vital to a strong clinical research program," he said. "We were able to develop a clinical trials information system that will be the envy of all academic information systems. This is going to be a Web-based system, take trials from concept to execution all in one place, and this system is in the public domain."

Another key area was to enhance technology development, Liu said. "We developed the Advanced Technology Center, the microarray facility, the proteomics unit, the bioinformatics group, the molecular epidemiology unit, and molecular pathology with laser capture microdissection," he said. "The key is to capitalize on those technologies to enhance discovery and clinical research.

"Having these tech cores in DCS allowed us immediately to put technology to work in clinical applications. The first use of laser capture microdissection was looking at tumors of individuals with MEN lesions and identify the MEN1 gene."

A third area of change was to set new standards and operating procedures, Liu said. "Administratively, we broke down barriers, developed operating procedures to break down barriers, and made the rules obvious and transparent," he said. "The focus on excellence, with the review process and intramural research awards, could give PIs more resources. These procedures allow the best ideas to come through and be tested.

"Underpinning everything was the constant focus on quality translational science, which I define as the vectoring ideas from one discipline to another," Liu said. "Equally important is the engagement of deep science with clinical exploration. We're just seeing the fruits of that now. NCI is one of the rare places in this country with the critical mass of scientists and clinical researchers that can affect this translation.

"Lastly, we fostered the idea that one can use science not just to make peoples' health better, but to make people communicate better with each other, to use science for world peace. The Partnerships in Science Pilot Program and the Ireland-NCI initiative were examples of NCI using its moral standing and using science as a vehicle to allow what used to be antagonistic elements of society to work together. That is one reason I was so excited about the Singapore opportunity."

Liu said he plans not to lose touch with colleagues in the U.S.

"Singapore is a long way away, but the scientific community is a global community, and the only thing that keeps us apart is language, resources, and time zones," he said. "I hope I will be able to continue my interactions with colleagues at NCI and NIH. People here have the right attitude. They are in it for the science."

Division of Clinical Sciences Web site: http://www-dcs.nci.nih.gov.

NIH Programs:

Ruffin Sworn In As Director, NIH Minority Health Center

John Ruffin was sworn in as the first director of the new National Center on Minority Health and Health Disparities at NIH on Jan. 9.

The center will conduct and support research, training, dissemination of information, and other programs about minority health conditions and about populations with health disparities.

"I am delighted that Dr. Ruffin has accepted the challenge of launching this important new center," said NIH Acting Director Ruth Kirschstein. "Dr. Ruffin's activities over the last decade with NIH have been outstanding, and his interest in the study of health disparities has already led to important advances in the field."

In 1990, Ruffin was appointed as the first associate director for research on minority health at NIH.

"While the diversity of the American population is one of the nation's greatest assets, one of its greatest challenges is reducing the profound disparity in health status of America's racial and ethnic minorities,

Appalachian residents, and other similar groups, compared to the population as a whole," Ruffin said. "Although some of the causes of disparate health outcomes—such as differences in access to care—are beyond the scope of biomedical and bio-behavioral research, the NIH can play a vital role in addressing and easing health disparities involving cancer, diabetes, infant mortality, AIDS, cardiovascular illnesses, and many other diseases."

The goals of the center include the following:

—To assist in the development of an integrated national health research agenda, across disciplines, that reflects the current and emerging health needs of racial and ethnic minorities and other health disparity groups.

—To promote and facilitate the creation of a robust minority health research environment with sustained funding for a wide breadth of studies aimed at identifying potential risk factors for disparate health outcomes.

—To promote, assist, and support research capacity building activities in the minority and medically-underserved communities, focusing on research infrastructure development, faculty career development, and increasing the number of underrepresented minority students and students from health disparity groups with an interest in careers in biomedical and bio-behavioral research.

News @ Cancer.Gov:

NCI Posts Website Usability Research, Information Online

NCI has created a Web site called Usability.gov as a resource for Web site design and management.

The site is open to anyone seeking the latest news, research-based guidelines, and methods on how to design and test the usability of Web sites.

The site is http://usability.gov.

"This is the first time the entire Web design and usability package is presented on a single government site," said Susan Sieber, director of communications at NCI. "While the site is specifically designed to help NCI staff improve the way we present cancer-related information to the public and cancer researchers, we're enthusiastic about also helping others improve the way they communicate through the Web."

Research has shown that nearly 60 percent of Web users couldn't find the information they were looking for even though they were viewing a site where the information existed. The Usability.gov site can serve as a guide to building a more effective Web site through usability engineering, a discipline that involves collecting data on users needs and technical capabilities/constraints, developing and iteratively testing prototypes, evaluating design alternatives, and measuring success. The site includes methods for designing usable Web sites, usability guidelines, accessibility information, and links to other usability resources.

Usability.gov is led by NCI's Web Design and Usability Branch in the Office of Communications. "Our goal was to provide NCI with tools to develop more intuitive and responsive information products for cancer patients and health care professionals," said Janice Nall, WDUB chief. "Designers and Web site managers are now just one click away from a wealth of resources to help them create better and more efficient Web sites."

* * *

NCI has unveiled a new version of its Research Resources Web site at http://cancer.gov/resources. The site is designed to help researchers quickly find more than 100 products and services developed and available from NCI.

Resources include tissue banks, repositories of chemicals and biologicals, genomic maps, animal resources, drug molecule databases, statistics on cancer incidence, analytic software, cancer communication resources, and much more. A search engine and a listing of resources by NCI division are both available. Related links point to useful NCI and NIH Web sites. Contact information for NCI Program Directors is also listed.

An enhanced search function and a listserv to request information about new resources are also new features of the site.

National Toxicology Program:

Advisors Recommend Listing Estrogen As Carcinogen

An advisory panel recommended that steroidal estrogens be listed as a "known" cause of cancer in humans in a future Report on Carcinogens.

While panel members said these steroids have important medical uses and clear medical benefits, they have long been associated with a risk of uterine, endometrial and breast cancers.

The panel agreed 8 to 1 that the hormones cause an elevated risk and should be considered not merely as associated with increased cancers but as substances that are "known to be a cause of human cancers."

There was no suggestion by the panelists that estrogen use be restricted or eliminated.

The federal Report on Carcinogens, required by Congress, is prepared by the National Toxicology Program at the National Institute of Environmental Health Sciences. NTP sought the views of the panel of 13 outside scientists as one step in the development of the Tenth Report on Carcinogens, which will be written and published after further public comment and review.

Another medical product, the antibiotic chloramphenicol, was recommended for listing as "reasonably anticipated" to be a cause of human cancer.

The panel, a part of the National Toxicology Program Board of Scientific Counselors, made its recommendations after three days of discussions last month in Washington.

It also recommended for listing as "known" human carcinogens: common wood dust and broad spectrum ultraviolet radiation from sunlight or artificial sources.

Recommended for listing as "reasonably anticipated" to be a human carcinogen: methyleugenol, metallic nickel, and trichloroethylene.

The panel recommended, 7-3, that ordinary talc not be listed as either known to be or reasonably anticipated to be a human carcinogen. The panel reviewed a series of studies of women with ovarian cancer but was not convinced that the excess cancers could clearly be related to genital talc use.

A particular type of talc, called talc with asbestiform fibers, contains fibers that have an appearance similar to asbestos but are not truly asbestos.

The panel rejected a recommendation that these be listed as "known" human carcinogens, and split 5-5 over whether the data on lung cancers in talc miners and millers justified a listing as "reasonably anticipated to be a human carcinogen."

Funding Opportunities:

Leukemia-Lymphoma Society Translational Research

The Leukemia & Lymphoma Society provides early-stage support for clinical research on leukemia, lymphoma and myeloma, which is intended to develop innovative approaches to treatment, diagnosis or prevention.

The Translational Research Program is intended to support work that has clinical application as a near-term goal. Proposals should be based on epidemiological, molecular, cellular or integrated systems findings and be conceptually innovative.

The Translational Research Program was developed in consultation with NCI. Relevant NCI staff will be invited to participate in a review of the grantee's research at the beginning of year three of the grant.

Applications may be submitted by individuals working in domestic or foreign non-profit organizations. Applications from Society Scholars, investigators who are in an underrepresented minority, and women investigators are encouraged to apply.

Awards will be limited to a maximum of $108,000, which include direct costs and 8 percent overhead per year for three years. Renewal of funding for two additional years may be available. Requests for renewal of support require a competitive renewal application and must include an IRB-approved clinical trial as the centerpiece of the research plan.

Deadlines for Translational Research Program (New and Renewal): Preliminary Application (submitted via website): March 1. Complete application: March 15.

Application form and instructions are available at http://www.leukemia-lymphoma.org or contact:

Director of Research Administration, The Leukemia & Lymphoma Society, 1311 Mamaroneck Ave., White Plains, NY 10605, phone 914-821-8843, e-mail: researchprograms@leukemia-lymphoma.org.

RFA Available

RFA HL-01-008: Minority Undergraduate Biomedical Education Program

Letter of Intent: Feb. 21, 2001

Application Receipt Date: March 30, 2001

National Heart, Lung, and Blood Institute Office of Research on Minority Health invites applications to develop pilot demonstration programs at minority undergraduate educational institutions that will encourage the recruitment and retention of talented undergraduate students in the biomedical sciences.

Inquiries: John Fakunding, Division of Heart and Vascular Diseases, NHLBI, Rockledge Bldg, Rm 9170, Bethesda, MD 20892, phone 301-435-0544; fax 301-480-1336; e-mail Fakundij@nih.gov

Program Announcements

PA-01-042: Non-Mammalian Organisms As Models For Anticancer Drug Discovery

Letter of Intent Receipt Dates: June 4, 2001, Feb. 5, 2002

Application Receipt Dates: July 12, 2001, March 13, 2002

This PA encourages the use of non-mammalian organisms for the development of new strategies in the

prevention, early detection, and treatment of cancer and is cited in the NCI 2002 Bypass Budget (http://plan2002.cancer.gov). Projects could focus on validating inferences already drawn from comparative study of cancerous and normal cells, exploring leads from an evaluation of mutations known to be associated with cancer development, or testing hypotheses generated by the identification of new and unknown gene products, such as those sequenced through the NCI Cancer Genome Anatomy Project (http://www.ncbi.nlm.nih.gov/ncicgap). Support of this program will be through the NIH research project grant R01 mechanism and the exploratory/developmental grant R21 mechanisms.

Inquiries: George Johnson, DCTD NCI, Executive Plaza North Rm 8153, Bethesda, MD 20892-7456, phone 301-496-8783; fax 301-402-5200; e-mail johnsong@exchange.nih.gov

PA-01-032: Career Development Grants in Occupational Safety and Health Research

Application Receipt Dates: March 1, July 1, Nov. 1

National Institute for Occupational Safety and Health invites applications to identify and investigate the relationships between hazardous working conditions and associated occupational diseases and injuries; to develop more sensitive means of evaluating hazards at work sites, as well as methods for measuring early markers of adverse health effects and injuries; to develop new protective equipment, engineering control technology, and work practices to reduce the risks of occupational hazards; and to evaluate the technical feasibility or application of a new or improved occupational safety and health procedure, method, technique, or system. The non-renewable award provides support for a three-year period for individuals engaged in full-time research and related activities.

Inquiries: Roy Fleming, Research Grants Program, National Institute for Occupational Safety and Health, 1600 Clifton Rd N.E. Bldg 1, Rm 3053, MS D-30, Atlanta, GA 30333, phone 404-639-3343; fax 404-639-4616; e-mail rfleming@cdc.gov

PA-01-033: Small Grants in Occupational Safety and Health Research

The PA will use the small grant R03 award mechanism. See preceding PA for description and inquiries.

Other Funding Notices

Fundamental Technologies for Development of Biomolecular Sensors: NCI/NASA fundamental technologies for the development of biomolecular sensors program is soliciting projects to develop the fundamental elements of technology systems or system components that will measure, analyze, and manipulate molecular processes at appropriate scale in the living body.

The program will develop complete systems for the in vivo sensing of signatures of pathologic cell types or closely associated microenvironmental factors that provide a seamless interface between sensing/detection and delivery of signature-specific intervention. Both contracts and grants may be funded from this solicitation.

Further information: http://rcb.nci.nih.gov/appl/rfp/17016/Table%20of%20Contents.htm

Inquiries: Richard Hartmann, NCI Research Contracts Branch, TBSS, 6120 Executive Blvd MSC 7220, Bethesda, MD, 20892-7220, phone 301-496-8620, fax 301-402-6699; e-mail hartmari@mail.nih.gov

Institutional Development Award Program

National Center for Research Resources informs the scientific community of the inclusion of junior colleges in the request for applications issued by the NCRR entitled Biomedical Research Infrastructure Network. Applicants are directed to RFA-RR-01-005 which is available on the NCRR website: http://www.ncrr.nih.gov/resinfra/rinotice.htm. The application deadline is Jan. 23.

Inquiries: Fred Taylor, Research Infrastructure, National Center for Research Resources, 6705 Rockledge Dr, Suite 6030, Bethesda, MD, 20892; phone 301-435-0766.

Regional Seminars on Program Funding and Grants Administration: Two regional seminars covering topics related to NIH extramural program funding and grants administration have been scheduled.

The first will be held March 15-16 in Houston, Tex., co-hosted by the University of Texas MD Anderson Cancer Center, University of Texas Houston Health Science Center and University of Texas Galveston Medical Branch.

The second seminar will be offered June 7-8 in Portland, Or., hosted by Oregon Health Sciences University. Draft programs are available at http://grants.nih.gov/grants/seminars.htm.

Grant Application Instructions

Instructions for NIH grant applications are available at the following locations on the Web:

PHS 398: http://grants.nih.gov/grants/funding/phs398/section_1.html#general

PHS 416: http://grants.nih.gov/grants/funding/416/section_1.htm#general

Phase I SBIR and STTR: http://grants.nih.gov/grants/funding/sbirsttr1/4preparation.htm#4a

Phase II SBIR and STTR: http://grants.nih.gov/grants/funding/sbir2/intro.htm#prep

Questions regarding application format: http://www.format.nih.gov.

In Brief:

NAS Honors David Kessler; Satcher Seeks Obesity Plan

(Continued from page 1)

and find common ground in such difficult negotiations and under such trying circumstances is a great affirmation of their commitment to medical research." . . . **DAVID KESSLER**, dean of the Yale School of Medicine and FDA commissioner from 1990-97, was selected to receive the National Academy of Sciences' most prestigious award, the Public Welfare Medal. The Academy chose Kessler for his bold leadership in controversial public health matters, such as the drug approval process and the regulation of tobacco products. "Throughout his tenure as FDA commissioner, Dr. Kessler exhibited courage and high scientific and ethical standards, allowing him to shape the agency into what it is today," said NAS President Bruce Alberts. "Using his broad knowledge and expertise in the fields of science, medicine, law, and government, he made remarkable strides in guaranteeing the well-being of our society. His legacy as commissioner has affected the lives of all U.S. citizens." Kessler supported the identification of nicotine as the principal addictive agent in cigarettes and the claim that manufacturers were manipulating the nicotine content of tobacco products. . . . **SURGEON GENERAL David Satcher** announced a year-long effort to develop a national action plan for reducing the prevalence of overweight and obesity in the U.S. Satcher said the process would include open public comment periods, listening sessions, workshops, and the formation of working groups to implement strategies. Satcher last month held a "listening session" on overweight and obesity at NIH. A webcast of the session is accessible at: http://videocast.nih.gov/. . . . **PRESIDENT CLINTON** signed a bill Dec. 29 to create the NIH Institute of Biomedical Imaging and Bioengineering. The bill passed the Senate by voice vote on Dec. 15, and the House in October. . . . **GEORGIA CANCER ALLIANCE** was formed by the Georgia Research Alliance to build a coordinated statewide network of cancer care. The Cancer Alliance aims to compete for designation from NCI as a comprehensive cancer center. The initiative will be supported with tobacco settlement funds, state and federal funds, and is expected to cost $300 million to $400 million over five to seven years. The alliance will also seek donations from private industry and foundations. The initiative plans to recruit 150 scientists and clinicians to Georgia universities and medical centers, and support a bioinformatics program. . . . **TWO CALIFORNIA** institutions have agreed to collaborate on an integrated cancer program. The Lawrence Livermore National Laboratory and University of California, Davis, Cancer Center, agreed to collaborate in basic science and new drug development. The memorandum of understanding calls for joint leadership, including adjunct academic appointments to UC Davis. Some Lawrence Livermore scientists will be named associate directors of the cancer center or will be named principal investigators of research initiatives. **Jim Felton**, head of molecular and structural biology at Livermore, was named associate director of cancer control at the cancer center. **Dennis Matthews**, a physicist and leader of the medical technology program at Livermore, is associate director of biomedical technology. "The Lawrence Livermore affiliation will be an integral part of the cancer center's efforts to develop a program that meets the strict criteria for designation as a comprehensive cancer center from NCI," the center said. . . . **JOHN COWELL** was named chairman of the Department of Cancer Genetics at Roswell Park Cancer Institute. Cowell was director of the Center for Molecular Genetics at the Cleveland Clinic Foundation and had joint appointment at the CCF Cancer Center and Cleveland State University. . . . **LESLEYANN HAWTHORN** was appointed director of the new Affymetrix Resource at Roswell Park Cancer Institute. Hawthorn was director of the Gene Expression Core Lab at the Cleveland Clinical Foundation, Learner Research Institute. . . . **SARA COURTNEIDGE** was appointed deputy director of research and senior investigator at the Van Andel Research Institute, in Grand Rapids, Mich. She is chief scientist and senior vice president for research at Sugen. . . . **ELIN SIGURDSON** was promoted to senior member in the division of medical science at Fox Chase Cancer Center. A surgical oncologist, Sigurdson joined the center's surgical oncology department in 1992. . . . **MARY DALY**, a medical oncologist and epidemiologist, was promoted to senior member of the population science division of Fox Chase Cancer Center. She joined the center in 1989. Daly is president-elect of the American Society of Preventive Oncology. . . . **ROBERT MITCHELL** was named national vice president of income development at the American Cancer Society. Mitchell joined ACS in 1999 as national vice president of planned giving.

NCCN®

National Comprehensive Cancer Network®

City of Hope National Medical Center
Los Angeles, California

Dana-Farber Cancer Institute
Boston, Massachusetts

Fox Chase Cancer Center
Philadelphia, Pennsylvania

Johns Hopkins Oncology Center
Baltimore, Maryland

Huntsman Cancer Institute
at the University of Utah
Salt Lake City, Utah

Fred Hutchinson Cancer Research Center
Seattle, Washington

James Cancer Hospital and Solove Research Institute
at the Ohio State University
Columbus, Ohio

Robert H. Lurie Comprehensive Cancer Center
of Northwestern University
Chicago, Illinois

Memorial Sloan-Kettering Cancer Center
New York, New York

H. Lee Moffitt Cancer Center and Research Institute at the University of South Florida
Tampa, Florida

Roswell Park Cancer Institute
Buffalo, New York

St. Jude Children's Research Hospital
Memphis, Tennessee

Stanford Hospital and Clinics
Stanford, California

UCSF Medical Center
San Francisco, California

University of Alabama at Birmingham Comprehensive Cancer Center
Birmingham, Alabama

University of Michigan Comprehensive Cancer Center
Ann Arbor, Michigan

UNMC/Eppley Cancer Center at the University of Nebraska Medical Center
Omaha, Nebraska

University of Texas
M. D. Anderson Cancer Center
Houston, Texas

6TH ANNUAL CONFERENCE

February 28 – March 4, 2001

Practice Guidelines and Outcomes Data in Oncology

The Marriott Harbor Beach Resort, Fort Lauderdale, Florida

A Distinguished Array of Speakers

- Speakers will include NCCN Chairpersons and Guideline Panel Members who will update the following guidelines: Melanoma, Sarcoma, Pancreatic Cancer, Bladder Cancer, Central Nervous System (Brain Tumors), Non-Hodgkin's Lymphoma, Breast Cancer and more
- Presentations may include the new NCCN Practice Guidelines on palliative care, nutrition, and patient–physician communication

Tentative Presentations Include

- Update on the NCCN Outcomes Database
- Panel discussion on the NCCN Guidelines and Outcomes Database and their applications in the community
- Guideline-based global pricing models
- Legal issues in oncology practice
- Reimbursement, legislative, and HCFA updates
- Roundtable—Patient ownership of specimens and data: Issues in research applications
- Oncology business update

Conference Chairmen

Rodger J. Winn, MD
Chairman, Adult Guidelines Steering Committee, NCCN

William T. McGivney, PhD
Chief Executive Officer NCCN

United to Fight a Common Enemy

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NCCN® National Comprehensive Cancer Network®

6TH ANNUAL CONFERENCE · February 28 – March 4, 2001

REGISTER ONLINE AT WWW.NCCN.ORG or FAX THIS REGISTRATION FORM TO 215-413-3953

❑ Please register me for the National Comprehensive Cancer Network's Sixth Annual Conference.

Name as you would like it to appear on your badge: (Please Print)

_____

Degree(s) _____

Affiliation _____

Address _____

City _____ State _____ ZIP _____

Business Phone Number _____

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CONFERENCE REGISTRATION FEE

	Until 1/15/01	After 1/15/01
❑ Non-NCCN Member	$375	$425
❑ NCCN Member	$325	$425
❑ Federal Employee	$325	$425

(Please check one of the boxes above)

METHOD OF PAYMENT

(Registration fee and one night hotel deposit required)

❑ Check Enclosed ❑ Visa ❑ Mastercard ❑ AmEx

• If you will be sending a check, please make checks payable to **CoMed Communications, Inc.** and mail to

CoMed Communications, Inc.
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Signature (required) _____

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HOTEL RESERVATIONS

The Marriott Harbor Beach Resort, Fort Lauderdale, Florida

Reserve a ❑ Single ❑ Double room for the following nights:

❑ Wednesday, 2/28/01 ❑ Thursday, 3/1/01

❑ Friday, 3/2/01 ❑ Saturday, 3/3/01

Be sure to check the nights you will be staying.

❑ Check here if you have any special accommodation or dietary needs.

Indicate what those needs are: _____

❑ Check here if you want to be contacted regarding air fares.

Please return this form to CoMed Communications, Inc.

Fax: 215-413-3953

Phone: 215-592-1363, ext. 1441

Mail: NCCN Conference
c/o CoMed Communications, Inc.
210 West Washington Square, 8th Floor, Philadelphia, PA 19106

Or, register online at **www.nccn.org**

CONFERENCE INFORMATION

REGISTRATION

For those who register by January 15, 2001, the fee is $375, except as noted in the next paragraph. After January 15, 2001, the registration fee will be $425 for all. The registration fee includes all conference materials, breakfasts, lunches, and arrival cocktail buffet the evening of February 28. In addition, the program workbook will be supplied at the conference.

All registrants from NCCN member institutions and their satellite cancer centers are eligible for a reduced registration fee of $325 if registered no later than January 15, 2001. For federal government employees, the registration fee will be discounted to $325 if they register and pay by January 15, 2001. Registration and payment after January 15, 2001 will be $425 for all.

ACCOMMODATIONS

The conference will be held at the Marriott Harbor Beach Resort in Fort Lauderdale, Florida. A limited number of rooms at a discounted rate have been arranged for registrants of the NCCN conference.The special rate is $309 per night, single or double occupancy, plus tax. At the time of reservation, a 1-night deposit is required by a credit card as a guarantee for all reserved nights. Because space is limited at the Marriott, a block of rooms at the Sheraton Yankee Clipper and the Radisson have also been reserved for conference registrants.

Please contact CoMed Communications, Inc., the NCCN Conference Secretariat, at 215-592-1363, extension 1441. World Travel Inc., the official travel service of the NCCN Conference, will also work with federal employees to reserve rooms at nearby hotels accepting the maximum level of government housing allowance.

AIRLINE TRAVEL ARRANGEMENTS

World Travel, Inc. is the official travel agency for the NCCN Conference. Special discounts have been negotiated for conference attendees. World Travel, Inc. has the ability to search all carriers and offer a variety of discounts to ensure the lowest fare is obtained. Note: Reservations made 60 days in advance will receive additional discounts.

To take advantage of the services, discount, and low fares offered by World Travel, Inc., please call 1-800-867-2970 Monday through Friday from 8:30 AM to 5:30 PM Eastern Time. Identify yourself as an NCCN conference attendee.

CANCELLATION POLICY

HOTEL: Owing to hotel requirements for guarantees of conference space, the demand for hotel rooms, and the special discount room rate, all cancellations of rooms (whether for all nights or some nights) must be received in writing by January 31, 2001. **After January 31, 2001, you will be responsible for reserved and unused room nights.**

REGISTRATION: A substitute attendee may be sent in place of the original registrant. A $50 administration fee will be charged for all cancellations received before January 31, 2001. After January 31, 2001, the registration fee is non-refundable.

This registration may be photocopied for your colleagues.

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