

NIH Scientists Defend Industry Ties, While Officials Vow Conflicts Review

At a Senate hearing Jan. 22, four NIH scientists whose connections with pharmaceutical companies were identified by the Los Angeles Times, accused the newspaper of spreading “false innuendoes.”

Meanwhile, NIH officials acknowledged that the package of stories Dec. 7 raised important questions about conflict of interest and described their efforts to prevent and eliminate such conflicts.

The story reported that intramural scientists at NIH received six-figure consulting payments and held stock in pharmaceutical and biotechnology companies. Under NIH rules, these payments don’t always have to be

(Continued to page 2)

In Brief:

Lymphoma Research Foundation Names Hawley President; NAS Honors Scientists

WILLIAM HAWLEY was appointed president of the Lymphoma Research Foundation, effective Jan. 1. Hawley was chief of cardiac surgery and chairman of the department at INTEGRIS Baptist Medical Center. Eight years ago, Hawley was diagnosed with follicular lymphoma. “As both a patient and a physician, Hawley is uniquely qualified for this challenging and extremely rewarding job,” said **Jerry Freundlich**, former president and founder of LRF. . . . **NATIONAL ACADEMY OF SCIENCES** will honor several researchers for their scientific contributions. The awards and the recipients include: **Carlos Bustamante**, Howard Hughes Medical Institute investigator and professor of physics, University of California, Berkeley, will be presented with the Alexander Hollaender Award in Biophysics, a prize of \$20,000 awarded every three years for excellence in biophysics. Bustamante was chosen for his work in the use of atomic force microscopy and laser tweezers to study the biophysical properties of proteins, DNA, and RNA, one molecule at a time. The Jessie Stevenson Kovalenko Medal, a prize of \$25,000 awarded every three years for contributions to the medical sciences, will be presented to **Irving Weissman**, professor, departments of pathology and developmental biology, Stanford University School of Medicine. Weissman was chosen for his work in physical properties, purification, and growth regulation of multipotent hematopoietic stem cells. The NAS Award in Chemical Sciences, a medal and prize of \$15,000 awarded annually for research in the chemical sciences, will go to **Robert Parr**, Wassily Hoeffding professor of chemical physics, Department of Chemistry, University of North Carolina. Parr was chosen for his research in density

(Continued to page 8)

Capitol Hill:

Senate Approves

Spending Bill;

FASEB Urges

10% Increase

For NIH In FY 2005

. . . Page 5

Professional Societies:

Oncologists Lose

Money On Drugs

For Medicare Patients,

ASCO Survey Finds

. . . Page 5

ASCO To Form Panel

On Tobacco Use

. . . Page 6

Funding Opportunities:

NIH Pioneer Awards

To Provide \$2.5 Million

To Investigators;

NCI RFA Available

. . . Page 6

Foundation Awards

Grants For Prostate

Cancer Research

. . . Page 7

LA Times Stories Trigger Three Investigations Of NIH

(Continued from page 1)

publicly disclosed, and recusals by scientists are insufficient safeguards against conflicts of interest, the newspaper reported.

As NIH overhauls its standards for collaborations with industry, outside activities by institute and center directors "have been stopped," said NIH Director Elias Zerhouni, testifying before the Labor, HHS and Education Subcommittee of the Senate Appropriations Committee. "As of this moment, no IC director has any outside biotechnology or pharmaceutical relationship," he said at the hearing.

So far, the LA Times allegations have triggered three inquiries, including an internal probe at NIH, an investigation by the Republican members of the House Committee on Energy and Commerce, and an investigation by the General Accounting Office requested by House Democrats.

"The allegations were misleading, grossly inaccurate, and there were many, many false innuendoes in the LA Times articles," said Jeffrey Schlom, chief of the NCI Laboratory of Tumor Immunology and Biology, who was identified by the newspaper as a recipient of industry funds.

Labor, HHS appropriations subcommittee Chairman Arlen Specter (R-Penn.), ranking member Tom Harkin (D-Iowa) and the principal witness Zerhouni

were far from dismissive about the allegations.

"The issue of integrity is one of the utmost importance," Specter said at the hearing. "There has to be a thorough public hearing, and I believe there have to be some very substantial remedial steps taken to make sure that the wall of separation between public duties and private gain is maintained."

Harkin said he was concerned not only because of his advocacy for NIH, but also on behalf of the taxpayers and those who lobby for biomedical research. "NIH is the premier biomedical research agency in the world," Harkin said. "It has an unparalleled reputation for honesty and integrity. Now I will make sure it stays that way."

Zerhouni said NIH needs to allow its intramural scientists to accept outside work, but such contacts should be strictly regulated and disclosed. "I have reached the conclusion that NIH must make changes that will appropriately restrict current practices to the point where no questions will remain in anybody's mind that NIH is deserving of the trust of the Congress and has continuously made every attempt to make sure that the rules, first and foremost, serve the American people and no other interests," Zerhouni said at the hearing.

Zerhouni said he started reviewing ethics rules last July, when the House Energy and Commerce Committee raised questions about former NCI Director Richard Klausner and other NCI employees receiving monetary lecture awards. As a result, in November, Zerhouni set up a Trans-NIH Ethics Advisory Committee.

While the Klausner inquiry was limited to ethics, the LA Times story upped the ante by questioning whether arrangements between scientists and outside organizations have harmed patients and influenced administrative decisions at NIH.

"There cannot be more serious allegations against an institution," Zerhouni said. "I felt that it was imperative that NIH handle this issue as quickly, transparently and aggressively as possible. There are four fundamental tenets that we absolutely need to honor. One is full transparency. The second is full disclosure of these relationships. Independent peer review, and active management and monitoring of any and all relationships."

To address these problems, Zerhouni ordered a review of all existing outside activities by NIH employees. "Pending this review, applications to receive compensation from pharmaceutical and biotechnology companies and payments that exceed a certain threshold will be examined in the director's office by the new Ethics Advisory Committee," Zerhouni said.



Editor & Publisher: Kirsten Boyd Goldberg

Editor: Paul Goldberg

Editorial Assistant: Shelley Whitmore Wolfe

Editorial: 202-362-1809 **Fax:** 202-318-4030

PO Box 9905, Washington DC 20016

E-mail: news@cancerletter.com

Customer Service: 800-513-7042

PO Box 40724, Nashville TN 37204-0724

E-mail: info@cancerletter.com

Subscription \$315 per year worldwide. ISSN 0096-3917. Published 46 times a year by The Cancer Letter Inc. Other than "fair use" as specified by U.S. copyright law, none of the content of this publication may be reproduced, stored in a retrieval system, or transmitted in any form (electronic, photocopying, or facsimile) without prior written permission of the publisher. Violators risk criminal penalties and damages. Founded Dec. 21, 1973, by Jerry D. Boyd.

In addition to creating the committee, Zerhouni has ordered a restructuring of the NIH ethics system to tighten oversight, he said.

“My first and foremost concern as a physician was to ascertain whether any patient had been harmed, as alleged, or if decisions have been unduly influenced as a result of such outside relationships,” Zerhouni said. “I want to inform you that thus far, we have not identified any situations where patients were harmed as a result of financial arrangements NIH employees had with outside parties.”

Zerhouni said he had no plans to ban all outside collaborations by NIH employees.

“On one hand, I believe it’s essential that NIH retain the ability to recruit and retain the best scientific researchers in the world,” Zerhouni said. “In order to do that, we must be able to compete for their services. I think it’s important that our scientists be allowed in the process of translation. On the other hand, the research landscape has changed. Investments in research by pharmaceutical companies have surpassed the current budget of NIH. There are many more opportunities for NIH scientists to be asked to collaborate with the private sector.”

The NIH policies governing collaborations were adopted in 1995 to allow greater interaction between government scientists and the private sector. Separately, in subsequent years, NIH started to use the Title 42 pay system that offers more money and less stringent disclosure in exchange for lower employment security.

“The rules obligate disclosure internally, but those are not [subject to the] Freedom of Information Act,” Zerhouni said.

These rules need to be reviewed, Zerhouni said. “We need to establish rules that are specific to NIH and human subjects research,” he said. “The federal government rules at large, in my opinion, are not sufficient, and they need to be reviewed and improved.”

To accomplish this, Zerhouni has formed a task force that would be adjunct to the Advisory Committee to the NIH Director. The group would determine what types of collaborations are in the public interest and how collaborative arrangements should be reported, he said.

The new panel will be co-chaired by Bruce Alberts, president of the National Academy of Sciences, and Norman Augustine, chairman of the executive committee of Lockheed Martin. The panel was asked to complete its recommendations within 90 days.

“Our intent is to have full transparency, and one of the issues I am asking the blue ribbon panel to look at is to what extent disclosure should be made without undue stress on the system,” Zerhouni said. “Although 94 percent of our scientists do not disclose, we should remember, 3 percent of our scientists are involved in any one relationship of this kind.”

Drawing the Line

Under questioning by Specter and Harkin, Zerhouni declined to discuss the five case studies cited by the LA Times.

“This matter is under review, and if there is action to be taken, I will,” Zerhouni said. “I think we need to have appropriate due diligence.”

However, Zerhouni delineated the permitted activities from those that are—or may soon become—verboten:

--“It is a conflict when anything that a scientist does is related to his or her government work or any activities within the NIH. Those activities are forbidden. The only activities are allowed when a scientist is giving advice in an area that is of knowledge that is not part of his official duty.”

The arrangements in question are distinct from technology transfer under NIH Collaborative Research and Development Agreements. Under CRADAs, NIH selects collaborators competitively and government scientists are not compensated for their work. “However, consulting that is considered an outside activity unrelated to the scientist’s activity at NIH could be allowed,” Zerhouni said.

For example, it would be proper for an expert in human genomics and genetics to consult with a company that is working on a vaccine against mad cow disease. “We do want to translate that knowledge to a field other than the direct research of the scientist,” Zerhouni said.

--Zerhouni said he is concerned about the prospect of biotechnology companies forging business relationships with NIH scientists to claim respectability and attract capital. “That issue is going to be the core issue that I am asking the panel to review, because I do believe that there may be that perception, and that is something we have to tackle,” he said.

--“In my own experience as a dean [at Johns Hopkins University Medical School], we believe very strongly that stock ownership should be treated differently than simple compensation,” Zerhouni said.

--Research scientists should be treated differently from scientists who have administrative authority,

Zerhouni said. "Instead of having a complete one-size-fits-all rule, I think the rules have to be different from those who have authority and those who do not," he said.

Zerhouni said the existing ethics rules would likely remain in place for the duration of the review, and was unable to predict how long the rule change would take.

"I believe that the NIH ethics program has followed the principles set forth by the Executive Branch Office of Government Ethics, as they have evolved over the past 25 years," said Ruth Kirschstein, a special advisor to Zerhouni, who served as an NIH Deputy Ethics Counselor from 1993 to 2003. "But I also believe that, like all activities, there is a need for greater oversight of the entire NIH program, and that there is room for improvement."

Bashing LA Times

Sen. Ted Stevens (R-Alaska), chairman of the Appropriations Committee, diverted the blame for the controversy onto the LA Times.

"I am disturbed that someone would characterize the very existence of contractual relationships between NIH researchers and biotech companies as somehow unethical," said Stevens, the subject of a recent LA Times investigation. "As I understand it, researchers at NIH received clearance from their superiors who followed the agency procedure... I don't think the newspaper industry has transparency. I don't think they disclose their collaboration and all of their contracts. We couldn't mandate that because of the First Amendment."

Originally, two of the NIH researchers mentioned by the LA Times were asked to testify: Steven Katz, director of the National Institute of Arthritis and Musculoskeletal and Skin Disease, and John Gallin, director of the NIH Clinical Center. However, Schlom and Ronald Germain, head of the Laboratory of Immunology, were invited the day before the hearing, and submitted their statements for the record.

Katz said he had consulted with Schering AG, after which he recused himself from that company's business. However, with NIH having no mechanism to identify subsidiaries of pharmaceutical companies, he became involved in a study of a drug sponsored by Schering's U.S. subsidiary Berlex.

"In my three brief contacts with this trial, I was unaware that it bore any relationship to a company with which I was consulting," Katz said in submitted remarks.

Clinical Center Director Gallin said he, too,

was unaware of corporate lineage when he joined the scientific advisory board of Abgenix Inc.

In 1995, he used a vector produced by Somatix Therapy Corp. Two years later, Somatix was acquired by Cell Genesis, and later that year, Gallin became an advisor to Cell Genesis spin-off Abgenix Inc.

"At the time I was asked to consult for Abgenix Inc., I was not aware that there was some degree of ownership by Cell Genesis," Gallin said in submitted testimony. "But, I should note... that [Somatix] and [Cell Genesis] were not affiliated at any time during our gene therapy study. Therefore, there was no conflict between my consulting work for [Abgenix] and the clinical study that my laboratory did with [Somatix]."

Responding to a question from Specter, Gallin addressed the LA Times allegation that for two years he owned Abgenix stock, failing to disclose it.

"The failure to disclose it was an error," Gallin said at the hearing. "The stock was purchased for my wife through a separate management account that was managed by a financial advisor, who bought and sold stocks in her name. I didn't realize back in 1999 that this stock was in her portfolio. When it became clear to me that it was in her portfolio, I disclosed it. That was in 2001. That was an error, and I totally apologize for it."

NCI scientist Schlom said his consulting "doesn't interfere or overlap in any way" with his work at NIH.

"I do not disclose to the organization any work or data conducted in my laboratory until it has been public for one year," Schlom said. "And the industrial organization has no interest in any of the work I've ever done. And my laboratory has never worked on any agents developed by any organization that I've consulted with. Perhaps I shouldn't say this, but I'll say it anyway. Perhaps we shouldn't believe everything we read in the newspapers."

A review of Schlom's income disclosure reports by the LA Times showed that he has done outside work for 20 biomedical companies over a decade.

House Democrats Direct GAO Investigation

It is unlikely that the Senate hearing will preempt the investigations of NIH, Capitol Hill sources said.

Several House Democrats last week directed GAO to investigate conflicts of interest at NIH. A Jan. 16 letter to GAO, signed by Reps. Henry Waxman (D-Calif.), John Dingell (D-Mich.) and Sherrod Brown (D-Ohio), asked the investigative agency to review consulting activities by NIH scientists.

The GAO probe would be less broad than the investigation conducted by the Republicans on the House Committee on Energy and Commerce.

In addition to following up on the LA Times story, the Energy and Commerce Republicans are investigating former NCI Director Klausner.

In correspondence related to the Klausner probe, the committee recently asked for documents related to the former director's acceptance of honoraria, travel arrangements, and potential conflicts involving a \$40 million contract to Harvard University, where he sought the president's position. Klausner is an official at the Bill and Melinda Gates Foundation.

The launch of these two investigations is indicative of partisan discord on Capitol Hill, which insiders attribute to the aftermath of discord over Medicare reform.

The NCI Spin?

NCI last week offered an interpretation of the ethics controversy.

A new weekly "newsletter" called NCI Cancer Bulletin, which features the views of Institute Director Andrew von Eschenbach, said that the Institute has a "long-standing comprehensive ethics program in place that strictly adheres to the federal regulations and statutes that set the standard for ethical conduct in government."

The newsletter's Jan. 13 issue appears to address all Congressional inquiries, including the probe of acceptance of honoraria and travel arrangements by von Eschenbach's predecessor Klausner.

"All [CRADAs], sponsored travel, and outside activities, along with confidential and public disclosure reports are reviewed by NCI's Ethics Office," the newsletter said in a lead article. "CRADAs are reviewed to ensure fair access and that no conflict of interest exists for NCI employees involved in the project.

"Outside activities, such as consultancies, are scrutinized by the Ethics Office to identify real and apparent conflicts of interest and for ways in which the activity could impact the employee's official duties and workload at NCI. All identified real or apparent conflicts of interest are addressed by the institute on a case by case basis. Additionally, official duty activities with outside organizations are examined to ensure consistency with the NCI mission as well as laws and regulations."

In the same issue, a story titled "Special Report" featured Schlom's Center for Cancer Research Grand Rounds lecture on cancer vaccines, and his photograph.

Capitol Hill:

Senate Approves Omnibus Spending Bill For FY 2004

The Senate on Jan. 22 approved an \$820 billion omnibus appropriations bill for fiscal year 2004, on a 65-28 vote.

The bill includes \$4.771 billion for NCI, an increase of 3.9 percent, or \$178 million, over last year. However, provisions in the omnibus bill would cut \$28 million from the NCI increase.

President Bush is expected to send his fiscal 2005 budget request to Congress on Feb. 2.

In a related development, the Federation of American Societies for Experimental Biology last week recommended that Congress increase the appropriations for NIH to \$30.6 billion in fiscal 2005, a 10 percent boost over the House version of the spending bill for the current year.

The Administration's budget proposal for fiscal 2005 is expected to propose a 2.5 percent increase for NIH.

The report, titled "Federal Funding for Biomedical and Related Life Science research, FY 2005," projects that the Administration proposal would force NIH to fund 1,000 fewer grants than in fiscal 2004, cutting new research opportunities by almost 10 percent.

"The recent doubling of the NIH budget provided the commitment to research funding that is needed to attract the best and the brightest minds to pursue careers in biomedical research," the report states. "These new investigators are just now in a position to make the contributions for which they have been extensively prepared. It is certain that inconsistent funding sends a chilling message to young scientists in training and those entering the research field."

Addressing cancer, the report emphasized the need for "new strategies targeting cancer cells and modifying the tumor microenvironment."

The report is available at www.faseb.org/opa

Professional Societies:

ASCO: Docs Lose On Drugs For Medicare Patients

A survey by the American Society of Clinical Oncology found that oncologists are taking a loss on the purchase of many drugs they administer to Medicare patients in the office setting.

"As you can see from the data, there are many drugs for which the Medicare payment does not appear

to cover the price paid by at least some physicians,” states ASCO’s Jan. 16 letter to CMS. “For some drugs, the data indicate that the drug is widely unavailable for the Medicare payment amount. For other drugs, it appears that some but not all physicians pay more than the Medicare payment amount.”

The letter was signed by ASCO President Margaret Tempero and John Keech, chairman of the society’s Clinical Practice Committee.

The society based its submission on the data from 58 practices that reported the prices they paid to acquire at least some of the drugs they administer. For one drug—Gemcitabine HCl, the data included prices paid by as many as 44 practices. Medicare paid \$101.90 for 200 mg of the drug which the practices obtained for no less than \$103.72. The highest price paid, \$136.30, was reported by a single-physician practice.

Eli Lilly, the sponsor of Gemcitabine, trade name Gemzar, recently rolled back recent price increases, dropping the drug’s price by 7 percent, to \$101.90, exactly the price paid by Medicare. Industry sources had no information about price drops on other drugs.

Gemzar’s “average wholesale price” is \$127.38. Congress last year decreased reimbursement for drugs administered by oncologists from 95 percent of AWP to no more than 85 percent of AWP. In 2004 and 2005, oncologists would get a \$380 million increase for office expenses, but that adjustment would drop to \$340 in subsequent years. Also, starting in 2005, reimbursement will be set at the “average sales price” plus 6 percent.

The highlights of the ASCO survey follow:

--GCSF (300 mcg) is reimbursed at \$158.50. Prices paid by nine practices range from \$158.56 to \$164.90.

--Carboplatin (50 mg) is reimbursed at \$126.83. Prices paid by 30 practices range from \$127.79 to \$141.

--Epirubicin HCl is reimbursed at \$618.26. Prices paid by 12 practices range from \$620.20 to \$655.83.

--Goserelin acetate implant (per 3.6 mg) is reimbursed at \$375.99. Prices paid by 10 oncologists range from \$382.95 to \$418.50.

--Irinotecan (20 mg) is reimbursed at \$122.73. Prices paid by 41 practices range from \$125.64 to \$321.85.

--Leuprolide acetate for depot suspension (7.5 mg) is reimbursed at \$500.58. Prices paid range from \$517.30 to \$590.50.

--Vinorelbine tartrate (10 mg) is reimbursed at \$76.90. Prices paid by 14 practices range from \$81.94 to \$97.75.

--Fulversant injection (25 mg) is reimbursed at \$78.36. Prices paid range from \$79.25 to \$400.48 for 50 mg.

ASCO Forms Commission To Reduce Tobacco Use

The American Society of Clinical Oncology is forming an independent commission to study the problem of tobacco, the professional society said earlier this week.

Following the 40th anniversary of the first Surgeon General’s report on the dangers of smoking, the society also is calling for renewed efforts to promote activities and initiatives to eradicate smoking worldwide.

“For 40 years, science has been able to demonstrate the devastating impact tobacco use has on individuals, health and well being,” said Paul Bunn Jr., a lung cancer expert, director of the University of Colorado Cancer Center, and past ASCO president. “As the leading professional organization of cancer physicians, ASCO continues to work in the forefront of efforts to eliminate smoking across the world.”

Last year, ASCO developed a tobacco policy statement that calls for a comprehensive, science-based effort to address all elements of the tobacco problem.

The commission will be made up of representatives from government, educational and scientific organizations, advocacy groups, and the private sector, ASCO said. Among the specific issues the commission will address are: identifying appropriate schemes for regulating tobacco products, determining what agencies in the federal government should take charge of tobacco control, and figuring out what scientific and medical research is required to better understand tobacco addiction.

If current trends continue, according to the World Health Organization and the World Bank, the global death toll from tobacco will grow to 10 million annually by 2030, with about half of these deaths in people aged 35 to 69. By 2030, developing countries will account for 70 percent of all tobacco deaths.

Funding Opportunities:

NIH Invites Nominations For “Pioneer Awards”

NIH is inviting nominations for the NIH Director’s Pioneer Award Program, a new grants program that is included in the NIH Roadmap for Medical Research.

The awards will provide up to \$500,000 per year for five years to “a highly select group of individuals who

have the potential to make extraordinary contributions to medical research," NIH said. NIH expects the award to encourage investigators in the biomedical, behavioral and social sciences, physical and chemical sciences, computer sciences, mathematics and engineering to take on creative, unexplored avenues of research related to the improvement of human health.

"The face of biomedical research is changing," NIH Director Elias Zerhouni said. "To keep pace, we must cross the traditional disciplinary boundaries of science and medicine to bring forward new conceptual frameworks and methodologies that will speed scientific discovery and improve health."

NIH traditionally awards grants to support research projects. The new award will support individual scientists with pioneering ideas and approaches. NIH said it will give the awardees "intellectual freedom to pursue their ideas and follow them in expected or even unexpected directions."

"Historically, leaps in knowledge have frequently resulted from exceptional minds willing and able to explore ideas that were considered risky at their inception," Zerhouni said. "We're seeking truly visionary thinkers who are able to make those leaps and change the current paradigms of medical research."

Nominations will be accepted from March 1 through midnight April 1, Eastern time. Further information: www.nihroadmap.nih.gov/highrisk/initiatives/pioneer.

RFA Available

RFA-CA-05-001: National Cooperative Drug Discovery Groups for Cancer

Letter of Intent Receipt Date: April 19, 2004

Application Receipt Date: May 19, 2004

Developmental Therapeutics Program, NCI Division of Cancer Treatment and Diagnosis, invites applications to continue the National Cooperative Drug Discovery Group Program for the discovery of anticancer treatments. The program will further the NIH Roadmap Initiatives (<http://nihroadmap.nih.gov>) and the NCI goal of eliminating the suffering and death due to cancer by the year 2015.

The RFA will support multi-project approaches to rationally based or natural-source derived anticancer treatments or strategies. The initiative provides a framework for interactions that will reduce the time from concept to product. A multi-institutional, public-private partnership approach involving academic, nonprofit, and/or commercial/industrial institutions with government staff participation is envisioned. Although not required, the active participation of industry is encouraged because it will allow this segment of the scientific community to contribute its intellectual and material resources. Research objectives include: using

discoveries in molecular biology, cell biology, chemistry and related fields, together with major technological advances, to design highly selective and specific approaches to cancer therapies. The RFA, which is available at <http://grants2.nih.gov/grants/guide/rfa-files/RFA-CA-05-001.html>, will use the NIH cooperative agreement U19 award mechanism.

Inquiries: Mary Wolpert, Division of Cancer Treatment and Diagnosis, NCI, 6130 Executive Blvd., EPN Rm 8153, MSC 7456, Bethesda, MD 20892-7456, Rockville, MD 20852 (for express/courier service), phone 301-496-8783; fax 301-402-5200; e-mail wolpertm@exchange.nih.gov.

Prostate Cancer Foundation Awards \$3.375 Million

The Prostate Cancer Foundation announced the 37 recipients of its 2003 Competitive Research Awards in areas including genomics, molecular biology, angiogenesis, signal transduction, experimental models, apoptosis, new drug discovery, nutrition, alternative therapies, and clinical medicine. The awards, which total \$3.375 million, focus on projects with direct clinical treatment application or where results would soon lead to a treatment-enabling outcome.

The recipients are: **David Agus**, Cedars-Sinai, Prostate Cancer Center; **David Berman**, Johns Hopkins University; **Michael Carducci**, Johns Hopkins; **June Chan**, University of California, San Francisco; **Gerhard Coetzee**, University of Southern California; **Colin Collins**, UCSF; **Marc Diamond**, UCSF; **Phillip Febbo**, Dana-Farber Cancer Institute; **Robert Fletterick**, UCSF; **Martin Gleave**, Vancouver General Hospital; **Theresa Guise**, University of Virginia; **Rodney Guy**, UCSF; **Susan Halabi**, Duke University Medical Center; **John Isaacs**, Johns Hopkins; **David Jarrard**, University of Wisconsin; **Richard Junghans**, Beth Israel Deaconess Medical Center; **Philip Kantoff**, DFCI; **Andrew Kraft**, University of Colorado; **Sue-Hwa Lin**, M.D. Anderson Cancer Center; **Massimo Loda**, DFCI; **Jeffrey Milbrandt**, Washington University; **Peter Nelson**, Fred Hutchinson Cancer Research Center; **William Nelson**, Johns Hopkins; **Kenneth Pienta**, University of Michigan; **John Reed**, Burnham Institute; **Neal Rosen**, Memorial Sloan-Kettering Cancer Center; **Michael Rosenfeld**, University of California, San Diego; **Charles Sawyers**, University of California, Los Angeles; **Howard Scher**, MSKCC; **William Sellers**, DFCI; **David Solit**, MSKCC; **Terry Van Dyke**, University of North Carolina at Chapel Hill; **Bingcheng Wang**, Case Western Reserve University; **Shaomeng Wang**, University of Michigan; **George Wilding**, University of Wisconsin; **Owen Witte**, UCLA; **Hong Wu**, UCLA.

In Brief:

Patrick Hwu Leads Melanoma Department At M.D. Anderson

(Continued from page 1)

functional theory in chemistry and for quantum chemical calculations. The NAS Award in Molecular Biology, a prize of \$25,000 awarded annually for discovery in molecular biology by a young scientist, will be presented to **Xiaodong Wang**, Howard Hughes Medical Institute investigator, George L. MacGregor Distinguished Chair, and professor, Department of biochemistry, University of Texas Southwestern Medical Center at Dallas. Wang was chosen for biochemical studies of apoptosis. **Brenda Milner**, Dorothy J. Killam Professor, Montreal Neurological Institute, and professor, Department of Neurology and Neurosurgery, Faculty of Medicine, McGill University, will be presented with the NAS Award in the Neurosciences, a prize of \$25,000 awarded every three years for contributions to neuroscience. She was chosen for her work in the temporal lobes and other brain regions in learning, memory, and speech. The awards will be presented April 19 at the annual meeting of the academy in Washington, D.C. . . . **PATRICK HWU** was named chairman of the Melanoma Medical

Oncology department at M. D. Anderson Cancer Center. Hwu, a professor of medicine, was a senior investigator at NCI from 1993 to 2003, and a clinical associate of medical oncology and immunotherapy from 1989 to 1993. In 2002, Hwu received both the NCI Center for Cancer Research Federal Technology Transfer Award and the Performance Award from the NCI Surgery Branch. . . . **AMERICAN SOCIETY of Clinical Oncology** released *Advanced Lung Cancer Treatment*, an updated evidence-based patient guide, which is the patient version of the ASCO clinical practice guideline for unresectable non-small cell lung. The 13-page guide is available at www.plwc.org. "This guide will help people living with lung cancer understand the diagnostic tests used to stage their cancer, assist them in making informed decisions about their treatment options, and provide guidance for their follow-up care," said **David Pfister**, co-chairman of the ASCO panel that wrote the guide. . . . **TIMOTHY CONDON** was named deputy director of the National Institute on Drug Abuse, said NIDA Director **Nora Volkow**. He will continue as director of the NIDA Office of Science Policy and Communications, a position he has held since 1996. Condon will take over for **Richard Millstein**, who is acting deputy director, Fogarty International Center.

NCCN

National
Comprehensive
Cancer
Network®

9th Annual Conference: **Clinical Practice Guidelines & Outcomes Data in Oncology™**

March 10-14, 2004
The Westin Diplomat Resort & Spa
Hollywood, Florida

Program Chairs:
William T. McGivney, PhD,
Chief Executive Officer, NCCN

Rodger J. Winn, MD,
Guidelines Steering Committee Chair, NCCN

The National Comprehensive Cancer Network (NCCN), an alliance of 19 of the world's leading cancer centers, is an authoritative source of information to help patients and health professionals make informed decisions about cancer care. Through the collective expertise of its member institutions, the NCCN develops, updates, and disseminates a complete library of clinical practice guidelines. These guidelines are the standard for clinical policy in oncology. The NCCN's complete spectrum of programs emphasizes improving the quality, effectiveness, and efficiency of oncology practice.

The Guidelines updates to be presented may include:

- Antiemesis
- Breast Cancer
- Cervical and Endometrial Cancers
- Chronic Myelogenous Leukemia
- Non-Hodgkin's Lymphoma
- Melanoma
- Non-Small Cell Lung Cancer
- Prostate Cancer Early Detection

**To attend or sponsor, visit www.nccn.org
or call 866-788-NCCN (6226).**

Copying Policy for The Cancer Letter Interactive

The software that comes with your issue allows you to make a printout, intended for your own personal use. Because we cannot control what you do with the printout, we would like to remind you that routine cover-to-cover photocopying of The Cancer Letter Interactive is theft of intellectual property and is a crime under U.S. and international law.

Here are guidelines we advise our subscribers to follow regarding photocopying or distribution of the copyrighted material in The Cancer Letter Inc. publications in compliance with the U.S. Copyright Act:

What you can do:

- Route the printout of the newsletter to anyone in your office.
- Copy, on an occasional basis, a single story or article and send it to colleagues.
- Consider purchasing multiple subscriptions. Contact us for information on multiple subscription discounts.

What you can't do without prior permission:

- Make copies of an entire issue of the newsletter. The law forbids cover-to-cover photocopying.
- Routinely copy and distribute portions of the newsletter.
- Republish or repackage the contents of the newsletter.

We can provide reprints for nominal fees. If you have any questions or comments regarding photocopying, please contact Publisher Kirsten Boyd Goldberg, phone: 202-362-1809, email: kirsten@cancerletter.com

We welcome the opportunity to speak to you regarding your information needs.