

Ethics Rules Slammed By NIH Scientists, Institute Directors, Societies, Senators

By Paul Goldberg

Two months after HHS established new ethics rules for NIH, Director Elias Zerhouni finds himself under fire from institute directors, intramural researchers, scientific societies, Senate appropriators, and the press.

The Assembly of Scientists, a group of NIH researchers, asked the U.S. Court of Appeals for the District of Columbia to review the ethics regulations. The "petition to review" an agency rule, which is procedurally equivalent to an appeal of a District Court ruling, was filed on April 4. Petitions seeking review of agency rules are usually decided based on filings and arguments
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In Brief:

Dana-Farber Scientist Stanley Korsmeyer, Discovered Role Of BCL-2 Gene, Dead At 54

STANLEY KORSMEYER, a scientific leader at Dana-Farber Cancer Institute whose landmark discoveries about why cancer cells survive opened a promising new avenue for cancer treatment, died March 31, of lung cancer. He was 54 and a nonsmoker. Korsmeyer demonstrated in the 1980s that a particular form of blood cancer arose because a genetic flaw allowed the cells to survive the body's normal process for getting rid of them, "programmed" cell death, or apoptosis. The abnormal gene that blocked apoptosis, Bcl-2, thus became the first of a new class of cancer-causing oncogenes, and Korsmeyer was credited with spearheading the study of apoptosis in cancer causation. "Stan Korsmeyer's scientific prowess placed him among the top cancer researchers in the country, while his commitment to the broader mission of the school made him a pillar of the Harvard medical community. He was a loyal friend and a valued colleague, his loss will be deeply felt," said Harvard Medical School Dean **Joseph Martin**. Korsmeyer joined Dana-Farber in 1998, recruited from Washington University in St. Louis where he was director of the Division of Molecular Oncology and Professor of Medicine. At Dana-Farber, Korsmeyer headed the Program in Molecular Oncology in the Department of Cancer Immunology and AIDS. He was the Sidney Farber Professor of Pathology and Professor of Medicine at Harvard Medical School. As chairman of the Executive Committee on Research, Korsmeyer helped shape the institute's strategic plan for cancer research, which emphasizes collaboration among researchers within and outside of Dana-Farber and use of advanced tools for discovering new drug candidates. Korsmeyer was a Howard Hughes Medical Institute investigator for 19 years and received
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NCI Director Says Ethics Rules Hurt Retention, Recruitment

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before a panel of three judges.

In a separate filing, submitted to NIH, the group of scientists challenged the rule on procedural and Constitutional grounds.

The court challenge, handled by the Washington law firm of Arent Fox, is financed through contributions of \$250 each from NIH scientists, said Ezekiel Emanuel, chairman of the Assembly.

On April 6, the NIH rule was attacked by Sens. Arlen Specter (R-Pa.) and Tom Harkin (D-Iowa), the chairman and ranking member of the Subcommittee on Labor, HHS and Education of the Senate Appropriations Committee.

"You're doing a great job leading the institution, but I must chastise you," Harkin said to Zerhouni at the hearing. "These [rules] are too onerous. They've got to be redone. And they've got to be redone soon before you start losing people."

Zerhouni's answer suggests that he is wavering on the rules.

"I have to say that I am as concerned as you are," Zerhouni said. "The philosophy of the interim regulation is, in my view, one that would be more appropriate for a regulatory agency."

Earlier, NIH exempted the 5,000 trainees from the requirement that they sell stocks of biotechnology

and pharmaceutical companies. Also, the deadline for NIH employees to sell stock was moved up by three months.

Statements by Harkin and Specter in effect pry open doors for negotiations between Zerhouni and the NIH scientists.

"We've met with Dr. Zerhouni in the past, and at each of these meetings he says he wants to work with the Assembly of Scientists to get the conflict of interest issue right," said Emanuel, an oncologist and chairman of the Department of Clinical Bioethics at the NIH Warren G. Magnuson Clinical Center. "Now that Specter and Harkin have said that the conflict of interest regulations are going to have to be revised, we look forward to working closely with Dr. Zerhouni in a very collaborative manner to implement stringent rules that are also good for recruiting, promoting and retaining scientists at NIH."

Generally, intramural scientists agree that clear, enforceable ethics rules are needed to prevent abuses that occurred in the past. Critics of the new regulations generally support the recommendations of a "Blue Ribbon Panel," convened by Zerhouni after the conflict of interest issues surfaced in a series of investigative stories in the Los Angeles Times in December 2003.

The panel's recommendations stopped short of calling for a complete ban on consulting for pharmaceutical companies by intramural scientists, an approach that also reflected Zerhouni's view at the time. However, after reviewing the case of NCI scientist Lance Liotta and collaborator Emanuel Petricoin, Zerhouni set aside the recommendations of the panel and came out in support of a complete ban.

An investigation by the Oversight and Investigations Subcommittee of the House Committee on Energy and Commerce showed that Liotta supervised an NCI research collaboration for a proteomics firm while consulting for its competitor.

It is unclear whether the requirement that NIH employees divest biotech and pharma stocks came from Zerhouni or HHS.

Whatever its origin, the stock divestiture requirement is generating adverse publicity and political heat for NIH. Last week, The Washington Post reported that James Battey, head of the National Institute on Deafness and Other Communication Disorders, said he intended to leave NIH. Battey's announcement quickly came to symbolize the unintended heavy-handedness of the rule.

"I manage a family trust, on behalf of my mother and father," Battey said at the Senate appropriations



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Founded Dec. 21, 1973, by Jerry D. Boyd.

hearing. “It’s their sole source of income. That is a responsibility that I must put before even the greatest job in the world.”

Also at the appropriations hearing, Battey said the controversy over ethics rules is hurting recruiting at NIH. “I know of cases where individuals elected not to even send in an application for a job, and are considering seriously, like I am, leaving over the conflict of interest rules that have been proposed,” he said.

Battey said he would consider staying if the rules are changed. “There are a set of circumstances under which I would entertain remaining with the National Institutes of Health,” he said. “As I said before, I love this job, I think it’s the greatest job in the world.”

NCI Director Cites Liotta’s Departure

NCI Director Andrew von Eschenbach said the rules have been detrimental to the Institute.

“A leading NCI scientist in the field of proteomics recently resigned,” von Eschenbach wrote, responding to a series of questions from Specter.

This reference to Liotta’s resignation indicates von Eschenbach’s regret about the scientist’s recently announced decision to leave NCI for George Mason University. According to the LA Times, Liotta’s case has been referred to the HHS Office of the Inspector General.

NCI’s efforts to start an \$89 million proteomics program based in part on Liotta’s work was recently voted down by the Board of Scientific Advisors, which noted that the science was too tentative to justify a major expenditure (The Cancer Letter, March 11).

“This climate also presents serious challenges to recruiting for some of our most important leadership positions,” von Eschenbach wrote in the April 4 letter to Specter. “Two distinguished leaders in cancer treatment and diagnosis declined job offers, due, in part, to these regulations. We know of four others who have indicated the possibility of resigning.

“These regulations are making it more difficult to recruit the best and brightest young scientists, particularly those rare individuals who seek to blend clinical expertise with basic science training,” von Eschenbach wrote.

Confusion about the conflict of interest rules isn’t helping Zerhouni’s cause.

Earlier this week, a guidance emailed to the staff of the National Institute of Craniofacial Research instructed that papers would have to be filed for outside activities “even if it seems obvious that they in no way impinge on your duties as a public servant.”

The guidance, which was promptly disavowed by top NIH officials, ended up in the lead editorial in The Washington Post. “The NIH ethics rules needed to be tightened, especially in light of reports involving possible conflicts of interest by government researchers who are engaged in lucrative outside consulting work,” the Post said in the editorial April 6. “But the new rules represent an ultimately self-defeating overreaction.”

A Potential Legal Challenge

The Assembly of Scientists’ comments on the ethics rule likely offer a preview of the arguments the group could make if it proceeds with a court challenge.

“We do not want to go forward with a legal challenge unless there is no progress in negotiations,” Emanuel said.

The group’s 12-page comment, which is expected to be posted at <http://homepage.mac.com/assemblyofscientists/Personal1.html>, argues that HHS acted improperly when it claimed that the rules were not subject to requirements of prior notice and public comment.

Though the “interim final rule” became effective immediately upon publication on Feb. 4, comments were accepted until April 4. After reviewing the comments, the agency will issue the final rule.

HHS claims that the ethics regulations are exempt from the notice and comment requirements because they affect only the agency and don’t involve “third parties” outside NIH.

“Little explanation is provided as to why ... these exceptions should apply,” the Assembly states. “The NIH Ethics Rule imposes more extensive regulation on NIH employees previously subject to ethics regulations as well as NIH employees who were never previously to ethics regulations. [The rule] reaches beyond NIH employees by announcing sweeping restrictions on spouses and children of NIH employees—even employees previously not subject to regulation. In these circumstances, the rule cannot escape the requirement of notice and comment rulemaking as a mere rule of agency procedure.”

The Assembly claims that in addition to NIH employees and their family members, the rule affects the entities for which the scientists used to consult. These include biotechnology and pharmaceutical companies, medical device manufacturers, health insurers, health care providers, professional societies, and advocacy groups.

“Even if these were a mere rule of agency practice or procedure, the impact is such that notice and comment

rulemaking was required,” the Assembly document states.

Further, HHS claimed that action was urgent, because “further process would not contribute substantially to the development of the regulation when balanced against the harm that may result from further delay and uncertainty.”

This is not convincing, the Assembly argues. “The NIH has had a record of accomplishment and integrity for more than seven decades,” the group’s comment states. “Surely a few months of notice and comment will not reverse seven decades of achievement. The NIH’s reputation is not nearly so fragile.”

The Assembly claims that in addition to these procedural problems, the rules violate the free speech and due process rights of NIH employees.

According to the Assembly, “the NIH Ethics Rule is remarkably and inappropriately overbroad because, without reference to the job held by the particular NIH employee being regulated, the rule prohibits all employees from: (1) employment with a substantially affected organization, a supported research institution, a health care provider or insurer, or a related trade professional or similar association; (2) teaching, speaking, writing or editing for compensation for any of these entities; and (3) engaging in a self-employed business that involves the sale or promotion of products or services to any of these entities.

“This wide-ranging prohibition captures many activities unrelated to the NIH employee’s work,” the document states.

The rule applies to all NIH employees, without articulating why particular types of employees should be subject to such restrictions. For example, why can’t a maintenance engineer own biotech stocks?

“The new restrictions on lower-level employees are unfair, unfounded, and unconstitutional in terms of the overbreadth of the impingement on the employees’ First Amendment rights,” the Assembly comment states. “The rule should be withdrawn and a more narrowly tailored rule should be promulgated through notice and comment rulemaking.”

The due process rights of the spouses of NIH employees were violated because they were not given an opportunity to comment on the rule that would require them to divest their holdings, the Assembly argues.

More importantly, the group claims that the rule violates the “Takings Clause” of the Fifth Amendment.

“The Takings Clause violation arises from the fact that no compensation is being provided for the

transaction costs associated with such divestiture, some of which may require NIH employees and their families to incur significant penalties and fees,” the document states.

NCI Director Concurs

In his written response to questions from Specter, von Eschenbach essentially concurred with the Assembly.

“Several changes should be considered,” von Eschenbach wrote. “First, the application of these restrictions to the vast community of trainees, non-science support staff, and scientists who have no ability to impact policy or to influence financial gains serves no practical purpose. Second, the retroactive extension of overly restrictive limits on existing stock and investment portfolios of spouses of NCI employees is a significant problem. These new rules would force divestiture of assets from family inheritance or trust management funds that predate the marriage, potentially resulting in considerable financial hardship. Similarly, the ban on income from competitive scientific prizes has a profound negative impact on the esprit de corps of the NCI program.”

Responding to another question from Specter, von Eschenbach wrote that the rule has harmed the “morale” of NCI employees.

“There has been a dramatic and palpable decline in morale of much of the NCI staff, many of whom feel denigrated and punished for transgressions committed by others,” von Eschenbach wrote. “In some cases, the financial stability of families who have followed all established rules of ethical conduct is now threatened by retroactive analysis of their holdings. The overall impact will be a loss of some of the most talented public servants in the U.S. government.”

Scathing Critiques From Societies

Professional societies that have submitted scathing critiques of the regulations include the American Society of Clinical Oncology, the Federation of American Societies for Experimental Biology, the Association of American Medical Colleges, the American Association of Immunologists, and the American Society for Biochemistry and Molecular Biology.

ASCO’s comments focused on potential restrictions of the NIH employees’ participation in peer review.

The excerpted text of the ASCO letter follows:

ASCO’s programs are accessed and valued by cancer specialists worldwide. These programs are made possible largely through the volunteer efforts of

ASCO members, including scores of NIH employees, who contribute their time and expertise, usually without compensation, because of their passion for clinical oncology.

Among these important programs are the following:

- *Scientific and Educational Programs*—Every year cancer physicians and researchers travel from throughout the United States and the world to attend ASCO's annual meeting, which is the largest and most frequently referenced scientific conference dedicated to clinical oncology. NIH employees serve on the Program and Educational Committees that design and implement the well-attended scientific and educational sessions at the ASCO annual meeting.

- *Peer-reviewed Publications*—The Journal of Clinical Oncology is one of the most frequently cited peer-reviewed medical journals devoted to clinical cancer research. NIH employees serve as editors and reviewers and occasionally as authors for reports published in JCO.

- *Guideline Development*—Cancer clinicians worldwide look to ASCO for development of evidence-based treatment guidelines and technology assessments, both of which involve volunteer support from NIH employees.

- *Committee Deliberations*—NIH employees also participate in the wide range of standing and ad hoc ASCO committees that help develop policy positions in critical areas of medicine, including cancer research, prevention and clinical practice.

- *ASCO Governance*—The pivotal role of NIH employees in ASCO is reflected in their frequent election to positions of leadership in the Society. An NIH employee is currently a valued member of the ASCO Board, and, in the past, NIH employees have been nominated for, and elected to, the Presidency of ASCO.

- *ASCO Ethics*—ASCO shares the concerns of the Office of Government Ethics and the Office of the General Counsel that conflicts of interest not be permitted to taint the work of biomedical researchers. In fact, ASCO has promulgated a conflicts policy that has been described as the most rigorous of any major medical society, but it relies mostly on comprehensive disclosure of financial interests, with restrictions applied only in narrowly defined circumstances. Ironically, the effort to draft the ASCO conflicts policy was led by an NIH employee who is an internationally recognized ethics expert and who—regrettably—was not consulted in the drafting of the Interim Final Rule.

ASCO's Recommendations:

--*NIH employees should not be restricted in any way from participating in the volunteer-supported activities of non-profit entities like ASCO or patient advocate groups.*

[Participation] by NIH employees in ASCO activities is undoubtedly of value to NIH itself by helping to keep its officials abreast of the latest developments in cancer research and clinical oncology and offering opportunities for intellectual and scientific collaboration between public and private research enterprises.

Furthermore, non-participation in ASCO activities by NIH employees could result in adverse effects, such as isolation from the mainstream of the cancer research community, marginalization from state of the art research, alienation from the research community, and loss of "networking" capabilities necessary to select the best candidates for NIH study sections, review panels, etc...

The absence of NIH employees from the process of abstract and manuscript review eliminates the NIH and NCI from one of the most important peer-review activities in the cancer research community, as well as their ability to influence guidelines, consensus statements and to understand the issues faced by the research community.

Aside from the practical concerns shared by ASCO and similar non-profit organizations that restricting NIH employees from participation will undermine our missions in support of cancer patients, ASCO and others object to the suggestion that non-profit organizations like ours are no different from commercial companies. There may be a rationale for targeted restrictions on relations between NIH employees and commercial entities, but no case has been made for any restrictions on volunteer activity with a non-profit, particularly one with a shared mission involving science or medicine that arguably enhances the NIH work of the employees.

The speculative prospect of waivers to permit NIH employees to continue their important contributions to organizations like ASCO is not a remedy. First, the waiver process appears to be burdensome and uncertain. Second, some employees will no doubt be deterred from even applying for waivers by the stigma that the revised standards seem to associate with ASCO and other non-profits. Finally, regardless of the possibility of waivers, it remains unsupportable to label ASCO, patient advocates and non-profit research funders as no different from for-profit pharmaceutical or biotechnology companies in the fashioning of ethics restrictions on NIH employees. ASCO has no vested interest in the commercial success

of any diagnostic or therapeutic product, and is the largest and most respected forum for presentation and discussion of evidence to determine the utility of any commercial or non-commercial product in total independence from the sponsors' agenda.

--Restrictions on NIH employees' activities should be reasonably targeted to prevent abuse and should not be so sweeping as to deter top scientists from seeking employment at NIH.

There is no question that NIH employees should be subject to reasonable and targeted restrictions on financial interests that could inappropriately influence their decision-making affecting those interests. A sweeping prohibition of the sort enacted by the Interim Final Rule, however, goes too far and threatens the ability of NIH to recruit and retain the best scientists. If the Interim Final Rule remains in place, even for the year of review contemplated by the NIH Director, there is a risk that NIH will suffer irreparable harm to its reputation and to its ability to attract the best clinicians and researchers.

The harm to NIH and to cancer research generally will be compounded if the NIH Director moves forward with the announced intention to conduct an "ethics summit" to explore extending some form of the revised ethics standards to extramural grantees. Instead, the Director should concentrate on revisiting the standards as they apply to NIH employees to ensure that they do not have the feared impact of deterring qualified personnel from employment there.

--The revised ethics standards should be withdrawn or suspended until there can be meaningful consultation with NIH employees, followed by prior notice and public opportunity for comment under the Administrative Procedure Act.

In order to re-establish morale and a sense of collaboration within the NIH community, ASCO recommends that the Interim Final Rule be withdrawn or suspended, and a process of consultation with NIH employees be commenced. It is in the interest of NIH and of the entire research effort in the United States and internationally that reasonable and workable ethical standards be developed and adopted as a consensus measure.

Moreover, while employees may not be entitled to the notice-and-comment protections of the Administrative Procedure Act (5 U.S.C. §553), the same is not true of other affected entities like ASCO. The preamble to the Interim Final Rule failed to establish good cause for, or a public interest in, dispensing with prior notice and opportunity for public comment, as required by the

APA.

To establish an effective, efficient and fair system of revised ethics standards, there must be consultation with the NIH employees, including internal NIH ethics experts, and the affected public, including ASCO, must be given the opportunity for meaningful notice and comment before new rules are adopted.

Bush Stem Cell Policy Harms NIH Science, Directors Say

By Kirsten Boyd Goldberg

Several NIH institute directors say the Bush Administration restriction on funding for research on human embryonic stem cells harms the ability of federally-funded scientists to conduct important work in this field.

The comments, solicited by Sen. Arlen Specter (R-Penn.), chairman of the Senate Appropriations Subcommittee on Labor, Health and Human Services and Education, were made public at the subcommittee's April 6 hearing on NIH appropriations.

The institute directors wrote in letters to Specter that NIH and U.S. scientists who rely on federal funding could fall behind those in countries that don't restrict the number of human embryonic stem cell (hESC) lines available for research.

"It is clear that the state of the science is evolving very rapidly, and limitations of the President's policy become more apparent," wrote James Battey, director of the National Institute on Deafness and Other Communication Disorders. Battey recently stepped down after serving three years as chairman of the NIH Task Force on Stem Cell Research.

"It is likely that there will be a movement of some of the best stem cell biologists to California as a result of Proposition 71," Battey wrote.

The California law, passed by voters in 2004, enables the state to distribute \$3 billion over 10 years to stem cell researchers in that state's institutions.

"NIH has ceded leadership in this field to the new California agency," wrote Elizabeth Nabel, director of the National Heart, Lung and Blood Institute. "California's initiative will allow U.S. researchers funded by that state to have the same unrestricted access to all hESC lines that are available to researchers in Asia and Europe, but these new lines will not be available to NIH-funded investigators. Because U.S. researchers who depend on federal funds lack access to newer hESC lines, they are at a technological disadvantage relative to researchers funded by California, as well as investigators

in Asia and Europe. Despite NIH efforts to encourage investigators to use the hESC lines that are acceptable for federally funded research, the restricted access will hamper NIH's ability to recruit and retain talented young scientists working in the field of hESC research."

Under the Bush Administration policy, researchers can use federal funds only for work using cell lines created before Aug. 9, 2001.

Nora Volkow, director of the National Institute on Drug Abuse, wrote that obtaining federally acceptable cell lines is "complicated and expensive," but a recently developed variant line "can be obtained cheaply and without most of the paperwork."

National Institute of Child Health and Human Development Director Duane Alexander wrote that scientists complain of "cumbersome procedures and long waiting lines," for cells that often are of "inadequate quantity and quality."

Batthey wrote that scientists are concerned about the "long-term stability" of the cell lines eligible for federal funding. "There is growing evidence that the hESC lines available on the NIH Human Embryonic Stem Cell Registry are showing epigenetic and genetic changes in small regions of the chromosome," he wrote. "Although these lines are being used to study the basic biology of hESCs, their use in clinical applications is questionable."

In his response to Specter, NCI Director Andrew von Eschenbach wrote, "I am not aware of any complaints about cell-line availability for cancer-related projects. The passage of Proposition 71 in California will provide additional resources for this area of research that will contribute to the knowledge base and create opportunities for collaboration." Unlike the other institute directors, who are appointed by NIH, the NCI director is a Presidential appointee. President Bush appointed von Eschenbach to the post in 2002.

The comments were made in response to Specter's March 24 letter to all NIH institute directors seeking information on NIH funding, management, and conflict of interest issues. The eighth and final question was: "In the past year, what specific progress has been made in the area of human embryonic stem cell research by NIH? How easily have scientists funded by NIH been able to obtain all 22 of the stem cell lines eligible for federal funding? With the passage of Proposition 71 in California, which will fund \$3 billion worth of stem cell research over the next 10 years, has the NIH ceded its leadership of this field of research to a state funding agency?"

Specter asked the institute directors to submit

their comments "directly to the Subcommittee without editing, revision, or comment by the Department of Health and Human Services."

At the hearing, Specter asked NIH Director Elias Zerhouni to explain why federally-funded researchers couldn't use stem cells from excess embryos created at in vitro fertilization clinics. "If they're going to be destroyed anyway, where is the moral issue," Specter asked.

"I think you'll have to ask that from those who hold that view," Zerhouni said.

NIH spokesman John Burklow said Zerhouni elaborated on that comment in an email message: "NIH and myself as scientists do not feel qualified to comment on the moral dimensions of the issue, and such questions should be more appropriately addressed to those who hold such positions in this complex debate," Zerhouni wrote. "Our role is to inform policy on the basis of scientific facts, not to set policy. The policy has to take into account moral, societal, and ethical dimensions, as the President has done in setting the policy."

The comments of the institute directors indicate that the Administration's policy needs to be changed, Rep. Michael Castle (R-Del.) said in a statement. Castle sponsored legislation that would allow federal funding for research using stem cells from excess embryos from in vitro fertilization clinics.

"When our top federal researchers express concern ranging from access and quality and quantity of the eligible lines to ceding leadership and lack of progress, we know its time to reevaluate the current federal embryonic stem cell policy," Castle said.

Rep. Diana DeGette (D-Colo.), co-sponsor of the Stem Cell Research Enhancement Act of 2005 (HR 4682), said researchers are moving to other countries as a result of the restrictive policy. "The President's stem cell policy is handcuffing our nation's top scientists," she said.

Specter and Sen. Tom Harkin (D-Iowa) introduced companion legislation in the Senate.

In Brief:

Korsmeyer To Be Remembered For His Collegiality, Benz Says

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many awards and honors, including the Bristol-Meyers Squibb Award for Distinguished Achievement in Cancer Research and the General Motors Mott Award. "For all of his scientific renown, Stan Korsmeyer will be remembered more for his warmth and collegiality and his passion for making the Institute a better place to

conquer cancer,” said Dana-Farber President **Edward Benz**. Korsmeyer was born in 1950 in Beardstown, Ill. He received his M.D. from the University of Illinois, Chicago. He completed an internship and residency at University of California, San Francisco, and served a research fellowship at NCI from 1979 to 1982. Korsmeyer is survived by his wife, Susan Korsmeyer, two sons, his parents, three sisters, and grandfather. . . . **UNIVERSITY OF CALIFORNIA, LOS ANGELES** established a \$20 million Institute for Stem Cell Biology and Medicine to conduct embryonic and adult stem cell research for HIV, cancer, and neurological disorders. The institute will enable researchers to compete for state grants created by the passage of Proposition 71. **Owen Witte**, professor of microbiology, immunology and molecular genetics, and a Howard Hughes Medical Institute investigator is director of the institute. . . . **CHRISTIAN DOWNS** was named executive director of the Association of Community Cancer Centers, succeeding **Lee Mortenson**, who retired after more than 30 years as the association’s executive director. Downs will work with the board of trustees and membership on national policy and provider education. He will also be responsible for furthering relations with other oncology organizations and provider groups and developing

corporate partnerships. Downs joined ACCC in 1998 and has worked on hospital outpatient prospective payment system issues. Prior to joining ACCC, Downs worked in the public policy department of the American Society of Clinical Oncology. . . . **E. STRODE WEAVER** was elected president of the Association of Community Cancer Centers. Weaver is the executive director of oncology services for the clinical area of the University of Colorado Comprehensive Cancer Center. . . . **DAVID WETTER** was named chairman of the new Department of Health Disparities Research at the University of Texas M. D. Anderson Cancer Center. Wetter, a professor in the Department of Behavioral Science, joined M. D. Anderson in 1995. The department is in the Division of Cancer Prevention and Population Sciences, headed by **Bernard Levin**. . . . **STEVEN WRIGHT** was appointed vice president for facilities management at Roswell Park Cancer Institute. He was director of planning, design, and construction at Cornell University. . . . **DONALD SKINNER** received the 2005 Presidential Medallion, the top honor from the University of Southern California. Skinner is the founding chairman of the Catherine and Joseph Aresty Department of Urology and the Hanson-White Chair in Medical Research in the Keck School of Medicine.

UNIVERSITY OF ALABAMA AT BIRMINGHAM DIRECTOR, COMPREHENSIVE CANCER CENTER

The University of Alabama at Birmingham is seeking applications and nominations for the position of Director of the UAB Comprehensive Cancer Center. The successful candidate should be nationally recognized as a leader in cancer research with demonstrated excellence in both research and administration. The successful candidate will also be appointed as Associate Professor or Professor, tenure-earning or with tenure in a relevant department. The Director will be expected to provide inspired leadership and develop a strategic vision for the Center in conjunction with the strategic plan for the University. The UAB Comprehensive Cancer Center has a distinguished history, including 34 years of continuous NCI funding. Its core NCI grant was recently successfully renewed for 5 years. The Center includes more than 240 faculty distributed across 8 schools and 38 departments at UAB. Annual direct research support is over \$95 million, with approximately \$35 million from the NCI. With UAB’s strong emphasis on interdisciplinary research, the Center provides an important structure facilitating collaborative research activities. Research in the Cancer Center is currently organized into 9 programs including Tumor Immunology, Structural Biology, Virology, Tumor Biology, Experimental Therapeutics, Neuro-Oncology, Cancer Control & Population Science, Women’s Cancer, and Cancer Chemoprevention. The Center provides its membership with twelve shared facilities. Center members have competed successfully for 4 SPORE grants for research on brain, breast, ovarian and pancreatic cancer. UAB is a comprehensive urban University and Medical Center enrolling over 16,000 students in 12 schools on its 75-block campus. It has extramural research awards of over \$260 million and is categorized by the Carnegie Foundation as a Doctoral/Research-Extensive University. The School of Medicine is ranked 16th in NIH funding (2003). The University is the state’s largest employer with more than 15,000 employees and a \$1.2 billion budget. Nominations and applications should include a curriculum vitae, bibliography, and the names and addresses of at least three references and should be submitted electronically (preferably) or mailed to:

David D. Chaplin, M.D., Ph.D.
Chair, Cancer Center Director Search Committee
Chair, Department of Microbiology
Attn: Kim Rodgers
1530 3rd Avenue South; FOT 1232
Birmingham, AL 35294-3412
krodgers@uab.edu

Additional information is available via the Comprehensive Cancer Center web site:
<http://www3.ccc.uab.edu>

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