

Defying Critics, Von Eschenbach Describes Hands-On Role At NCI While Running FDA

By Kirsten Boyd Goldberg

NCI is coordinated, unified, and focused on the goal to “eliminate the suffering and death due to cancer by 2015,” NCI Director Andrew von Eschenbach told the National Cancer Advisory Board Dec. 6.

“Nothing has changed with regard to the vision and mission and strategic direction and important role of the NCI,” as a result of his dual appointment as acting FDA commissioner, von Eschenbach said to the board.

“The reason it has not changed, is because that effort and that role is not only a function of the director, but has been led and nurtured and supported

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In Brief:

NCI Names Four To Science Advisory Board; Uhl To Direct FDA Women's Health Office

NCI APPOINTED four individuals to its Board of Scientific Advisors: **Susan Curry**, director, Institute for Health Research and Policy, University of Illinois at Chicago; **William Dalton**, director and CEO, H. Lee Moffitt Cancer Center; **James Heath**, professor of chemistry, California Institute of Technology; and **Kathleen Mooney**, professor, University of Utah College of Nursing. . . . **KATHLEEN UHL** was appointed director of Office of Women's Health at FDA. Uhl, board certified in family medicine, is a supervisory medical officer in the Center for Drug Evaluation and Research. She has dual faculty appointments at the Uniformed Services University of the Health Sciences in family and internal medicine and is a practicing physician at Walter Reed Army Medical Center. She joined FDA in 1998 as a reviewer in the CDER Office of Clinical Pharmacology and Biopharmaceutics, and was appointed deputy division director and acting division director, Office of Post-Marketing Drug Risk Assessment. . . . **MARK KELLEY** was appointed associate director of basic research at Indiana University Cancer Center. Kelley, the Jonathan and Jennifer Simmons Professor of Pediatrics, also is co-leader of the Experimental and Developmental Therapeutics Program of the IU Cancer Center and associate director of the Wells Center for Pediatric Research. He is an NIH-funded researcher in DNA repair and cancer therapeutics and is chairman of the NIH cancer etiology study section. . . . **MITSUTOSHI NAKADA**, associate investigator in the Brain Tumor Research Unit at Translational Genomics Research Institute, received the Hoshino Award from the Japan Society for Neuro-Oncology. He was recognized for discovering new therapeutic targets for primary brain tumors.

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CSPI: Von Eschenbach's Jobs "Blatant Conflict Of Interest"

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by the entire leadership infrastructure of the NCI," von Eschenbach said. "We are coordinated, integrated, and one with regard to our mission, our vision, our goal, and our focus."

The NCI director's remarks appeared to be aimed at recent expressions of concern about his dual roles, as well as growing opposition to his 2015 goal. Last month, directors of the NCI-designated cancer centers criticized von Eschenbach's emphasis on the 2015 target date and formed a committee to develop an alternative plan. Also, the Cancer Leadership Council sent a letter to the White House to call for the appointment of "permanent qualified leadership" at FDA and NCI (The Cancer Letter, Nov. 23).

Earlier this week, the Center for Science in the Public Interest sent letters to three members of Congress calling von Eschenbach's dual role a "blatant conflict of interest" and requesting that legislators urge the administration to appoint a full-time FDA commissioner.

Although the NCI director assured Congress that he would step down from day-to-day management at the institute, "there is mounting evidence that Dr. von Eschenbach has not removed himself from operational activities at NCI," said the Dec. 7 letters to Sen. Mike Enzi (R-Wyo.), Charles Grassley (R-Iowa), and Edward Kennedy (D-Mass.).

On the same day he spoke to the NCAB, von Eschenbach was quoted in an FDA press release about the agency's crackdown on use of ephedra in dietary supplements, said the letter, signed by Merrill Goozner, director of CSPI's Integrity in Science Project.

"Like a rogue cancer cell that escapes the surgeon's knife, Dr. von Eschenbach has discovered a way to be in two places at once," Goozner wrote. The letter also cited a story in the Nov. 23 issue of The Cancer Letter about von Eschenbach's endorsement of the CEO Roundtable on Cancer, led by pharmaceutical industry executives.

"Dr. von Eschenbach has reneged on his pledge to step down from day-to-day affairs at NCI," Goozner wrote. "He has demonstrated a conflict of commitment regarding his duties at FDA. I believe the time has come for Congress to step in and urge the administration to appoint a full-time commissioner at FDA before the public's perception of the integrity of both organizations is dealt irreversible harm."

At the NCAB meeting, von Eschenbach said he has taken "administrative leave from my administrative responsibilities" at NCI. However, he described a visit he made Dec. 5 to NASA's Johnson Space Center in Houston, to discuss common research projects between NASA and NCI, particularly in nanotechnology.

The meeting lasted all day, von Eschenbach said. "I arrived very early in the morning," he said. "I left very late in the afternoon."

Von Eschenbach said his working two jobs doesn't negatively affect the institute or the agency.

"I want to assure the board at the very outset that as it relates to the administrative changes that have occurred with regard to my dual roles at this point as acting commissioner and as the director—they have been well-defined, well-circumscribed, and well-organized in a way that both organizations continue on the trajectory of the important and very critical work they are responsible for achieving and accomplishing."

Responding to a question from NCAB member Ralph Freedman, von Eschenbach said he isn't involved in NCI's management of Investigational New Drug licenses, which allows him to avoid conflicts at FDA.

"People are concerned about the potential and real conflicts of interest in your positions as FDA head and as the director of the institute," said Freedman, a gynecologic oncologist at M.D. Anderson Cancer Center. "I think, speaking for myself, I would be reassured if you could tell us that you would have no involvement in the decisions that related to products and devices that are under review by the FDA that result from your position as director. I ask this question, because I feel that as a



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board member, we have a fiduciary responsibility to patients.”

VON ESCHENBACH: “I’m not sure I got your question exactly.”

FREEDMAN: “As you continue in your role as both the director of the institute—”

VON ESCHENBACH: “The NCI.”

FREEDMAN: “NCI.”

VON ESCHENBACH: “Yes.”

FREEDMAN: “—but also, as the head of the FDA, that you would have no advisory role in any decisions that relate to drugs, devices, or products that are also before the FDA, as director of the NCI, you will not participate in the discussions that involve those products.”

VON ESCHENBACH: “If there is a product before the FDA for approval?”

FREEDMAN: “Anything that could relate to patient safety, any decisions as director of the institute that ultimately could impact on patient safety, involves a product...”

VON ESCHENBACH: “Let me give you an answer that appropriately addresses, whatever the specific concern or issue you have in what you presented, because I’m not sure the way it works is really in line with what you are concerned with. Here at the NCI, the issues and the decisions having to do with agents, devices, drugs that we may have, hold the IND for, things of that sort, those things are done at a level of the institution that I don’t directly influence or control.”

FREEDMAN: “It’s not just decision-making, but it’s an advisory role. For example, in our own role as board members, we are not allowed to participate in discussions that might involve a drug in which we might have any kind interest.”

VON ESCHENBACH: “If anything like that should arise, I’m recused.”

Communications, Collaboration & Coordination

In his remarks to the NCAB, von Eschenbach discussed what he said were two “important themes:”

—NCI’s communications, which attempt to “present a cohesive and coherent National Cancer Institute perspective” on its Web site and a weekly publication, the NCI Cancer Bulletin.

—NCI’s strategy of “collaboration and coordination” with other institutions and agencies in order to “contribute to the accomplishment and achievement of our goal to eliminate the suffering and death due to cancer by the year 2015.”

“As you are well aware, it is extremely important,

as we are involved in what is a very diverse and a very complex portfolio, with multiple parts and pieces of the National Cancer Institute, actively engaged in very specific and very directed programs within that portfolio, to constantly keep the community and all of you abreast of many of the things that are occurring and many of the activities that we are engaged in, particularly, constantly as we have been over the past few years, emphasize the importance of the coordination and integration that’s occurring among all of those programs,” von Eschenbach said.

“One of the things that we have constantly emphasized is the importance, therefore, of our communications, both to you and to the larger community and to many of our stakeholders, and, in fact, many of our important collaborators and partners—a general theme and a general focus with regard to the NCI and the NCI’s portfolio.” he said.

“And I think one of the very important things that I’ve noted over a period of time is that, many times, there are pieces of information that come out of the institution and have a particular directed audience or a particular message that’s delivered, and they rarely, however, give us an opportunity as an entire community to have a chance to appreciate and really grasp the total information of the kind of activities that are occurring, and so, the Office of Communications has been tasked over the past few years with specific directives to really, effectively, be able to create for us a communications strategy, the ability to create an overarching plan, not just in terms of what we communicate, but even very importantly, how we communicate, so that we are capable and able of really having a community understand and appreciate the impact of the National Cancer Institute and it’s core and central leadership role in the entire National Cancer Program.”

NCI has recently updated its Web site, von Eschenbach said.

“So, you’ll notice one of the particular initiatives that is being carried out as part of what is, in fact, a very far-reaching strategic plan, and many of the important initiatives that you have been aware of over a period of time, including many of the changes that have been made in our Web site, that have been done in a way to make certain that we are effectively utilizing that critically important modern tool of communication in a way that is, in fact, both giving specific information, but at the same time, being able to present a cohesive and coherent National Cancer Institute perspective.

“And, of course, the Web site is being recognized extremely well, and is, in fact, already been the bearer

of a number of prestigious awards in the entire field of communication with regard to its effectiveness and with regard to its impact, including a 'Freddie' and including being one of the number one ranking, highest ranking sites within the federal government."

Also, the NCI Cancer Bulletin helps communicate the institute's "thought processes," von Eschenbach said. "Cancer Bulletin has been an extremely important method of communications, so that on a weekly basis, hearing directly from the National Cancer Institute, the entire community has really been able to get a window into not only the activities, but also much of the strategy and much of the thought processes that are driving many of our missions."

Another strategy has been to give NCI publications a "common look and feel," von Eschenbach said. "One of the ways that I think and one of the most attractive of all of the activities that we have been embarked in, is to look at this tremendous portfolio of information that's being communicate, especially that's coming out of the operational units, whether they are divisions or centers or specific programs, and give them a common look and feel," he said. "And so, you have also on the table a number of publications that are being presented with very diverse and very unique and specific information, but you'll notice that they're all now being published in a format with a common look and feel."

"So, there is, now, in fact, an overarching theme to the communications of the National Cancer Institute, such that, no matter how diverse, no matter how specifically unique the information may be that's being communicated, as it's being presented to the entire community, it will reflect a unified and a coordinated and a cohesive National Cancer Institute," von Eschenbach said.

Cohesiveness is part of NCI's "culture," von Eschenbach said. "Common look and feel is much more than simply a strategy for how we present our communications," he said. "It really reflects what is at the core and central to the culture of the National Cancer Institute. The concept is simply that we are, in fact, a group of very diverse, very unique, very specific components of individuals, effectively pursuing unique and specific opportunities and unique and specific contributions, but doing it in a way that is coordinated and integrated."

Cohesiveness is a "theme" that von Eschenbach has emphasized over the past four years, and which he said will translate into achievements in cancer research and care. "This board has heard me over a period of the past four years constantly emphasize the theme of

collaboration and coordination," he said. "It is a theme that we have worked very hard to continue to engender within the NCI itself, and is a theme that NCI is continuing to attempt to reflect across the broad National Cancer Program and our cancer community, but even more importantly, to reflect beyond the cancer community so that we collaborate, coordinate, and integrate with many of the other initiatives that are independent and outside of the National Cancer Program, in an effort, in order to bring the richness of that talent and that expertise and those contributions, bring to our own directed mission and vision, and specifically in an effort to contribute to the accomplishment and achievement of our goal to eliminate the suffering and death due to cancer by the year 2015."

Mars And Cancer: Synergy?

Illustrating the theme of collaboration, von Eschenbach described his visit to the Johnson Space Center.

"One might what wonder, what does going to Mars have to do with conquering cancer or eliminating the suffering and death due to cancer?" von Eschenbach said. "You would be amazed at the opportunities that exist for close collaboration and synergy and cooperation. One of the effects of the meeting there yesterday was for both the director of the Johnson Space Center as well as for me to forge and commit to beginning to engage in a process of looking for opportunities to create common interactions and collaborations, specifically focusing on emerging areas, for example, the whole area of nanotechnology."

"For example, one particular application that is being addressed with regard to the needs of NASA is opportunities to use nanoparticles as radioprotectors, because of the inordinate risk of the damage that can occur in human space flight in extended trips beyond our atmosphere, where radiation exposure is importantly a significant risk with regard to problems facing astronauts," von Eschenbach said.

NCAB member David Koch, executive vice president of Koch Industries, asked von Eschenbach whether he had taken a critical view of NASA's mission.

"Andy, when you were at NASA yesterday, did you take the opportunity to discuss the merits of, instead of spending tens of billions of dollars on sending men to Mars, using those funds to expand cancer research?" Koch said. "As a taxpayer and a person who has lived with cancer for many years, I think the money could be much better spent expanding cancer research. I think you

have a very strong personal feeling about that as well, and I think you strongly agree with me on this point.”

VON ESCHENBACH: “I suggest by way of example how I might approach that question. I arrived very early in the morning. I left very late in the afternoon.... The day was extremely successful in building relationships and creating a kind of synergy and interaction that suggests that as we spend funds to accomplish our missions, like a mission to Mars, that we do that in a way that synergizes and allows an effort to impact on other challenges facing us, such as the problem of cancer affecting almost half of the population here on Earth, and the need to do something about the suffering and death that results.

“We had coherence, we had commitment. They didn’t tell me how to spend my money. I didn’t suggest I knew how they should spend theirs. But we did agree on the idea that whatever we do on our individual missions, in a way that is complementary and synergistic... In some ways, though I didn’t do exactly what you said I should have done, I think it was mission accomplished.”

KOCH: “Andy, I take that a yes, you strongly agree with me.”

Here On Earth: Centers “Map To 2015”

Meanwhile, cancer centers are collaborating with federal laboratories for work in bringing new technologies to cancer research, von Eschenbach said. NCI and the Department of Energy formed a new task force “to complement what we have observed already occurring spontaneously among many of our cancer centers where there are collaborations and important interactions between cancer centers and federal laboratories,” he said.

“What we are looking forward to is integration and coordination, so that rather than being geographic and specific, it can become national and much more of a network of networks, so that all of the opportunities that exist at Oak Ridge will not only be available locally to an institution like Vanderbilt, but could then become disseminated to other parts of our National Cancer Program,” he said.

Cancer centers are collaborating, too, von Eschenbach said.

“The cancer centers, with regard to their own integration and collaboration and coordination, at the last meeting of the cancer centers retreat, have actively engaged in a process to look at 2015, the elimination of suffering and death due to cancer, and begin to map to 2015 their own activities as far as the opportunities for them to coordinate, integrate, and apply across

the discovery, development, and delivery continuum, a coordinated, collaborative effort among the cancer centers and their assets, the various parts and pieces of the program that they have already assembled around them in unique and specific ways.”

Several directors of the cancer centers offer a different account of their private meeting with von Eschenbach last month. The directors said they told von Eschenbach that the 2015 goal was unrealistic and is failing as a communications strategy.

To develop an alternative approach, the center directors formed a committee to develop a blueprint that would explain “what we can see is on the horizon,” M.D. Anderson Center President John Mendelsohn said. (The Cancer Letter, Nov. 23). “We have to build a consensus that’s practical and is very honest about what we can and can’t do,” Mendelsohn said.

Niederhuber: “My Job Is Easy”

After noting that his duties as NCI director are “well-defined, well-circumscribed, and well-organized,” von Eschenbach turned the lectern over to NCI Chief Operating Officer John Niederhuber, who was appointed to take on the director’s administrative duties.

“I would echo what Andy says,” Niederhuber said. “My job is really quite easy and simple, when you think about the tremendous staff we have. It really runs without my being involved. In fact, my biggest task is to simply stay out of the way and let them do their jobs.”

Niederhuber said he is staying true to von Eschenbach’s vision.

“We really are about maintaining the momentum and maintaining the strategic direction and mission and vision that has been articulated during the first five years that Andy has been leading the National Cancer Institute.” [Von Eschenbach has served as NCI director for three years and 10 months.]

While his job might be easy, the times are hard, Niederhuber said.

“All of us are aware both as intramural scientists and extramural scientists that these are going to be difficult times for us, 2006-2007, and in the future,” he said.

“I wanted to try to put a positive spin on it and liken it to genetic evolution,” Niederhuber continued. “That is, when there is environmental stress applied to the species, only those that are very creative and able to adapt their genetic base, survive. They end up actually better than those not going into environmental stress. So, in many ways, living in a time of fat would not be good for the NCI. We are much better off being in a

time of environmental stress. We will be better in 2008 because of this stress.”

If Congress approves the President’s FY 2006 budget request of \$4.841 billion for NCI, that will represent a \$16.5 million, or 0.3 percent, increase, “essentially a flat budget,” Niederhuber said. However, there could be an across-the-board cut due for hurricane relief, and NIH and HHS take various “taps” to pay for the NIH Roadmap initiatives, security, and other items, he said.

The taps, along with NCI’s funding commitments, could result in a budget shortfall, Niederhuber said. “The bottom line here is that with various scenarios... we might need to find \$60 million or \$100 million or maybe \$150 million in our budget before we can start to work the year,” he said.

The budget will require the institute to make “hard decisions and changes, stopping doing some of the things that maybe aren’t as relevant as they once were,” he said.

NIH has decided that the institutes must maintain the number of competing awards at the same level as last year, which for NCI would be about 1,300 awards, he said.

Under the continuing resolution that funds NIH through Dec. 17, the institutes will issue non-competing research grant awards at 80 percent of the previously committed level. NIH will “consider upward adjustments to these levels after the final appropriation is enacted, but expects institutions to monitor their expenditures carefully during this period,” according to a Dec. 1 notice from the NIH Office of Extramural Research.

In Brief:

V. Craig Jordan Honored In UK, Brazil For Tamoxifen

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His research at TGen led to the discovery that ephrins help mediate glioma cell invasion, said **Michael Berens**, senior investigator at Tgen. Nakada is supported by a two-year fellowship award from the Japan Society for the Promotion of Science. . . . **V. CRAIG JORDAN**, vice president and scientific director for the medical science division at Fox Chase Cancer Center and holder of the Alfred G. Knudson Jr. Chair in Cancer Research, received an honorary Doctor of Science degree from the University of Bradford, U.K., and elected honorary professor at the University of Iguacu, Rio de Janeiro, Brazil. Both institutions honored his 30-year scientific contribution to the development of tamoxifen and raloxifene.

Runowicz Elected President, American Cancer Society

AMERICAN CANCER SOCIETY elected officers to its board of directors at its annual meeting in Los Angeles:

President, **Carolyn Runowicz**, the Northeast Utilities Chair in Experimental Oncology and professor of obstetrics and gynecology, University of Connecticut. She is director of the Neag Comprehensive Cancer Center at University of Connecticut Health Center. She succeeds **Stephen Sener**, vice-chairman, Department of Surgery, at Evanston Northwestern Healthcare. He remains on the board as immediate past president.

Chairman, **Sally Brooks**, founding president of the Desert Palms Unit of ACS. She replaces **Thomas Burish**, provost, University of Notre Dame, who serves as immediate past chairman.

President-elect, **Richard Wender**, chairman of the Department of Family and Community Medicine at Jefferson Medical College, Thomas Jefferson University and Hospital.

Chairman-elect, **Anna Johnson-Winegar**, former deputy assistant to the U.S. Secretary of Defense.

Vice-chairman, **Marion Morra**, co-principal investigator of the Cancer Information Service Research Consortium and associate clinical professor at Yale School of Nursing.

Other officers elected were treasurer, **G. Van Velsor Wolf Jr.**, senior environmental partner at the law firm of Snell & Wilmer; secretary, **George Atkins**, former executive of Wachovia Bank; first vice president, **Elmer Huerta**, founder and director of the Cancer Preventorium at the Washington Cancer Institute; second vice president, **Elizabeth Fontham**, dean of Louisiana State University School of Public Health.

Also, ACS awarded its Medals of Honor. **Sidney Kimmel** received the society’s first Medal of Honor for Cancer Philanthropy.

Walter Willett, professor of epidemiology and nutrition and chairman of the department of nutrition at the Harvard School of Public Health, received the Medal of Honor for Clinical Research, for his work identifying dietary and lifestyle factors that increase cancer risk.

Paul Modrich, the James B. Duke Professor of Biochemistry at Duke University and a Howard Hughes Medical Institute investigator, received the Medal of Honor for Basic Research for his research DNA repair, mismatch DNA repair and its role in hereditary colorectal cancer, and his identification of the DNA repair pathway of Mut proteins.

Funding Opportunities:

Program Announcements

PA-06-087: Mentored Quantitative Research Development Award. The award would provide mentored research experiences for investigators whose quantitative science and engineering research has not been focused on questions of health and disease. The experience would lead to an independent and productive research career. Examples of quantitative scientific and technical backgrounds include: mathematics, statistics, economics, computer science, imaging science, informatics, physics, chemistry, and engineering. The PA will use the NIH K25 award mechanism. The PA is available at <http://grants.nih.gov/grants/guide/pa-files/PA-06-087.html>.

Inquiries: David Eckstein, 301-496-8580; eckstein@mail.nih.gov.

PA-06-081: Research on Social Work Practice and Concepts in Health. Office of Behavioral and Social Sciences Research encourages theory-driven empirical research on social work practice, concepts as they relate to the NIH public health goal of improving health outcomes for medical and behavioral disorders and conditions. Areas of interest include studies that characterize the usual and/or best practices of social workers and how they relate to health outcomes, studies establishing the efficacy and effectiveness of health-related interventions and services delivered by social workers, aspects of health-related social work services that are unique to specialty health care settings and non-specialty health care settings, the nature and impact of routine prevention or clinical practice, and factors related to successful dissemination and implementation of social work services and interventions with proven effectiveness. The PA will use the NIH Research Project Grant R01 award mechanism. The PA is available at <http://grants.nih.gov/grants/guide/pa-files/PA-06-081.htm>.

Inquiries: For NCI--Suzanne Heurtin-Roberts, 301-594-6655; sheurtin@mail.nih.gov.

PA-06-082: Research on Social Work Practice and Concepts in Health. The PA will use the NIH Small Grant R03 award mechanism. The PA is available at <http://grants.nih.gov/grants/guide/pa-files/PA-06-082.html>.

PA-06-083: Research on Social Work Practice and Concepts in Health. The PA will use the NIH Exploratory/Developmental Grant R21 award mechanism. The PA is available at <http://grants.nih.gov/grants/guide/pa-files/PA-06-083.html>.

Other Funding Notices

RFQ-NCI-60011-NV: CHX-A. Due Date: Jan 9. NCI Radiation Oncology Branch, Radioimmune and Inorganic Chemistry Section is soliciting contractors to conjugate the chelate CHX-A DTPA to the monoclonal antibody Herceptin under good manufacturing practices conditions, and vial the

conjugated product under GMP conditions for early phase clinical trials under an investigational new drug. The work will be performed at the NIH Clinical Center in collaboration with the Molecular Imaging Program, the Medical Oncology Branch, and Nuclear Medicine Department, CC. Genentech, the manufacturer of Herceptin, will provide the bulk of the monoclonal antibody. The CHX-A DTPA ligand will be made in the NCI laboratory and will be shipped to the contractor. The RFQ is available at <http://www.fbodaily.com/archive/2005/12-December/07-Dec-2005/FBO-00944699.htm>.

Inquiries: Debbie Moore, dm170b@nih.gov.

NOT-CA-06-003: Notice of Availability of Administrative Supplements for Activities to Promote Research Collaborations for Projects Currently Funded by the NCI Division of Cancer Biology. Receipt Due Date: Feb. 15. Division of Cancer Biology invites requests for supplemental funding in fiscal year 2006 for existing DCB-funded research projects, i.e., administrative supplements, for new multidisciplinary scientific collaborations among DCB grantees, as well as with other members of the scientific community.

The APRC initiative supports collaborative interdisciplinary activities including initiating new collaborative research projects, sharing unique resources and reagents, developing novel technologies, and organizing cross-disciplinary meetings/workshops. A full description of the APRC program and the fiscal year 2006 guidelines are available at <http://dcb.nci.nih.gov/APRC2006.cfm>. The notice is available at <http://grants.nih.gov/grants/guide/notice-files/NOT-CA-06-003.html>.

Inquiries: John Sogn, 301-594-8782; js150x@nih.gov.

NOT-CA-06-004: Request for Information Related to a Planned Funding Opportunity for Support of the Discovery, Development, and Clinical Validation of Glycan-Based Cancer Biomarkers. Response Submission Date: March 1. NCI will issue an RFA in the spring to establish a consortium entitled the Alliance of Glycobiologists for Detection of Cancer and Cancer Risk. The planned RFA will solicit grant applications for support of Tumor Glycome Laboratories, which are to be the principal component of the Alliance. The laboratories will discover, develop, and support clinical validation of glycan-based cancer biomarkers. The U01 cooperative agreement funding mechanism will support several awards of up to 5 years maximum each.

At this time, prospective applicants are invited to give limited details concerning research that might be supported in conjunction with such a funding opportunity. This request for information is for planning purposes only. The full notice with points to be addressed is available at <http://grants.nih.gov/grants/guide/notice-files/NOT-CA-06-004.html>.

Inquiries: Karl E. Krueger, 301-594-1044; kruegerk@mail.nih.gov.



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