

AACR Annual Meeting:

Amid Protests Over Paylines, Niederhuber Tells Scientists To Get “Leaner And Better”

By Kirsten Boyd Goldberg

A sense of frustration, anger, and uncertainty about research funding and NCI leadership permeated the annual meeting of the American Association for Cancer Research in Washington, D.C., earlier this week.

Prominent scientists publicly attacked the Bush administration’s funding priorities that have resulted in budget cuts to investigator-initiated grants, a trend that is likely to worsen under the President’s proposed \$40-million budget cut for NCI for FY 2007.

Privately, cancer scientists traded rumors and worries about succession
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In Brief:

Wahl Succeeds Jones As AACR President; AACR Elects William Hait President-Elect

GEOFFREY WAHL, of The Salk Institute for Biological Sciences, succeeded **Peter Jones**, director of the University of Southern California Norris Comprehensive Cancer Center, as president of the American Association for Cancer Research at the society’s annual meeting earlier this week in Washington, D.C. **William Hait**, director of the Cancer Institute of New Jersey, was elected AACR president-elect. He remains editor-in-chief of the AACR journal, *Clinical Cancer Research*.

Five new members were elected to the AACR Board of Directors for the 2006-2009 term: **James Abbruzzese**, of M. D. Anderson Cancer Center; **Lucile Adams-Campbell**, director of the Howard University Cancer Center; **Elizabeth Blackburn**, of University of California, San Francisco; **David Parkinson**, of Biogen Idec; and **Helen Piwnica-Worms**, of Washington University School of Medicine in St. Louis.

Four new members were elected to the AACR Nominating Committee: **Mina Bissell**, of Lawrence Berkeley National Laboratory, University of California, Berkeley; **Edison Liu**, executive director of the Genome Institute of Singapore; **Charles Sherr**, of St. Jude Children’s Research Hospital; and **Craig Thompson**, of University of Pennsylvania.

AACR annual awards were presented to the following scientists:

Bernard Fisher received the Lifetime Achievement Award in Cancer Research for his work in breast cancer. Distinguished Service Professor of Surgery at the University of Pittsburgh School of Medicine, Fisher is past
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at NCI as the controversial director Andrew von Eschenbach prepares to relinquish control of the institute to accept the nomination as FDA commissioner. Many wondered who would be willing to take on the difficult job of restoring credibility to an NCI that, some argue, has made promises it cannot keep and has favored costly "big science" programs over investigator-initiated research.

Four years ago, scientists could count on the top 20 percent of research grants receiving funding. While von Eschenbach inherited major grant commitments due to the five-year near-doubling of the NCI budget, he established costly new programs in bioinformatics, nanotechnology, and proteomics, and continued increases for other large programs. As a result, the grant funding "payline" fell to the 16th percentile last year, and in January, NCI announced that it would fund only the top 11 percent of research grants in FY 2006. Even worse, funded grants have been subjected to budget cuts of up to 29 percent.

Recently, NCI officials said that if the President's \$4.75 billion budget proposal for FY 2007 is enacted, the institute would cut \$53 million in funding for research grants, likely reducing the payline to the single digits.

Robert Weinberg, winner of the Kirk A. Landon-AACR Prize for Basic Cancer Research, said he no

longer advises young people to enter a career in cancer research.

"For the first time in a third of a century, there doesn't seem to be much of a future for them," Weinberg said in his award lecture April 3. "For the first time in a third of a century, young people can't get grants to start their own laboratories.

"The investigator-initiated grants have almost become an extinct species," said Weinberg, a member of the Whitehead Institute for Biomedical Research and professor of biology at Massachusetts Institute of Technology. "The people who determine funding in this country, and indeed, in this city, have lost sight of what the most important element is that should be funded in the whole cancer research apparatus. Not large research consortia, not new technologies, not cancer centers, not program project grants, not SPOR grants.

"The most important emphasis should be on young, small, individual investigators."

Weinberg's statement triggered a 25-second burst of applause—an unusually long interruption for a scientific lecture.

From 2015 Fervor to Funding Crisis

The funding crisis follows an era when NCI, with messianic fervor—and with enthusiastic support from AACR leadership—pursued what scientists saw as a blatantly political and transparently unachievable goal to "eliminate the suffering and death due to cancer by 2015."

Now, the money is gone, the institute's scientific credibility damaged, and its leadership in transition.

Von Eschenbach hasn't formally left the institute after the White House nominated him for the position of FDA commissioner, and no acting director has been named. It's not even clear that the von Eschenbach era, or the pursuit of the 2015 goal, is over. Though the institute's Chief Operating Officer John Niederhuber judiciously refrained from mentioning 2015 in his speech at AACR, he has been a key supporter of the goal.

Three weeks ago, a group of about 40 prominent cancer researchers recently wrote a letter to the White House to offer help in a search for new leadership at NCI, sources said. Directors of NCI-designated cancer centers and scientists who administer large programs funded by the institute weren't asked to sign the letter, sources said.

The AACR meeting's official theme was "Saving Lives Through Research," but the real theme could be better described as "Saving Research." The timing of



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

the meeting, as Congress began work on the FY 2007 budget, and the Washington venue were conducive to indignation and despair.

AACR has joined other cancer organizations to call for a 5 percent increase for NCI for fiscal 2007, which would bring the institute's budget to \$5.08 billion, said William Nelson V, chairman of the AACR Science Policy and Legislative Affairs Committee and professor of oncology, urology, pharmacology, medicine, and pathology at Johns Hopkins University School of Medicine.

"After the doubling of the NIH budget, we haven't kept pace with inflation," Nelson said at an AACR press conference April 4. "It's starting to choke off some opportunities, everything from training young scientists to health care innovation."

Lack of funding will drive young scientists out of cancer research, said Donna Hansell, of Johns Hopkins University and a member of AACR's Associate Member Council. "What we're seeing happening when we talk to these early career scientists, is they say, 'I have been working for 16 years training, and I have to keep training, because no one is giving me grant money to go out and begin my own line of research. I'm waiting until I'm over 40 years old to be able to become an independent researcher, and things are just not getting better,'" Hansell said.

"This is a time to get angry," said Julie Fleshman, president and CEO of the Pancreatic Cancer Action Network. "This should be a national priority. Over half a million people are dying of cancer every year in this country, and we're not getting angry about it, and we're not making this a national priority."

In a difficult disease like pancreatic cancer, where almost no progress in treatment has been made, small funding increases over the last few years have attracted a greater number of investigators, Fleshman said. "We're finally just getting started, and now, they are going to choke that," she said. "Without further investment, we aren't going to be able to move forward in some of those diseases like pancreatic cancer."

While funding for cancer research in the U.S. is dropping, other countries are increasing their research budgets, said Peter Jones, who completed his term as AACR president this week.

"We are already seeing other countries recruiting the very best people in this country," said Jones, director of the University of Southern California Norris Comprehensive Cancer Center. "The problem I see is that for junior people just starting their careers, it's very discouraging to see the thought leaders and the major

people who are doing cancer research in this country moving to other grounds."

Geoffrey Wahl, the incoming AACR president, said the funding outlook has never looked so bleak. "We have had retrenchments in the past, but there was always the thought that it would turn around, and there wasn't the thought that it would be bad for a long period of time, and people weren't leaving the field," he said. "Now, there is something structurally different. We have the biggest deficit in a long time. We have many extrinsic economic stresses on the economy, and we have global competition such as we've never had before. That isn't the time to retrench."

Over the past 10 years, scientists have begun to unravel the complexity of cancer, said Wahl, professor in the Gene Expression Laboratory of the Salk Institute for Biological Studies. "We're beginning to understand the molecules that drive the growth of cancer cells. We're beginning to understand the pathways that are commonly rendered dysfunctional. Now, we're getting to be smart about the kind of drugs we can make," he said.

"Just at the time when our investment is rendering clarity, predictiveness, and success, why is it that some people think that we aren't making it?" Wahl said.

Message From "Your National Cancer Institute"

On April 2, as the meeting's plenary session was about to conclude, many scientists who stood in the halls at the Washington Convention Center said they were eager to find out who would appear to deliver the "Report of the Director of the NCI."

Would it be von Eschenbach, who still holds the official title of NCI director, but who plans to step down? Though he has taken administrative leave from the institute, over the past six months he has regularly represented NCI at major speaking engagements. Indeed, von Eschenbach was originally scheduled to give the director's report to AACR.

Would John Niederhuber deliver the speech? Niederhuber, who joined NCI last August as deputy director for clinical and translational sciences, was named the institute's "chief operating officer"—a new position—last fall after von Eschenbach's redeployment to FDA. Would another NCI deputy director appear? Or would the White House announce plans for succession?

The uncertainty was resolved minutes before the scheduled remarks, when convention center employees arrived with a placard featuring Niederhuber's photograph.

“I hope you will hear a message of responsibility, a message of unprecedented opportunity, a message of hope,” Niederhuber began. “For me, the opportunity to speak to you this morning—representing your National Cancer Institute—is, indeed, a cherished honor. You and I know that, as members of AACR, we have an important role to play in ensuring the success of the NCI.”

The phrase “your National Cancer Institute” appears to be borrowed from the American Cancer Society, where the telephone switchboard operators greet callers with “your American Cancer Society.”

Niederhuber, former chairman of the National Cancer Advisory Board and former director of the University of Wisconsin Comprehensive Cancer Center, said he wanted to begin “a dialogue” with the AACR members.

“I am well aware of the many questions and uncertainties on your minds: questions about leadership at the National Cancer Institute; about the challenges of managing a deficit budget; about ‘big science’ versus R01s; about training the next generation of scientists; and about important questions regarding the NCI’s vision and strategies needed to achieve our goals. Without question, these are challenges that lack easy answers.”

In this “time of transition, the leadership of NCI is solid and steady,” Niederhuber assured the audience that quickly dwindled from thousands to a few hundred. “The budgetary situations we face, while severe in nature, are cycles, and we have seen them before.”

Niederhuber said he wanted to “express my gratitude and extend the appreciation of all of NCI to Andy von Eschenbach for the last four years of his service. His tireless dedication to the institute, to cancer patients and cancer survivors, is truly inspirational. In Andy, NCI has had a superb director, and the cancer community has had an extraordinary ambassador full of vision and full of passion. Andy has boldly set, for all of us, the challenge of alleviating the suffering and death due to this disease.”

After a brief description of his career, Niederhuber said he had some “personal goals” when he accepted von Eschenbach’s offer of the deputy director job last year.

“I wanted to work with NCI leadership to strengthen the clinical research program at the brand new, spectacular Mark O. Hatfield Clinical Research Center,” he said. “I wanted to work with Bob Wiltrout and Lee Helman to continue to strengthen the intramural scientific program.... Because of a personal experience with my wife and breast cancer, I became aware of just

how difficult it can be for our cancer patients to get access to early-phase therapies. I promised her I would do something about this.”

Niederhuber’s wife, Tracey, died of breast cancer in 2001.

“Much to my surprise, late in the afternoon of Friday, Sept. 23, Andy informed me that Les Crawford would be stepping down as commissioner of the FDA, and that the night before, the President had asked him to become acting FDA commissioner,” Niederhuber said.

“In the weeks that followed, I began to assume the operational control of the NCI,” he said. “The appropriate formal delegations of authorities were put in place, and have been so, since last October.

“While Andy’s appointment to the FDA was a surprise for all of us, I firmly believe—as I have told Andy many times—that we in the cancer community are extremely fortunate,” Niederhuber said. “To achieve our goals not only depends on scientific accomplishment, but also—and perhaps even more importantly—on critical changes in regulatory policy. We cannot help but benefit from having an FDA commissioner sitting at the Department of Health and Human Services, who thoroughly understands cancer—and who, with a passion unmatched by anyone, believes that science will provide the answers to tough questions of policy.”

In the past few months, “the transition at NCI has been smooth and seamless,” due to the work of the deputy directors “and the strong sense of mission that infuses the whole institute,” Niederhuber said. “Whether I—or someone else—ultimately serve as its director, NCI’s management will remain unified, solid, and focused on its goals.”

“God Bless Each and Every One of You”

Niederhuber outlined a “long list of accomplishments” NCI has made in the past 30 years. “NCI has built an astounding infrastructure uniquely connected to a national program of outstanding cancer centers,” he said. “Every day the NCI and its network of investigators is accomplishing things undreamed of 30 years ago. It is a scientific enterprise that traditionally has led discovery; an enterprise comfortable with leading the development of new technologies; and an institute prominent in leading translation through its centers, cooperative groups, and community-based CCOPS.”

That raises “one simple question: How does NCI find the resources needed to maintain its momentum?” he said. “We must simply become leaner and better at

what we do. We must redeploy effectively the resources we have been given. While we might argue that we could use more—and certainly we could—\$4.8 billion is a considerable amount of money, by any measure.”

NCI and its grantees need to “markedly increase the leveraging of the resources we have through partnerships” with the private sector and philanthropy, he said.

“We must do a much better job of explaining the story of scientific opportunity before us, and I challenge you to do this with a much more unified voice,” Niederhuber said. “We must remind the country’s leadership of the power of the genetic revolution and the global economic force it will become.”

Economic studies show that for every NIH dollar that enters a community, the average U.S.-wide direct return to the economy is \$2.45, Niederhuber said.

“All well and good, you say. ‘How about my R01? The R01 I just slaved over the past months? What chances do I have? How am I going to maintain my career?’ When asked these questions, I am prone to remind my questioner that this isn’t a new phenomenon. This isn’t the first time the NIH and the NCI have faced a shrinking budget,” Niederhuber said.

NCI’s budget fell in 1981 and 1982, he said. “I vividly recall single-digit paylines as I struggled to maintain my own laboratory,” Niederhuber said. “The early 1990s were similar, if you recall. Budget growth was less than one percent in 1993. So, while the current situation isn’t as optimistic as any of us would wish... we can take some degree of solace in the fact that we have been there before and better times will come again, as they have before.”

For FY 2006, NCI division directors “completed a redeployment exercise” to “set priorities and made some very tough decisions about what absolutely had to be done, what could possibly be delayed, and what we simply couldn’t afford to do anymore,” Niederhuber said.

NCI’s “highest priority” is the funding of first-time investigators, maintaining the R01 payline, and maintaining the number of grants funded, he said.

NCI usually sets aside about 10 percent of its competing research project grants budget to fund applications that are “beyond the payline but that are of high programmatic interest and opportunity,” Niederhuber said. The set aside is 15 percent of the grants budget for FY 2006, “because there is a greater need to be able to select grants outside the very-restricted payline.”

NCI will continue to set preferential paylines for

first-time grantees, he said.

However, Niederhuber said NCI should continue to support larger projects.

“I believe that, in order to continue unparalleled discovery, and to achieve the aims of the National Cancer Program, we must embrace, as part of our portfolio, multidisciplinary team science,” he said. “I would argue that it is clear from the extensive deliberations of our advisors, that we must find a place for large-scale integrative cancer biology. In addition, NCI cannot afford to wait for new technology platforms to be developed.”

Cancer researchers can “take pride in remembering that, for the first time, there are fewer people dying of cancer,” Niederhuber said. “In 1978, there were three million survivors; in 2005, there were more than 10 million. This is real progress, and the direct result of your work....”

“I end this morning with a promise that there is no one more committed to working with you to make a difference, than I am,” Niederhuber said. “I am motivated to this challenge by the memories of holding, each night, a beautiful, intelligent, inspirational woman who was desperately trying to win her battle with breast cancer. Even on the last morning, she said to me, ‘J, can we talk about trying another experimental drug?’”

“My friends, you and I are tasked with answering the call of every patient, every survivor, every caregiver, every friend, and every loved one. We are privileged to be their beacons of honesty, support, and hope.

“God bless each and every one of you.”

Niederhuber didn’t mention the 2015 goal.

Weinberg: “Young People Can’t Get Grants”

Following is a transcript of Weinberg’s remarks at the end of his Landon prize lecture:

“I’ve run a lab for 33 years, and to the extent that I can take pride my past, it’s not in certain oncogenes or tumor suppressor genes or telomerase, or making transformed cells. It’s the fact that I’ve been able launch lots of people into their careers, and many of them have landed nicely on their feet. They have adopted careers in cancer research that have taken them, and thus all of us, far....”

“Now, for the first time in 33 years, when they ask me, ‘What should I do with myself, what should my future career be?’ I can no longer tell them with a straight face, ‘You should go into cancer research.’ Because, for the first time in a third of a century, there doesn’t seem to be much of a future for them. For the first time in a third of a century, young people can’t get

grants to start their own laboratories.

“We have to realize that the engine that powers cancer research comes from these young, smiling, idealistic people. But as much as they would like to do cancer research, they now know that it’s not going to be possible for them, at least in the foreseeable future. The investigator-initiated grants have almost become an extinct species.

“And so I end this with a little bit of a sermon. The people who determine funding in this country, and indeed, in this city, have lost sight of what the most important element is that should be funded in the whole cancer research apparatus. Not large research consortia, not new technologies, not cancer centers, not program project grants, not SPORE grants. The most important emphasis should be on young, small, individual investigators.

“It’s these young people who are the source of innovation, the source of originality. They have the stamina to work 18 hours in the lab, and for some reason, they are interested in doing so. They make things move forward. Not old guys like myself, and not even 40- or 50-year-olds, whose brains have, by then, become largely calcified and ossified. It’s the young people who do it.

“They or we have deserted them. This is going to result, I fear, in a whole lost generation. There will be a gap of 10 years when young people no longer enter into this field, and we can only hope it’s going to be for 10 years....

“To the extent that we should take something from here, it’s not about metastasis genes, it’s about the young people. We’ve left them in the lurch. For them, cancer research is no longer an attractive career option, and until that changes, we will have the illusion of making progress, but the reality will be, sadly, different.

“It will be stasis.”

Applause for von Eschenbach, 2015 Goal

AACR has given von Eschenbach the applause, scientific cover, and cadres for pursuit of his controversial 2015 goal.

—Anna Barker, the NCI deputy director who shaped the institute’s 2015 goal and its current scientific strategy of favoring “big science,” first rose to prominence through AACR politics (The Cancer Letter, May 30, 2003).

—The society provided a platform for von Eschenbach to announce his biomarker initiatives. In 2002, an AACR task force proposed “intraepithelial neoplasia” as a target for cancer prevention. The society

issued a statement calling for FDA to speed approval of drugs that would prevent these “precancerous lesions.” This led NCI to advance an as yet unsuccessful plan for cancer prevention based on surrogate endpoints (The Cancer Letter, May 30, 2003).

—In 2003, AACR issued a statement applauding von Eschenbach’s 2015 goal. “Without challenges and goals, our history would be quite empty,” the society said. “Is it doable? To be succinct, we’ll never know unless we try.... We stand at a unique moment in history where knowledge, technology, and resources are coming together to make what seemed impossible a short time ago, now possible. We may never wipe out cancer all together [sic.]. But we owe it to ourselves, and to future generations, to try to eliminate and control this terrible disease. We at AACR—collectively and in partnership with the NCI and others—will work as best we can to reach this goal” (The Cancer Letter, July 18, 2003).

—Last month, AACR issued a statement in support of von Eschenbach’s nomination for FDA commissioner. “Dr. von Eschenbach brings enormous medical and administrative expertise and experience to this post,” Margaret Foti, the society’s CEO, said in a statement. “Dr. von Eschenbach also has a special appreciation for translational cancer research,” added Peter Jones, AACR president at the time (The Cancer Letter, March 17).

For his part, von Eschenbach has been generous with the society.

In 2003, after AACR at the last minute cancelled its annual meeting in Toronto, citing concerns about the SARS virus, von Eschenbach stepped in to help the society hold a meeting in Washington instead. In an unprecedented move, he bypassed peer review to give AACR \$2 million to cover costs of the meeting where he was to appear as a keynote speaker to discuss the 2015 goal (The Cancer Letter, June 20, 2003).

AACR later obtained insurance coverage for its losses in Toronto (The Cancer Letter, April 15, 2005).

Funding Opportunities:

Program Announcements

PAR-06-247: Community Participation In Research.

Letters of Intent Receipt Date: April 17. Application Submission Date: May 17. R21 grants would be supported for research on health promotion, disease prevention, and health disparities that is jointly conducted by communities and researchers. Full text: <http://grants.nih.gov/grants/guide/pa-files/PAR-06-247.html>.

Inquiries: For NCI--Sabra Woolley, 301-435-4589; woolleys@mail.nih.gov.

PA-06-269: Mechanisms of Alcohol-Associated Cancers. NIH invites R01 research grant applications that will employ state-of-the-art technologies to understand the molecular and biochemical mechanisms by which chronic alcohol consumption leads to the development of cancers of organs such as oral cavity, pharynx, larynx, esophagus, stomach, large intestine, liver, and breast. Full text: <http://grants.nih.gov/grants/guide/pa-files/PA-06-269.html>.

Inquiries: For NCI--Sharon Ross, 301-594-7547; rosssha@mail.nih.gov.

PA-06-270: Mechanisms of Alcohol-Associated Cancers. The PA will use the R21 funding mechanism. Full text: <http://grants.nih.gov/grants/guide/pa-files/PA-06-270.html>.

PA-06-254: Basic Research in the Bladder and Lower Urinary Tract. NIH invites R01 applications for research studies which focus on basic cellular, molecular, genetic and developmental mechanisms of the normal and abnormal function of the bladder and lower urinary tract. NCI has a special interest the role of the bladder microenvironment in bladder carcinogenesis and progression. Full text: <http://grants.nih.gov/grants/guide/pa-files/PA-06-254.html>.

Inquiries: For NCI--Suresh Mohla, 301-435-1878; sm82e@nih.gov.

PA-06-255: Basic Research in the Bladder and Lower Urinary Tract. The PA will use the R21 funding mechanism. Full text: <http://grants.nih.gov/grants/guide/pa-files/PA-06-255.html>.

PA-06-256: Exploratory/Developmental Clinical Research Grants in Obesity. The R01 initiative encourages clinical studies that develop interventions for prevention or treatment of overweight or obesity in either adults or children. Exploratory epidemiological research with a goal of informing translational/clinical research will also be supported. Full text: <http://grants.nih.gov/grants/guide/pa-files/PA-06-256.html>.

Inquiries: For NCI--Sharon Ross, 301- 594-7547; sr75k@nih.gov.

PA-06-238: Research on Sleep and Sleep Disorders. The R21 funding opportunity encourages research to improve understanding of the neurobiology or functions of sleep over the life span, enhance timely diagnosis and effective treatment for individuals affected by sleep-related disorders, or implement and evaluate innovative community-based public health education and intervention programs. Full text: <http://grants.nih.gov/grants/guide/pa-files/PA-06-238.html>.

Inquiries: For NCI--Ann O'Mara, 301-496-8541; ao45s@nih.gov.

PA-06-138: The Secretary Pattern of Senescent Cells. The R21 initiative encourages applications that examine the changes in microenvironment that are induced by cell senescence, both in vivo and in vitro, and as a result of senescence being attained by any of the known inducers of the process. Full text: <http://grants.nih.gov/grants/guide/pa-files/PA-06-138.html>.

Inquiries: For NCI--Suresh Mohla, 301--435 – 1878; mohlas@mail.nih.gov.

In Brief:

AACR Awards Honor Research, Public Service, In Cancer

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chairman and scientific director of the National Surgical Adjuvant Breast and Bowel Project.

Sherry Lansing received the Public Service Award for her contributions to the advancement of cancer research. She is a trustee of the AACR Foundation and is founder and chairman of The Sherry Lansing Foundation.

Janet Woodcock, deputy commissioner for operations and chief operating officer at FDA, received the Public Service Award for advancing public health in the U.S.

Robert Weinberg was honored for his contributions to the discovery and elucidation of human oncogenes with the Kirk A. Landon Prize for Basic Cancer Research. Weinberg, member of the Whitehead Institute for Cancer Research, is professor of biology at Massachusetts Institute of Technology.

The Dorothy P. Landon Prize for Translational Cancer Research was presented to **Angela Brodie** for her work in developing aromatase inhibitors. She is professor of pharmacology and experimental therapeutics at the University of Maryland School of Medicine and researcher at the University of Maryland Marlene and Stewart Greenebaum Cancer Center.

Tadatsugu Taniguchi, professor, Department of Immunology, Graduate School of Medicine and Faculty of Medicine, University of Tokyo, received the Pezcoller Foundation International Award for Cancer Research. Taniguchi, known for his work with the tumor suppressor protein P53, was recognized for discoveries that have a major impact on cancer research and molecular immunology.

The Irving Weinstein Distinguished Lectureship was awarded to **Phillip Sharp** for his 40 years of research into the molecular biology of gene expression relevant to cancer, and his discovery in 1977 of RNA splicing. Sharp is professor and founding director of the McGovern Institute for Brain Research Massachusetts Institute of Technology.

Carlo Croce received the G.H.A. Clowes Memorial Award for his work in leukemia and lymphoma research and treatment. He is the John Wolfe Professor for Cancer Research, chairman, Department of Molecular Virology, Immunology, and Medical Genetics, director, Human Cancer Genetics Program, The Ohio State University Comprehensive Cancer Center.

The Richard and Hinda Rosenthal Foundation Award was given to **William Kaelin** for discoveries related to the von Hippel-Lindau tumor suppressor protein. He is investigator, Howard Hughes Medical Institute, professor of medicine, Dana-Farber Cancer Institute and Brigham and Women's Hospital, Harvard Medical School, senior physician, Brigham and Women's Hospital.

Nancy Hopkins, Amgen Inc. Professor of Biology, Massachusetts Institute of Technology, received the Women in Cancer Research Charlotte Friend Memorial Lectureship. She was honored for her contributions in cancer research and her leadership in the advancement of women in science.

Olufunmilayo Olopade received the Minorities in Cancer Research Jane Cooke Wright Lectureship for research in clinical cancer genetics. She is professor, Department of Medicine, director, Center for Clinical Cancer Genetics, University of Chicago Medical Center.

The Award for Outstanding Achievement in Cancer Research was presented to **Ivan Dikic** for his research in tyrosine kinase signaling and regulation. Dikic is professor, Institute for Biochemistry II, Goethe University Medical School, Frankfurt.

Nicholas Day received the American Cancer Society Award for Research Excellence in Cancer Epidemiology and Prevention for his developing and applying statistical methods that support modern cancer epidemiology.

The Cancer Research and Prevention Foundation Award for Excellence in Cancer Prevention Research was presented to **Scott Lippman** for his work in cancer prevention. He is the Ellen F. Knisely Distinguished Chair in colon cancer Research, professor of cancer prevention, chairman, Department of Clinical Cancer Prevention, Division of Cancer Prevention, M.D. Anderson Cancer Center.

Merrill Egorin was presented with the Joseph H. Burchenal Clinical Research Award in recognition of his achievements in clinical and preclinical cancer pharmacology. Egorin is professor of medicine and pharmacology, University of Pittsburgh Cancer Institute.

The Bruce F. Cain Memorial Award was given to **Julian Adams**, chief scientific officer, Infinity Pharmaceuticals. He was recognized for the synthesis of Bortezomid, the first selective protease inhibitor, and for recognizing the protease inhibitor as a cancer therapeutic.

The Henry Cancer Center

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Geisinger Health System has exciting opportunities for cancer specialists to join the staff at The Henry Cancer Center in Wilkes-Barre, Pennsylvania. The Henry Cancer Center is a partnership between Geisinger and Fox Chase Cancer Center focused on the development of cancer prevention strategies, cultivating cancer research, enhancing diagnostic techniques and providing advanced treatment, clinical trials and research to the people of North-eastern and Central Pennsylvania. A position at this cutting-edge facility offers the opportunity to work under the leadership of **Mohammed Mohiuddin, MD, FRCR, FACP**, Medical Director of The Henry Cancer Center, Co-Director of Geisinger Cancer Institute and renowned cancer specialist.

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