

THE

# CANCER LETTER

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## Alliteration And Prayer Were His Tools For Making Progress Possible For People

*By Kirsten Boyd Goldberg*

NCI Director Andrew von Eschenbach brought a ministerial style of speech to the federal government's cancer research program.

Von Eschenbach employed sermon-like cadences to describe his vision of a world where no one suffers and dies from cancer. He praised God for the blessings bestowed on the U.S. and its scientific research enterprise. On occasion, he suggested that experts advising him bow their heads in prayer.

Whether he addressed a lay audience or a committee of cancer experts, von Eschenbach kept things simple, resorting to metaphors and alliteration. His speeches were intended to reassure believers and persuade doubters that an explosion of knowledge—an “exponential” rate of progress—would make it possible to fulfill his goal to “eliminate suffering and death due to cancer by 2015.”

Von Eschenbach's speeches reflected his beliefs, his understanding of  
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## NCI Cancels Von Eschenbach Farewell Party, Returns Contributions Amid Ethics Questions

*By Paul Goldberg*

An NCI “farewell reception and roast” for Andrew von Eschenbach didn't take place as scheduled on May 17, and contributions toward a gift for the departing NCI director are being returned, institute officials said.

According to invitations, guests were expected to pay \$25 to attend the event. “Gift contributions also welcome,” the invitation read. Ethics experts said collection for a gift to von Eschenbach appeared to be in conflict with federal ethics rules, because he runs FDA, an agency that regulates NIH-sponsored trials.

This makes NIH employees a “prohibited source” for gifts to von Eschenbach, experts said. The gift solicitation also appeared to be in conflict with federal law restricting solicitation of political contributions.

The story of the party and the gift solicitation was published in The Cancer Letter May 5 and in The Washington Post May 8. On May 12, NCI and NIH officials who registered to attend the event, received the following email from an address identified as “NCI RSVP”:

“Greetings:

“With apologies for the late notice, we wanted to let you know that the reception for Dr. Andrew C. von Eschenbach is being moved to June or  
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## Discovery, Development And Delivery Deterimined Direction

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biology, and his approach to managing NCI. Consider his catch phrase, “the three Ds,” which stands for “discovery, development and delivery.” This was more than a clever rhetorical device. The three Ds guided von Eschenbach’s reorganization of the NCI leadership structure.

Other alliterations—“cooperation and collaboration” and “progress with a purpose”—defined von Eschenbach’s strategy for reaching the 2015 goal. At FDA, von Eschenbach is pursuing another alliterative strategy: “molecular metamorphosis.”

The Cancer Letter has compiled von Eschenbach’s catch phrases and impromptu remarks to deepen the understanding of the man whose impact on cancer research will be felt for years to come.

### God, Prayer and Blessings

“We are a nation blessed with the privilege of serving each other and the world... I ask that you please pray that God will guide me, and I will pray that God will continue to bless you, the NCI, and America.” *The Cancer Letter*, Feb. 8, 2002.

“So, ladies and gentlemen, the institute is blessed. It’s blessed by incredible talent and incredible commitment across the entire continuum of NCI.” *The Cancer Letter*, Feb. 20, 2004.

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



Slide shown in a speech to the NCI State-of-the-Science Sarcoma conference, June 2002.

“We have many challenges along that line [staff reductions], and I have again the blessing of many talented people to work with to be able to manage and deal with some of those challenges.” *The Cancer Letter*, Feb. 27, 2004.

“You are transforming the world. You are saving lives. God bless you for it, and God continue to bless you in your work.” *The Cancer Letter*, April 9, 2004.

At a meeting of the National Cancer Advisory Board, after mentioning that he will give a briefing on the 2015 goal at the White House later that day: “While I’m gone, and while you are working hard, if you have a little moment in time for a quiet moment of prayer, it would be greatly appreciated.” *The Cancer Letter*, June 18, 2004.

“The NCI is incredibly blessed that over the past few years we have constantly been able to assemble a leadership team and a senior management team, and constantly been able to nurture and develop the people within the agency who have done such an unbelievable job and unbelievable effort... [W]e have been blessed over the past year to have John Niederhuber move from his position as chairman of the National Cancer Advisory Board to now take the role as a deputy director of the NCI.” *Speech to the Association of American Cancer Institutes*, Oct. 18, 2005.

“Michael Milken, with his vision of the future,

recognized that cancer was not just a scientific problem, or a medical problem, but that it was an economic problem, a political problem, a cultural problem, and a societal problem. And that kind of vision and that kind of leadership, I personally think, is why God has gifted him with the ability to be with us over the past 10 years, to provide the kind of leadership to bring us together for a societal solution to the problem of cancer.” *The Cancer Letter, March 12, 2004.*

### Alliteration in Action

“As director, I will work to foster the **cooperation, collaborations, and consortia** that are the key to a **comprehensive** solution to the **cancer** problem.” *The Cancer Letter, Feb. 8, 2002.*

“[E]ach of you and every single one of you, working together, **collaboratively** and **cooperatively**, will assure that we will reach and achieve our destination.” *Speech to AACI, Oct. 18, 2005.*

“This board has heard me over a period of the past four years constantly emphasize the theme of **collaboration** and **coordination**.” *The Cancer Letter, Dec. 9, 2005.*

“[W]e have laid out a strategy that embodies the three D’s, as we are calling them: **discovery, development, and delivery**.” *The Cancer Letter, Feb. 14, 2003.*

“So, **discovery, development, and delivery** are not linear, but circular, and circular in a way and in a process that is rapidly accelerating with regard to turnover and with regard to rate.” *Speech to AACI, Oct. 18, 2005.*

“The concept is that the four deputies, by being arrayed across **discovery, development, and delivery**, will be able to provide the executive leadership function for the organization.” *The Cancer Letter, Feb. 20, 2004.*

“This meeting has been ample testimony of the enormous progress that has been made across this continuum of **discovery, development, and delivery**.” *The Cancer Letter, April 29, 2005.*

“Our goal in all of this is to ensure we are providing the **right** intervention to the **right** patient for the **right** reasons, at the **right** location, at the **right** time, with

## Collaborative science

*A continuum of care*



*The 3Ds: Slide shown on a “Cancer Awareness Tour” of South Florida with Rep. E. Clay Shaw Jr. (The Cancer Letter, Feb. 3, 2006).*

outcomes that can be monitored in **real** time.” *NCI Director’s Update, Oct. 26, 2004.*

“This year, it was my great privilege to meet with [staff] and share with them the fact that it is **progress** with a **purpose**, but **progress** is only **possible** because of **people**.” *The Cancer Letter, Feb. 27, 2004.*

### Advanced Alliteration

“NCI will continue to foster and develop programs that will enhance our ability to unravel the **complexity** across the **continuum** of **discovery, development, and delivery** by facilitating our **collaboration** and **cooperation** and bring together the **diverse disciplines** and talents that this enormous **challenge demands**.” *The Cancer Letter, April 29, 2005.*

“We are at a **magic moment**, a moment in time in which we must look, not just to the past and what we’ve accomplished, but more importantly, to the future and what is within our grasp, and how to **accomplish** and **achieve** that future, by nurturing and building upon what we have created, and leveraging it to its ultimate goal, to its ultimate outcome. Because we have the ability to create **progress** that also has a **purpose**.” *The Cancer Letter, April 29, 2005.*

“I will strive to set a tone for the kind of FDA

we all wish to continue to build, an agency that cares about **people**. Together, we have the opportunity and the obligation to put the **patient**, the **public**, and the **person** at the center of all that we do.... We will not rest until we can assure that the fruits of **discovery**, **development**, and **delivery** are available to all Americans.” *The Cancer Letter*, Nov. 4, 2005.

“The cancer centers, with regard to their own integration and **collaboration** and **coordination**, ... 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.” *The Cancer Letter*, Dec. 9, 2005.

### **Dreams, Visions, Magic**

“We are moving from dreams years ago, to what is perhaps vision today, and hopefully, very soon will be reality for tomorrow.” *The Cancer Letter*, July 18, 2003.

“Some may say that back in 1971, [the National Cancer Act] was not a dream, but perhaps a fantasy.” *The Cancer Letter*, July 18, 2003.

“Clearly, there will be no magic bullet or single solution to this challenge, but there can be a magic strategy.” *The Cancer Letter*, July 18, 2003.

“Fantasies and dreams and visions can become a reality.” *The Cancer Letter*, April 9, 2004.

“We are at this magic moment in the trajectory of cancer research that has led us to this point where we have the opportunity to seize upon the explosion in the knowledge that’s occurring and rapidly accelerate the pace of that progress, such that instead of a linear journey, we actually are embarking on an exponential journey that leads us to 2015.” *The Cancer Letter*, April 9, 2004.

“This Challenge has become the Vision for the Nation’s Cancer Program as we all strive to dramatically reduce the burden of cancer.... We believe that the Vision is within our grasp, and we are prepared to stretch

the boundaries of science, imagination, and human will to achieve it.” *Introduction to the NCI Strategic Plan, The Cancer Letter*, March 10, 2006.

### **Flying at High Altitudes**

“[A]s I have been able to have the privilege and benefit of being able to fly at 60,000 feet, if you will, like an AWAC airplane looking over this entire National Cancer Program, and in fact, the international effort, it’s continuously clear to me, the crucial and central role that the cancer centers and the Cancer Centers Program, all of you coordinated and integrated together, the critical role that you play in what is, in fact, a radical and unbelievable transformation in both biomedical research and in health care.” *The Cancer Letter*, Oct. 21, 2005.

“The opportunity to fly at 40,000 feet, so to speak, and witness the remarkable breadth of work done at NCI and in the entire cancer community, but, more importantly, the unmatched dedication to saving lives, has been truly gratifying.” *The Cancer Letter*, March 24, 2006.

### **Exploring the Cosmos**

“I have said often, and I continue to, going forward: our cancer centers are black holes. They have become enormous gravitational forces.” *The Cancer Letter*, Oct. 8, 2004.

“When one recognizes [that] 41 out of 44 SPOREs, without design, developed within cancer centers, there is a gravitational force that’s occurred.” *The Cancer Letter*, Feb. 28, 2003.

“What we have the opportunity to do is to... create a program with a cancer focus that will hopefully create a gravitational field.” *The Cancer Letter*, July 2, 2004.

“[Science is developing] at almost warp speed. The opportunities that are before us are extraordinary and almost beyond imagination. The kinds of things that are happening in other fields that are impacting upon the cancer program are also changing at light speed.” *The Cancer Letter*, Dec. 3, 2004.

“One might what wonder, what does going to Mars have to do with conquering cancer or eliminating the suffering and death due to cancer? You would be amazed at the opportunities that exist for close collaboration, and synergy, and cooperation.” *The Cancer Letter*, Dec. 9, 2005.

“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.” *The Cancer Letter, Dec. 9, 2005.*

“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.” *The Cancer Letter, Dec. 9, 2005.*

### **Albert Einstein**

“Our ability to understand cancer and its fundamental mechanisms is critically linked to our development of technology. Could you imagine what Einstein could have done with a laptop?” *The Cancer Letter, Oct. 31, 2003.*

“The pace of scientific progress, fueled by the wonders of new technology, is accelerating. Today’s Einsteins have laptop computers, not blackboards.” *USA Today, Jan. 21, 2004.*

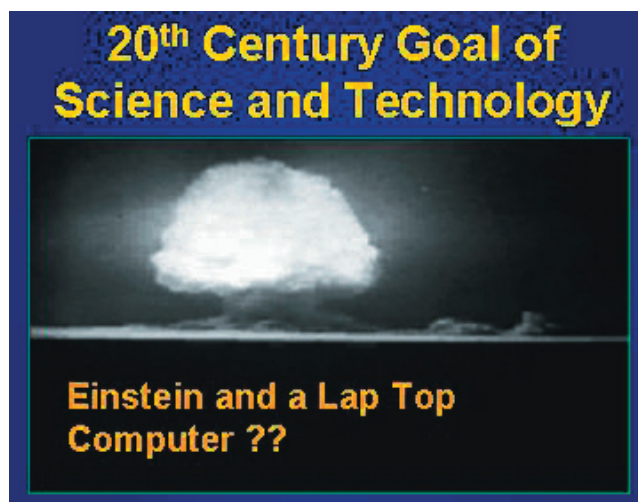
“To put the promise in perspective: Could you imagine what Einstein could have done, if, instead of having a blackboard and chalk, he had this laptop that’s sitting before me?” *Announcing the Cancer Bioinformatics Grid, March 9, 2004.*

“Could you imagine what Einstein could have done if he had some of the tools that we have available to us today?” *The Cancer Letter, April 9, 2004.*

### **War and Strategy**

“Our mantra is: we get ready, we fire, and we steer. It’s not ‘ready, aim, fire.’ We are launching. We are moving initiatives ahead that we believe are important strategically to impact on that continuum of cancer process.” *The Cancer Letter, June 13, 2003.*

“We are no longer in a mode of ‘ready, aim, fire,’ which is unfortunately, too often, ‘ready, aim, aim, aim,



*Slide shown at American Association for Cancer Research 2004 annual meeting.*

and then fire.’ I apologize for my surgical personality, but my aim is, ‘ready, fire, and then steer.’ We are moving towards action.” *The Cancer Letter, Oct. 31, 2003.*

“The only way to steer is to get the appropriate inputs. So I need to hear from you. If I have to change my deodorant, or if I have to use a different brand of toothpaste, it’s OK, you can tell me that, too. I don’t have any problem with critical comments at all. We need that.” *The Cancer Letter, Oct. 31, 2003.*

“Over the past year we have put a lot of time and energy into strategy.” *The Cancer Letter, Feb. 20, 2004.*

“[NCI faces] the need and the opportunity to take bold steps without being absolutely, 100 percent certain, as to where all those roads ultimately are going to lead.” *The Cancer Letter, March 11, 2005.*

“We’re not going to simply launch this and hope good things will happen. This will be managed very aggressively.” *The Cancer Letter, March 11, 2005.*

### **Change**

“It’s a process that’s only really enjoyed by a six-month-old with a dirty diaper.” *The Cancer Letter, May 20, 2005.*

“Change can be evolutionary or it can be revolutionary. It can be a process that is natural and normal and somewhat gradual, or it can be a process that is quite, at times, cataclysmic, and, in fact, quite challenging.” *The Cancer Letter, May 20, 2005.*



War on cancer: Slide shown at the NCI State-of-the-Science Sarcoma conference, June 2002.

“Oncology is actually in the midst of a revolutionary, evolutionary change. We are in the midst of a process, a change process, that has been quite natural and has been quite gradual, but, in fact, at this particular moment in time, has the potential to also be quite traumatic.” *The Cancer Letter*, May 20, 2005.

“As I have taken an administrative leave from my daily administrative responsibilities and turned those over to John [Niederhuber] as the chief operating officer appointed by the Secretary, I am confident, I am certain, that the NCI is, and will continue to maintain, the important and essential pace of progress. Nothing will change.” *The Cancer Letter*, Oct. 21, 2005.

“Change is a process, that I’m fond of saying, the only human organism that really likes change is a six-month-old with a dirty diaper. [It] is... a process that causes a great deal of anxiety, because it opens up for us risk and it opens up for us the unknown. But change can also be an unbelievable time of opportunity, and without it, there is no growth, there really is no future.” *The Cancer Letter*, Oct. 21, 2005.

“Nothing has changed with regard to the vision and mission and strategic direction and important role of the NCI.” *The Cancer Letter*, Dec. 9, 2005.

### Molecular Metamorphosis

“You have created, you are a part of, you are core and central to, not simply a transformation, but a metamorphosis. A metamorphosis in which the future is no more like the past than a butterfly is like a caterpillar.” *Speech to AACI Oct. 18, 2005.*

“[T]hat transformation ... is so profound and so radical that I call it a metamorphosis: a molecular metamorphosis in which the future of health and healthcare will be no more like the past than a butterfly is like a caterpillar. It is that radical. It is that profound... But the caterpillar, in its metamorphosis, has no choice in what it will become. It is destined to be a butterfly. We have a choice.” *Speech to Food and Drug Law Institute, April 6, 2006.*

### The Rise and Fall of the 2015 Goal

“I have set out—and it has been embraced, I’m pleased to say—a challenge goal that shapes our mission and shapes our vision. And the challenge goal that we have accepted as an institute is to eliminate the suffering and death due to cancer, and to do it by 2015.” *The Cancer Letter*, Feb. 14, 2003.

“We do not believe that it’s an unrealistic expectation. I believe we can look at the American public and the world and set this goal without it being something that is considered unrealistic.” *The Cancer Letter*, June 13, 2003.

“When I first presented the fact that we had committed to a challenge goal of eliminating the suffering and death due to cancer and bring that about by the year 2015, there were many of you who thought that perhaps I’d lost my mind, and certainly, perhaps, my credibility.” *The Cancer Letter*, Oct. 31, 2003.

“Our goal, our objective, our mission is to use the talents and skills that we have assembled and created, the opportunities that are before us, and assure that no one who hears the words, ‘You have cancer,’ will suffer and die as a result of that disease, and to bring that about within the period of the next 10 years, by 2015.” *Speech to AACI, Oct. 18, 2005.*

“Together, we have been pursuing an ambitious and bold goal. We challenged ourselves and this nation to eliminate the suffering and death due to cancer, and to bring that about by the year 2015. It is a challenge that has been made possible by the exponential growth in biomedical science.” *The Cancer Letter*, Nov. 4, 2005.

“Excitement continues to build across the cancer community about the progress we are making toward our Challenge Goal to eliminate the suffering and death due to cancer by 2015!” *Introduction to the NCI bypass budget. The Cancer Letter*, Dec. 2, 2005.

“None of that will happen without the kind of leadership that we’ve experienced from Congressman [E. Clay] Shaw. He’s not only understood the importance of the goal..., he has also understood that in order to do that, we need a national commitment.... With his leadership in Congress, helping to guide and shape and develop our national policies..., we are not talking about a disease that will inflict fear, but a disease for which we have great hope.” *The Cancer Letter, Feb. 3, 2006.*

“[The goal] was based on the idea of a business plan that would enable us to continue to have increasing resources specifically directed to the NCI.... [A]lthough we continue to struggle with the date as to whether it is accomplished in 2015, 2014, or 2016, what is increasingly apparent is no one is questioning the ultimate outcome, the destination.” *The Cancer Letter, Feb. 11, 2006.*

“This has the potential... to impact upon the problem of cancer in a way that will eliminate the suffering and death we see all around us.” *The Cancer Letter, Feb. 17, 2006.*

“What may be at issue is the timeline of how long it will take us to accomplish that goal.” *The Cancer Letter, March 17, 2006.*

### **The 2010 Goal**

SEN. ARLEN SPECTER: “When you cite the year 2015, what will occur by then, at least according to your current projections?”

VON ESCHENBACH: “As we sit here today, Senator, two out of three patients who hear the words, ‘You have cancer,’ can look forward to being a cancer survivor. We intend to close that gap. We will close that gap across the continuum of discovering more about cancers’ mechanisms.”

SPECTER: “What is going to happen by 2015 as you project it?”

VON ESCHENBACH: “No one who hears the words, ‘You have cancer,’ will suffer or die from the disease. We will prevent and eliminate the outcome.”

SPECTER: “So you will move from two out of three survivors to all three?”

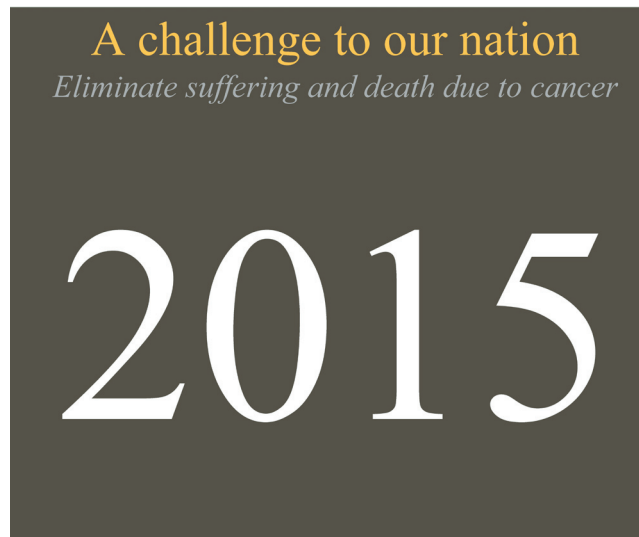
VON ESCHENBACH: “Yes, sir.”

SPECTER: “What is the budget now of NCI?”

VON ESCHENBACH: “\$4.8 billion.”

SPECTER: “When you appeared here last, just a few weeks ago, I asked you what it would take to move that date up to 2010.”

VON ESCHENBACH: “Yes, sir.”



*Slide shown on a "Cancer Awareness Tour" of South Florida with Rep. E. Clay Shaw Jr.*

SPECTER: “You have had several weeks to prepare your answer.”

VON ESCHENBACH: “Yes, sir.”

SPECTER: “What is your answer?”

VON ESCHENBACH: “The answer has been submitted to you, sir, for the record, and is going through process through NIH and the Department, as it is being submitted officially to the Congress and to you specifically.”

SPECTER: “OK, so tell me what the answer is.”

VON ESCHENBACH: “There are three parts to the answer. One is to embrace the National Advanced Technology Initiative for cancer. The second was to expand our Cancer Centers Program network by the addition of 15 more cancer centers. And the third part of the equation was the expansion and integration of our clinical research infrastructure.”

SPECTER: “What will it cost?”

VON ESCHENBACH: “We have a proposed budget that would support those initiatives that would amount to approximately \$600 million a year.”

SPECTER: “Six hundred million dollars a year?”

VON ESCHENBACH: “Yes, sir.”

SPECTER: “Extra?”

VON ESCHENBACH: “Yes, sir.”

SPECTER: “And you can move the date from 2015 to 2010?”

VON ESCHENBACH: “We would be able to accelerate the pace of progress and close that gap, in my opinion.”

SPECTER: “OK. Well, that’s the kind of specificity we like to have.” *The Cancer Letter, July 29, 2005.*

## Teaching Elephants To Dance

*In response to National Cancer Advisory Board member David Koch's question, "How can we make the NCI elephant dance like a ballerina?"*

"David, I think you are going to find that you have around this table a number of people like you, who I would describe as dance instructors. I think you will help this elephant learn how to dance." *The Cancer Letter*, Sept. 17, 2004.

"I think we always perhaps have an equal problem with the music, in terms of what we are dancing to. But dancing is what we must do. We must be more nimble, we must be more aggressive." *The Cancer Letter*, Sept. 17, 2004.

"Complex business organizations that look like elephants, in order to survive, are going to have to move like cheetahs." *The Cancer Letter*, Sept. 17, 2004.

"We do, in fact, need to teach this elephant to dance." *The Cancer Letter*, Dec. 3, 2004.

"The NCI is an elephant. Often, we are referred to as an 800-pound gorilla, and a variety of other kinds of metaphors." *The Cancer Letter*, Dec. 3, 2004.

"[W]e need to begin to work now to teach that elephant how to dance." *The Cancer Letter*, Dec. 3, 2004.

## "Within Our Grasp"

"I'm not being Pollyannaish about this and underestimating the complexity or the enormity of the challenge, but I am absolutely convinced that it is within our grasp and is doable." *The Cancer Letter*, June 13, 2003.

"What we can see within our immediate grasp is the opportunity to eliminate the outcome of cancer, the suffering and death that we and others around this nation see around them each and every moment of each and every day." *The Cancer Letter*, April 29, 2005.

"We have enormous opportunity and infrastructure within our grasp as a nation to be able to come together as a National Cancer Program to use these tools to bring us together as a community, as a team, and as an opportunity to fulfill the promise that was made in 1971...." *The Cancer Letter*, April 29, 2005.



"Magic Moment"—A slide shown at the NCI State-of-the-Science Sarcoma conference, June 2002.

"One of the most intriguing transformations in the new molecular era with regard to delivery is the very fact that we now have within our grasp, for the first time perhaps, to be able to deal with the complexity of the human problem of cancer in the clinical setting." *The Cancer Letter*, Oct. 21, 2005.

"We now have within our grasp the real possibility of delivering interventions that will make cancer and many other diseases manageable conditions that no more will result in suffering and death." *The Cancer Letter*, Nov. 4, 2005.

"I believe that with the incredible resources that we have... the goal, the destination, and the timeline are still within our grasp." *The Cancer Letter*, March 17, 2006.

## Toward The Platinum Age

"That will be, not just the golden era of cancer research. That will be the platinum era, the era in which the richness of understanding of cancer is fully coupled with our ability to eliminate the suffering and death due to cancer." *The Cancer Letter*, April 29, 2005.

"By virtue of what we've created in terms of the elegance of the science ... we are actually on the verge of going from the golden age of cancer research to the platinum age of cancer research. As we move from the golden age to the platinum age, we move to a time when we can begin to not only understand cancer, but, in fact, be able to deal with cancer in ways that were unimaginable even a few decades ago." *The Cancer Letter*, April 29, 2005.



## **Andy Grove**

“We are in the midst of a strategic inflection in oncology, taking a phrase coined by Andy Grove, chairman of Intel Corp. That inflection calls for us to begin to emphasize a systems approach to biology and a seamless cancer research agenda in which we participate and collaborate together. It’s a time to achieve the dream of eliminating—not only understanding cancer—but eliminating the pain and suffering and death.” *The Cancer Letter*, April 19, 2002.

“We are at a magic moment in biomedical research that is best described by Andy Grove—one of the founders of Intel—as a ‘strategic inflection point,’ a time of opportunity that can result in exponential progress.” *NCI Director’s Update*, Sept. 9, 2003.

## **Diagnosis and Screening**

“When I began, and well into my career at M.D. Anderson, the only way I had of being able to diagnose the most common cancer that occurs—prostate cancer—was what I could feel with the tip of my finger.” *[Raises his right hand and wiggles the index finger in a simulation of a digital rectal exam.]* “That’s, in fact, how primitive we were only 20 years or so ago.” *The Cancer Letter*, Oct. 21, 2005.

## **Proteomics**

“One drop of blood, a laser, a mass spectrometer, a sophisticated computer, and we can be able to pick up the signature of very, very early ovarian cancer in women at a time when the disease is almost uniformly curable as opposed to what unfortunately happens today when we find it in most patients at a time when it’s uniformly fatal.” *The Cancer Letter*, March 11, 2005.

“I appreciate the fact that we may not have been clear in the sense of exactly what all the specific goals are in terms of how they are laid out, but I think there has been a conceptual framework that recognizes that, as we create this trunk and as we go down some of these branches, we don’t know yet what the full extent of that branch is going to be and how far that is going to take us, but we believe that ... proteomics can take us down a branch to early diagnosis, take us down a branch of being able to monitor therapy. What this is intended to do is to provide a very disciplined, very systematic way of exploring those branches, rather than trying to play with the leaves and then figure out whether they actually fit onto the tree. Does that help?” *The Cancer Letter*, March 11, 2005.

## **NCI’s Communications Strategy**

“If anybody who has been doing this work for as long as the people in this room doesn’t feel the excitement, the enthusiasm, for what is coming by virtue of this incredible progress, you’ve got a problem. So, I think messaging is important.” *The Cancer Letter*, March 31, 2006.

“There are so many things I would like to tell you. It’s regrettable sometimes that these kinds of stories and these kinds of activities do at times get reported, but they may not necessarily get reported accurately, or get reported from the perspective of what is truly, fully involved in the initiative.” *The Cancer Letter*, Sept. 26, 2003.

“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. 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.” *The Cancer Letter*, Dec. 9, 2005.

“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." *The Cancer Letter*, Dec. 9, 2005.

"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." *The Cancer Letter*, Dec. 9, 2005.

"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 communicated, 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. 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." *The Cancer Letter*, Dec. 9, 2005.

"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." *The Cancer Letter*, Dec. 9, 2005.

"Common look and feel is much more than simply a strategy for how we present our communications. 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." *The Cancer Letter*, Dec. 9, 2005.

"[T]he message that progress has been made,

progress is being made... has got to be told in a positive way that leads to expectations of hope." *The Cancer Letter*, March 31, 2006.

### **"Good News" About The Budget**

"We have many issues with regard to the budget that are going to be further amplified or complicated by projections for out-years in which the percentage of increases are going to be significantly less than what had been experienced in years past, where there was always ample new dollars coming into the budget to take care of commitments to non-competing renewals and new initiatives.

"And yet, the important message to take home is that there has never been before in the history of the enterprise as much money in cancer research....

"So, it is, in fact, very good news." *The Cancer Letter*, Nov. 28, 2003.

"As we move forward, we are undertaking a strategic review of all current programs and activities at NCI to determine which should be terminated or scaled back and, in turn, how to redeploy those funds to more strategically focused areas." *The Cancer Letter*, Feb. 13, 2004.

"We have to, whenever we say 'Yes' to something, say 'No' to something else. The fact of the matter is, we start the year almost in a deficit.... We have budget challenges, but we have unbelievable opportunities. There has never been as much money invested in cancer research as there is right now.

"We are blessed." *The Cancer Letter*, Feb. 27, 2004.

"We have redeployed all the dollars, and now we are at a point where we are still about \$7.5 million short, we have more commitments than dollars.... Resources have been a significant challenge for us, not because resources have shrunk, in fact, just the opposite is true. There has never been as much invested in cancer research as there is today." *The Cancer Letter*, March 26, 2004.

"We are going to be looking at a situation in which whatever increase we receive will not be sufficient to cover all our commitments for the 2005 budget.... When we launch programs, we will do so with the understanding that when we say yes to something, by definition we must say no to something else." *The Cancer Letter*, Dec. 3, 2004.

“The fact of the matter is, we have commitments in place, and we will be transitioning those commitments to new commitments.” *The Cancer Letter*, March 11, 2005.

“[W]e have more money invested in cancer research by this nation than has ever been true before.” *The Cancer Letter*, April 29, 2005.

“We have the largest number of cancer researchers today [and] we’ve funded the largest number of [grants] we’ve ever funded, so it’s not that we’re in bad shape. We’re actually celebrating success, in that it’s the greatest it’s ever been.” *The Cancer Letter*, March 31, 2006.

“[Congress] wouldn’t know an RPG from a SPORE if it fell on them.” *The Cancer Letter*, March 31, 2006.

### **Joint Mission: FDA and NCI**

“It is the strong professionalism of the management and staff at both organizations that will enable me to carry out the dual roles.” *The Cancer Letter*, Sept. 30, 2005.

“My joint positions at the NCI and FDA allow the opportunity to closely integrate the discovery aspects of biomedical research that have been led by the NCI and NIH with the delivery aspects of the FDA.” *The Cancer Letter*, Oct. 7, 2005.

“As a prudential matter, I have also decided that, as Acting Commissioner, I will not participate in certain FDA matters in which NCI is a party, unless the Department requests that I participate on a case-by-case basis.” *The Cancer Letter*, Oct. 7, 2005.

“Because of the close collaboration and relationship that we have been fortunate to have with the FDA... it was, for me, an important and significant opportunity to not only contribute to that institute and that agency in its particular time of need, but also an opportunity to continue to nurture and foster the collaborative, interactive, cooperative relationships that have been so core and so central to all of our important success.” *The Cancer Letter*, Oct. 21, 2005.

“In the end, when those two agencies... are successful, then we will see a world in which no one will suffer and die from cancer, a world in which the

full fruits of the era of molecular biology and molecular medicine are made available to patients and to the public in a safe and effective, rapid and cost-effective manner, and we will not only have changed the future of cancer, but we will have changed and improved the health care for the entire nation and for our world.” *The Cancer Letter*, Oct. 21, 2005.

“Fortunately, I’ve been privileged to have an NCI with superb leadership, and although I will retain the title of director, I have taken a leave of absence administratively.... enabling me to focus my full attention here at the FDA.” *The Cancer Letter*, Nov. 4, 2005.

“I did not come here to be a figurehead, to merely warm the commissioner’s seat, or to be a ceremonial leader. While I am here, I will lead. I will make decisions.” *The Cancer Letter*, Nov. 4, 2005.

“First of all, there is nothing ambiguous about the two roles. They are very clear and they are very defined as it relates to my level of responsibility and my activity, the things I engage in, the things I do not engage in, and there is a team of six lawyers that have been very explicit about all of that.” *The Cancer Letter*, Nov. 23, 2005.

“As far as how long it will last, quite candidly, and frankly, that’s a decision that’s above my pay grade.” *The Cancer Letter*, Nov. 23, 2005.

“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.” *The Cancer Letter*, Dec. 9, 2005.

### **Return on Investment**

“There have been many who have begun to ask the question, with that significant investment, have we, the cancer research community, delivered a return on that investment?”

“Some have begun to question that and say ‘No.’ They turn to statistics that look at the differences that perhaps have been achieved in other diseases, such as heart disease, and look at the decline in mortality of heart disease over the past three decades as compared

to what's happened in cancer, and question that return on investment.

"But we know that over those past three decades, what we have invested is the intellectual talent, and commitment, and passion of those of you in this room. And over those past few decades, we, along with other biomedical researchers, have, in fact, contributed to the development of a fund of knowledge, that for the first time today is truly producing a revolution in our ability to not only understand cancer, but to deal with cancer.

"So, though others say 'No,' as the director of the National Cancer Institute, I say, 'Yes.' Yes, we have delivered a return on that investment....

"The purpose of our investment is, in fact, that we will not just understand cancer, but be able to fulfill the promise that was begun in 1971 with the idea that we can conquer cancer." *The Cancer Letter*, April 29, 2005.

### Public Service

"What an incredible privilege to be a public servant and join the ranks of so many talented and dedicated individuals who have sacrificed in order to serve others." *The Cancer Letter*, Feb. 8, 2002.

## Farewell Party For NCI Director Cancelled, Money Returned

(Continued from page 1)

early summer. We will let you know the new date as soon as possible."

NCI officials confirmed that contributions were being returned. "At this time, the reception for Dr. von Eschenbach is being moved to a later date," NCI spokesman Nichole Saiontz said in an email. "Final decisions regarding the event will be made in the future. In the meantime, contributions already received have been returned."

The aborted reception is the latest in a string of setbacks for von Eschenbach since he was named acting FDA commissioner last September:

—He has ended involvement in two pharmaceutical industry-funded coalitions. Last fall, he resigned from C-Change, where he served as vice president of the board of directors. Earlier this year, his photo and an endorsement were removed from the Web site of the Cancer Gold Standard, an employee benefits accreditation program run by the CEO Roundtable on Cancer.

—He has backed away from his initial idea that he would run both NCI and FDA, uniting the two institutions in pursuit of his goal to "eliminate suffering and death due to cancer by 2015."



You are cordially invited to attend  
**"An Evening at the Cloister"**  
a farewell reception and roast  
in honor of

**Andrew C. von Eschenbach, M.D.**  
Director, National Cancer Institute

Wednesday, May 17, 2006  
5:30 p.m. – 7:30 p.m.

The Cloister  
Mary Woodard Lasker Center (Bldg. 60)  
1 Cloister Court  
National Institutes of Health  
Bethesda, Maryland

**R.S.V.P.**  
to Ms. Beverly Goodwine,  
by May 10, 2006  
at 301-594-3085 or NCIRSVP@mail.nih.gov.

\$25 per person  
gift contributions also welcome

*Invitation to the ill-fated farewell reception.*

—In the most stunning retreat, von Eschenbach has stopped referring to his 2015 goal in speeches he makes as FDA commissioner. NCI officials, too, are growing reluctant to mention the von Eschenbach goal that scientists regard as wildly unrealistic and irresponsible.

Von Eschenbach has announced that he would leave NCI to serve as FDA commissioner, but it is unclear when his departure would occur. No acting director has been named as the institute struggles to adjust to shrinking budgets and sort through the von Eschenbach legacy even before the director's formal departure.

Meanwhile, von Eschenbach's future at FDA is uncertain. Two Senators—Hillary Rodham Clinton (D-N.Y.) and Patty Murray (D-Wash.)—placed a hold on his confirmation until FDA acts on the Plan B emergency contraceptive.

With the hold in place and the reception cancelled, it appears that von Eschenbach will be neither grilled by the Senate, nor roasted by NCI staff.

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