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Cancer Centers: Permanent Reinvention

In Legal Brawl, UPenn, Abramson Institute Say Former Director "Absconded" With Inventions

This is the fourth installment in a series of articles that examines the fundamental challenges to the cancer centers as they chart their future beyond 2012.

By Paul Goldberg

The trustees of the University of Pennsylvania and a research institute founded by a major donor filed two separate lawsuits in which they claim that former Penn cancer center director Craig Thompson had failed to turn over intellectual property worth hundreds of millions—or perhaps billions—of dollars.

Thompson has since moved from Philadelphia to become president of Memorial Sloan-Kettering Cancer Center. He denies any wrongdoing.

Using harsh language and claiming astronomical damages, the two lawsuits filed in the U.S. District Court for the Southern District of New York amount to a very public brawl in the topmost tier of cancer research.

The Leonard and Madlyn Abramson Family Cancer Research Institute, one of the plaintiffs, is affiliated with the University of Pennsylvania but is a separate non-profit. Thompson served as both the Penn cancer center director and the research institute scientific director until November 2010.

(Continued to page 2)

News Analysis

Filing Will Ignite Complex Litigation Costing Millions, With Uncertain Rewards

By Robert Cook-Deegan

The Abramson Institute and University of Pennsylvania are suing a former faculty research star, who went on to become president at Memorial Sloan-Kettering Cancer Center, one of the most conspicuous and prestigious jobs in cancer research.

The dispute appears to be entirely about money, since the complaint does not ask for an injunction, which is usually the sought-after tool in conflicts over intellectual property.

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In Brief

Nimer To Lead Miami Sylvester Cancer Center

STEPHEN NIMER was named the director of the **Sylvester Comprehensive Cancer Center**.

Nimer, the Alfred P. Sloan Chair in Cancer Research at Memorial Sloan-Kettering Cancer Center, will take the post at the University of Miami this spring.

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Thompson Says Suits Are Without Merit, Denies Wrongdoing

(Continued from page 1)

While at Penn, Thompson also co-founded a company that became known as Agios—which specializes in cancer metabolism, the area of science Thompson also explores—and which has attracted $261 million in investments from pharmaceutical firm Celgene Corp.

"An unscrupulous doctor, Defendant Craig Thompson, M.D.,…chose to abscond with the fruits of the Abramson largess generated by his work at the Institute and thereby cheat future generations of the intended benefits of the donation and the Institute's intellectual property," the Abramson lawsuit reads.

Ultimately, the two lawsuits are about the back-and-forth flow of ideas between the industry and academia, and the institutions' eagerness to reap benefits from inventions to which they may (or may not) have legitimate claims.

The cases may turn on the definition of "invention," experts in intellectual property say.

The Penn suit, for example, focuses on two papers published in major scientific journals, which list Thompson as an author. However, authorship doesn't always equal a patent claim, and Thompson isn't listed as an inventor on the patents and patent applications held by Agios.

In a statement to The Cancer Letter, Thompson said the allegations in the two lawsuits are without merit.

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"It is unfortunate that the Abramson Family Cancer Research Institute has chosen to go down this path," Thompson said.

The University of Pennsylvania complaint was flawed "both factually and legally," he said. "I am very disappointed that Penn chose to file its lawsuit without making any effort to speak with me or ascertain the true facts before filing a suit that unjustly harms my reputation."

The University of Pennsylvania officials declined to comment on the suit.

Thompson's attorneys haven't responded formally to the lawsuits, and their filing in the Abramson action is expected in a matter of days.

Besides Thompson, the Agios co-founders are Tak Mak, senior scientist at the Division of Stem Cell and Developmental Biology at the Advanced Medical Discovery Institute at the Ontario Cancer Institute, and Lewis Cantley, professor in the departments of systems biology and medicine at Harvard Medical School and the director of cancer research at the Beth Israel Deaconess Medical Center.

The company was formed in 2007.

Lottery for Universities

Cancer centers control massive portfolios of intellectual property. Alas, only a small portion of these holdings is commercially viable.

"We know that technology transfer is essentially playing the lottery for universities," said Eric Campbell, director of research at the Mongan Institute for Health Policy at the Harvard/MGH Center for Genomics. "The vast majority of institutions make little or no money at this whatsoever, and when institutions do make money, they make money from a single big hit, a big drug, a big product.

"If something that either went out the back door or something that the university passed on becomes a big hit, it's not surprising that institutions want a piece of that," Campbell said.

The Philadelphia dispute also appears to illustrate what happens when lawyers—or possibly large donors—interpret science.

How does authorship correlate with inventorship? How do you gauge one scientist's contribution to a group effort? When does a contribution to a paper signal a potentially patentable discovery that a scientist is contractually obligated to report to his or her institution?

The Abramson suit seeks damages of over $1 billion in each of three counts. The University of Pennsylvania is seeking at least $100 million in each

of six counts.

The two complaints are posted at http://www.cancerletter.com/categories/documents.

These cases are anything but open-and-shut, said Robert Cook-Deegan, director of the Center for Genome Ethics, Law & Policy at the Institute for Genome Sciences & Policy and Sanford School of Public Policy at Duke University.

"No one should prejudge the outcome of this case, as the facts and details will be highly relevant," Cook-Deegan said.

If the dispute goes forward, millions of dollars will be spent on lawyers and consultants examining who contributed what to which invention and whether these contributions amounted to patentable discoveries.

Cook-Deegan noted the harsh language of the Abramson complaint.

"One feature that did capture my attention was the sentence in the complaint that characterizes Dr. Thompson as 'an unscrupulous doctor [who] chose to abscond with the fruits of the Abramson largess generated by his work,'" he said. "It's plain that the largess was conditional on ownership rights that are now being contested, but that sentence also has motivational implications that make it about Dr. Thompson's reputation, not just the money. Proving whether that sentence is borne out or gratuitous rhetorical overreach will now be one of the goals of both parties."

Cook-Deegan's analysis, which compares the case with similar legal disputes over intellectual property appears on p. 1.

The facts on the ground in Philadelphia add another level of complexity to the dispute.

The big donor who founded the institute Thompson headed is the entrepreneur Leonard Abramson, former head of U.S. Healthcare. That company was sold to Aetna for over $8 billion in 1996, and the Abramson family gave the University of Pennsylvania $100 million to establish the institute.

Experts say it's unclear how the relationship between the University of Pennsylvania and the Abramson research institute affects the case.

Was Thompson only a professor at the University of Pennsylvania, bound solely by the regulations of the university, or was there another administrative level involved? Was he obligated to comply with additional requirements of the Abramson research institute?

The Definition of Invention

The Abramson institute was the first entity to file a suit against Thompson, Agios and Celgene. The first version of that action was filed Dec. 20, 2011.

The university jumped in later with what amounts to a different complaint on Feb. 22. Penn's complaint names Thompson and Agios.

The Abramson suit claims that Thompson never disclosed that he was a founder and an officer of Agios. After the university learned about Thompson's role in Agios, the scientist said that his role in the company didn't include transfers of intellectual property.

Yet, the Abramson suit also notes that Agios was engaged in negotiations over acquiring a license to Thompson's inventions from Penn, and that these deals were never concluded.

It remains to be seen how the assertion that Penn had accepted Thompson's assurance that no intellectual property developed at Penn was being used by Agios can be reconciled with its assertion that Agios and Penn had been in negotiations over intellectual property that Thompson developed.

The Penn suit claims that Thompson "violated and breached the Patent Policy, breached the terms of his employment and breached his fiduciary duty to the university by failing to disclose to the university research and discoveries that he instead provided to a for-profit corporation and ultimately disclosed in international journal publications, both to the detriment of the university."

Instead of turning over his discoveries to the institution, Thompson gave the discoveries to Agios, which "tortiously interfered with Thompson's contractual obligations toward the university and abetted Thompson's breach of fiduciary duty," the Penn suit states.

The Penn complaint hinges on two papers, which list Thompson as an author:

• "Cancer-associated IDH1 mutations produce 2-hydroxygluterade," Nature, Dec. 10, 2009. The paper is posted at http://www.nature.com/nature/journal/v462/n7274/full/nature08617.html.

Thompson is listed as one of the authors, along with scientists from Agios, Princeton University, University of California Los Angeles, Beth Israel Deaconess Medical Center, and the Massachusetts Institute of Technology.

Thompson is neither a senior author nor a corresponding author on this paper.

"The Common Feature of Leukemia-Associated IDH1 and IDH2 Mutations Is a Neomorphic Enzyme Activity Converting alpha-Ketoglutarate to 2-Hydroxyglutarate," Cancer Cell, March 16, 2010, posted at

http://crystal.med.upenn.edu/sharp-lab-pdfs/CancerCell_Ward_IDH2.pdf.

Thompson was the senior author and the corresponding author of this paper. The paper includes the disclosure that Thompson has financial interest in Agios.

According to the lawsuit, the findings described in the Cancer Cell paper build on the data in the Nature paper. Thompson "failed to disclose the subject matter of the publication to [the Penn Center for Technology Transfer] and the University, as required by the patent policy.

However, the university knew about the publication. In fact, the university issued a press release, which remains posted at: http://www.uphs.upenn.edu/news/News_Releases/2010/02/leukemia-genetics/.

A copy of the press release is posted at: http://www.cancerletter.com/categories/documents.

The university complaint shows that on Feb. 18, 2010, the day the Cancer Cell paper was published online and the Penn press release went out, Thompson received an email from a university technology transfer official.

At a subsequent meeting, Thompson "downplayed the significance of the Nature and Cancer Cell articles and falsely presented…that the research and findings in the articles didn't amount to a patentable invention," according to the Penn complaint.

At the time of the meeting, Thompson would have known that, prior to the publication, Agios had filed at least 20 provisional patent applications "for the same subject matter disclosed in the Nature and Cancer Cell articles," the Penn complaint stated.

"Thompson's false representation was calculated to persuade CTT and the university that the university had no protectable interest in the inventions disclosed in the articles, and induced CTT not to take actions that would have protected the university's right to realize value from Thompson's research and discoveries," the complaint continued.

"Upon information and belief, Agios was aware that Thompson had both a contractual and fiduciary duty to disclose his creation of Inventions and Tangible Research Property to CTT and the university prior to the publication of the Nature and Cancer Cell articles and after their publication."

The university's tech transfer officials accepted Thompson's assurances, the complaint stated.

Thompson isn't listed as an inventor on patents and patent applications related to the science described in the two papers.

This is significant, wrote Cook-Deegan in his analysis in this issue of The Cancer Letter.

"The obligations to report inventions to the university are not pertinent if the inventions were not his to report, and with him not listed as an inventor, the university will have to argue that authorship on the articles should imply inventorship; but the legal definition of inventor does not map cleanly to authorship, even corresponding or senior authorship," he wrote.

Earlier in this series, The Cancer Letter focused on the National Comprehensive Cancer Network, an umbrella group formed by cancer centers two decades ago (Jan. 13) and the aftermath of a backfired effort to create an NCI-designated cancer center in Las Vegas (Jan. 20, 27).

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News Analysis

Suit Will Turn On Who Did What With Whose Money—and When

(Continued from page 1)

It seems likely that many funding streams were involved. It also seems likely that many pieces of paper (invention disclosures, employment agreements, funding agreements, and collaborative agreements) with funding partners, within the university and institute and with the company.

Litigating this will be extremely complex, as the outcome is likely to turn on who did what with whose money when, and who told whom about what when.

That is, the facts and precise language of various contractual arrangements will be differently interpreted by the plaintiffs and defendants.

Sometimes academic institutions do win intellectual property cases, such as when Johns Hopkins joined Baxter against CellPro. Even when they do win, the process is painful and highly public. The victors in that case, including the chief inventor, Curt Civin, still have painful memories of it.

Also, academic institutions lose some cases.

Academic research institutions have come up empty-handed after expensive and protracted litigation in *UC v Lilly, Rochester v Searle, Madey v Duke, Stanford v Roche,* and *Ariad v Lilly*.

• *UC v Lilly* was finally decided by the Court of

Appeals for the Federal Circuit in 1997, and left the University of California with valid patents on rat insulin, but no claims on human insulin, giving it no basis for getting royalties from Lilly's insulin products.

That litigation cost $30 million ($12.5 million from UC and $17.5 million from Lilly), lasted ten years, and rekindled UCSF's embarrassment over violating the recombinant DNA guidelines when cloning insulin.

By pursuing the case, UC wasted $12.5 million, reopened a sore, and gained no royalties.

• In *Madey v Duke*, the same court found that there was no meaningful "research exemption" from infringement liability in academic institutions promoting their "business interests" through research, and a professor prevailed against his previous university.

• *Rochester v Searle* and *Ariad v Lilly* involved universities seeking royalties on products they claimed infringed patents, but the courts found the patented inventions were too far upstream and did not meet criteria for granting patent protection.

Rochester sought royalties on cox-2 inhibitors, and in *Ariad v Lilly,* Harvard and MIT sought royalties on NF-Kappa B pathway inhibitors.

Ariad involved highly esteemed scientists and some spectacular science, but the arguments that the discoveries gave rise to a patent entitlement that reached into product royalties ultimately failed.

• In *Stanford v Roche*, a complex set of patent assignment and contractual agreements involved HIV diagnostics. Stanford claimed the Bayh-Dole Act conferred ownership rights to the university as a federal grantee.

The Supreme Court disagreed and ruled that Stanford's interpretation would fly in the face of hundreds of years of patent law precedent making inventors the central agents and default owners.

The fact that the key inventor worked at Stanford after a stint at Cetus (later bought by Roche) did not confer ownership on the intellectual property created while at Cetus and was not negated by his assignment of rights to subsequent patents to Stanford.

The element common to all these cases is that they went through litigation to at least one level of appeal, and the universities basically lost. In four of the five, the universities were unsuccessful plaintiffs suing others for royalties. In one case, Duke was a defendant against a former faculty member, who prevailed.

Patent litigation is a million-dollar ante game, and a case as convoluted and with as many players and intricate complexities as the complaint in *Abramson Institute v Thompson* and the *University of Pennsylvania v Thompson* will necessarily entail protracted discovery and expensive work to develop chronologies and paper trails.

The analogy to previous patent cases is inexact, as the cases above involved patent infringement, whereas Abramson Institute addresses "intellectual property" repeatedly, but does not allege infringement of institute or UPenn patents.

The harms alleged are, rather, failure to confer "Tangible Research Property and Inventions" to the Abramson Institute and University of Pennsylvania, failure to identify and disclose that IP, fraudulent misrepresentation, breach of fiduciary duty, and breach of contract.

No one should prejudge the outcome of this litigation, as the facts and details will be highly relevant.

One feature that did capture my attention in the Abramson suit was the sentence in the complaint that characterizes Dr. Thompson as "an unscrupulous doctor [who] chose to abscond with the fruits of the Abramson largess generated by his work."

It's plain that the largess was conditional on ownership rights that are now being contested, but that sentence also has motivational implications that make it about Dr. Thompson's reputation, not just the money. Proving whether that sentence is borne out or gratuitous rhetorical overreach will now be one of the goals of both parties.

To assess the claims in the University of Pennsylvania case, I pulled patents and patent applications for Agios.

I don't see Thompson listed as an inventor on any of them. To the degree the scientific results are inventions, they should be covered by the patents, and the definition of an inventor is a legal determination.

The university seems to be relying on a paper trail and set of obligations that more or less assume that Thompson had obligations to it.

I suspect the company will argue, however, that the inventions were made under its auspices, and that Thompson was not listed as an inventor, because he was not one.

The obligations to report inventions to the university are not pertinent if the inventions were not his to report, and with him not listed as an inventor, the university will have to argue that authorship on the articles should imply inventorship.

However, the legal definition of inventor does not map cleanly to authorship, even corresponding or senior authorship. Also, Thompson probably had some obligations to the company not to share proprietary data

arising in company research.

To my eyes, this is far from a slam dunk.

The patent office takes inventorship damn seriously, and inventors have to sign an "oath," quite literally. This constitutes a strong legal presumption that if you are (or are not) listed as an inventor, that's meaningful. It means you conceived or reduced to practice at least one thing subject to a patent claim.

I am not sure where the $1 billion and $100 million damage claims are coming from.

Penn is arguing it was due a share of the deals cut by Agios, but the money generated by Agios is no doubt for R&D to get products to market. Third Rock, ARCH and Flagship are venture capital investors, not pharma—they are clearly betting on R&D, and I suspect the money for Agios it is not profit, but investment.

If the company manages to sell some drugs, then fraction of royalties would be subject to negotiation. At this point, it still looks like a set of products in development.

My main observation: this probably has no business being in court. Both Agios and Penn may well be the worse for this dispute being handled as a matter of litigation rather than negotiation.

Robert Cook-Deegan is the director of the Center for Genome Ethics, Law & Policy at the Institute for Genome Sciences & Policy and Sanford School of Public Policy at Duke University.

HHS News

New Surgeon General Report On Adolescent Tobacco Use

Surgeon General Regina Benjamin released a report, Preventing Tobacco Use among Youth and Young Adults, detailing patterns and trends of youth tobacco use, its health effects, and the influence of tobacco marketing; and calls to refocus prevention efforts on adolescents.

The report shows that years of declining rates of tobacco use have slowed among young teens, and that declines have stalled in smokeless tobacco use.

Most current daily smokers, 88 percent, first used tobacco products by 18 years of age—with 99 percent of first tobacco use before age 26, according to the report.

The report calls for "coordinated, multicomponent interventions" to reduce the prevalence of smoking among young teens, including mass media campaigns, price and tax increases on tobacco products, school-based policies and programs, and statewide changes in smoke-free policies.

"The addictive power of nicotine makes tobacco use much more than a passing phase for most teens," said Benjamin. "We now know smoking causes immediate physical damage, some of which is permanent. Today, more than 600,000 middle school students and 3 million high school students smoke. We don't want our children to start something now that they won't be able to change later in life."

In adolescents, smoking causes permanent cardiovascular damage and reduction of lung functionality. Shortness of breath occurs immediately and it increases the risk of pulmonary diseases later in life.

"Targeted marketing encourages more young people to take up this deadly addiction every day," said HHS Secretary Kathleen Sebelius. "This administration is committed to doing everything we can to prevent our children from using tobacco."

Since the passage of the Family Smoking Prevention and Tobacco Control Act, FDA has taken steps to prevent tobacco use by adolescents, including enforcing age regulations, restricting sales of single cigarettes, and banning certain candy and fruit-flavored cigarettes. FDA has also supported state-based quitlines and launched intervention media campaigns.

"But for all the progress we've made…it kills an estimated 443,000 Americans each year, and every tobacco-related death is replaced by two new smokers under the age of 26," said Sebelius.

According to the report, "The evidence is sufficient to conclude that there is a causal relationship between advertising and promotional efforts of the tobacco companies and the initiation and progression of tobacco use among young people." In 2008, tobacco companies spent $9.94 billion on marketing cigarettes.

"This report makes it abundantly clear, young people are highly susceptible to tobacco advertising and marketing activities, leading many youth to a lifetime of addiction coupled with serious health consequences," said FDA Commissioner Margaret Hamburg.

John Seffrin, CEO of the American Cancer Society,

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called for more action and a continuation of current FDA anti-smoking policies. "This report highlights the urgent need to employ proven methods nationwide that prevent young people from smoking and encourage all smokers to quit, including passage of smoke-free laws, increases in tobacco excise taxes and fully funded tobacco prevention programs," he said.

"The report is evidence that strong implementation of the Tobacco Control Act is vital to stopping the influential marketing messages being delivered to teens on a daily basis by Big Tobacco."

The full report and summary can be found here: http://www.surgeongeneral.gov/library/preventing-youth-tobacco-use/index.html.

In Brief

Nimer to Lead Sylvester Center; NCI's Buetow Moves to Arizona

(Continued from page 1)

Currently vice chair for faculty development in Sloan-Kettering's Department of Medicine, Nimer plans to expand services at the Leonard M. Miller School of Medicine cancer center, including programs for breast cancer, lung cancer, prostate cancer and hematological malignancies, said the university.

He also plans to recruit more than 30 new scientists and physicians and expand the clinical and laboratory research capabilities.

According to a statement from the university, Nimer plans to recruit experts in areas such as bone marrow transplantation, mouse models of human cancer, and molecular diagnostics, as well as additional surgeons skilled in curative and restorative procedures such as breast reconstruction. He also plans to expand efforts in cancer prevention, screening and early diagnosis.

Nimer has conducted clinical and basic science research in the treatment and genetic basis of adult leukemia and bone marrow failure states, defining the regulatory mechanisms that control the production of blood cells and exploring ways to improve the results of bone marrow transplantation.

During nearly two decades at Sloan-Kettering, he established the inpatient hematology service and the autologous stem cell transplant program for adults with hematologic malignancies, which focused primarily on patients with non-Hodgkin's and Hodgkin's lymphoma.

He participated in the clinical trials that led to the FDA approval of lenalidomide for 5q-myelodysplastic syndrome, and decitabine for intermediate or high-risk MDS patients.

KENNETH BUETOW, the chief architect of the NCI's controversial caBIG bioinformatics program, has joined **Arizona State University** as director of computational sciences and informatics in the Complex Adaptive Systems Initiative.

Buetow is the second architect of programs established by former NCI Director Andrew von Eschenbach to move to Arizona State.

Anna Barker, former NCI deputy director and deputy director for strategic scientific initiatives, moved to Arizona State last August.

She now serves as director of ASU Transformative Healthcare Networks, co-director of the Complex Adaptive Systems Initiative and as a professor of practice within the School of Life Sciences, which is part of the College of Liberal Arts and Sciences.

Buetow will hold the rank of full professor in the School of Life Sciences.

According to ASU, the Complex Adaptive Systems Initiative was established in 2009 to leverage ASU's interdisciplinary research strengths on complex global challenges where an integrated cross-disciplinary effort is essential.

"This is an extraordinary time to be in biomedicine," Buetow said in a statement. "New ecosystem models are emerging that use information technology to reweave the very fabric of biomedicine, ushering in a new era of personalized, precision medicine.

"ASU and its New American University model is a unique place to be part of this revolution. The university's commitment to trans-disciplinary programs, especially through its Complex Adaptive Systems Initiative, provides a novel opportunity for me to work at the boundary of what is feasible today."

KHURSHID GURU was named the Dr. Robert P. Human Professor of Urologic Oncology at **Roswell Park Cancer Institute**.

Guru is the director of the Center for Robotic Surgery, an associate professor of oncology in the Department of Urology, and clinical assistant professor of urology at the University at Buffalo School of Medicine and Biomedical Sciences.

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His major interest is robotic surgical education and its incorporation for future generations of surgeons. The annual funds provided by the Huben Professorship endowment will be used to help expand robotic and surgical training and education opportunities.

Guru and his team pioneered the institute's program for robotic cystectomy. He performed the first robot-assisted cystectomy in Western New York in 2005. He has performed live demonstrations of robot-assisted prostatectomy at several international seminars.

ALBERT EINSTEIN, JR. will be awarded the **Association of Community Cancer Centers**' David King Community Clinical Scientist Award for service, leadership and commitment to the oncology community. The award will be presented at the association's annual meeting March 14 in Baltimore.

David King award winners become lifetime members of the ACCC National Academy of Community Oncology Scientists.

Recently retired, Einstein was executive director and a medical oncologist at the Swedish Cancer Institute in Seattle.

He practiced medical oncology for 17 years at the Virginia Mason Clinic in Seattle, where he was a member of the executive committee of the National Bladder Cancer Collaborative Group A, founder and principal investigator of the Virginia Mason Community Clinical Oncology Program, chairperson for bladder cancer research for the SWOG Genitourinary Committee, president of the Virginia Mason Research Center, and medical director of the Virginia Mason cancer program.

In 1993, he became associate center director for clinical affairs at the H. Lee Moffitt Cancer Center and Research Institute, where he helped to develop the center into a NCI-designated cancer center. In 1999, he returned to Seattle to establish and direct the Swedish Cancer Institute at the Swedish Medical Center.

Einstein was co-director and member of the board of trustees of the Marsha Rivkin Ovarian Cancer Research Center. His is a past president of the Association of Community Cancer Centers, a past member of the National Cancer Legislation Advisory Committee, and a past member of the national Medicare Ambulatory Payment Classification Advisory Panel.

NCI investigators reported that incidence trends have remained roughly constant for glioma, the main type of brain cancer hypothesized to be related to cell phone use, over a time period where cell phone use has increased substantially.

From 1992 to 2008, cell phone use increased from nearly zero to almost 100 percent of the U.S. population. Trends in glioma did not mirror that increase, said the investigators. The study results were published in the British Medical Journal.

The researchers compared the U.S. experience with two studies conducted in Europe, where cell phone use was widespread earlier than in the U.S. Those two European studies provided the primary evidence for IARC's 2011 reclassification of microwave radiation produced by cell phones as a possible human carcinogen.

Over the entire U.S. study period, glioma incidence patterns were roughly constant in all age groups. The authors recommended continuing surveillance of glioma rates for a number of reasons, including changing usage patterns and technology, and because tumor latency may be longer than has been observed to date.

US ONCOLOGY RESEARCH was recognized by the **Radiation Therapy Oncology Group** as the top member institution site for accruing patients into radiation research trials and for timely submission of research data.

With 19 RTOG-approved sites, US Oncology Research, supported by McKesson Specialty Health, accrued 64 patients to RTOG trials and achieved 100 percent timeliness data submission scores in 2011.

US Oncology Research earned full RTOG member status in June 2011 and has been accruing patients into RTOG clinical trials since 2008. All together, US Oncology Research affiliated physicians have enrolled 227 patients into RTOG clinical trials since joining, and more than 50,000 patients to oncology clinical trials overall.

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Program Director in Cancer Control and Prevention Research

The American Cancer Society (ACS) seeks a Program Director in the Extramural Grants Department to lead the Society's extramural research and training effort in the areas of cancer control and prevention, including: psychosocial and behavioral research, health policy and health services research, palliative care and symptom management research, health disparities research, and survivorship/QOL research. The position is located at the National Home Office in Atlanta, GA.

The Program Director will:

- serve as an expert source of information on advances in cancer research and the ACS grant programs to Society volunteers, staff, donors and national organizations and agencies,
- provide strategic advice to the department about promising future areas of investigation in his or her specific area of expertise,
- play a significant role in promoting the Society's Research and Training Program,
- support the fund-raising efforts of the Society,
- make presentations on cancer research topics to scientific and non-scientific audiences,
- support collaboration with internal and external partners to help integrate the cancer control and prevention research program throughout the Society's mission activities.
- assure unbiased, rigorous, peer review of grant applications by highly qualified scientists, conduct site visits, and administering awarded grants.

Minimum requirements are a MD, PhD or equivalent degree, 7-years of experience as an established investigator, a strong record of research funding support and peer reviewed publications. Salary is commensurate with the candidate's qualifications and experience.

Contact: David Ringer, PhD, MPH, National Vice President for Extramural Research. david.ringer@cancer.org

Interested candidates should apply online via www.cancer.org (Cancer.org -> Employment -> Search for Opportunities Now -> Job ID # 9533) and submit curriculum vitae, letter of interest, the names of three references, and an indication of salary requirements. Interviewing will start immediately and continue until the position is filled.