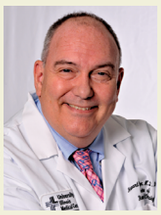
PEOPLE



UIC Photo Services

Howard Ozer, MD, PhD, known for his research on leukemias and lymphomas, was appointed director of the University of Illinois Cancer Center (UICC) in Chicago in June. He had been serving as interim director since the January 2011 death of the institution's previous leader, Gary Kruh, MD, PhD.

Among other responsibilities, Ozer will oversee the UICC application to become a National Cancer Institute–designated cancer center.

Wellcome Library, London

Sir Mark Walport, PhD, MB BChir, director of the Wellcome Trust in the United Kingdom (UK), has been appointed as the UK Government Chief Scientific Adviser, beginning in April 2013. Succeeding Sir John Beddington, he will help ensure that scientific knowledge informs policy decisions. Walport has led the Wellcome Trust, a global charity dedicated to funding biomedical research, since 2003.

Sanford-Burnham Medical Research Institute

John C. Reed, MD, PhD, chief executive officer of Sanford-Burnham Medical Research Institute in La Jolla, CA, was named editor-in-chief of *Molecular Cancer Therapeutics*, effective August 1. He replaces Daniel Von Hoff, MD, the journal's founding editor.

Reed earned his medical and doctoral degrees from the University of Pennsylvania School of Medicine in Philadelphia, where he also completed his clinical postdoctoral training. His research focuses on mechanisms that regulate apoptosis and how defects in apoptosis contribute to disease.

The recipient of numerous awards and honors, Reed has served on the editorial boards of several journals, including *Cancer Research* and *Clinical Cancer Research*.

Cell Lines Often Misidentified

Christopher Korch, PhD, doesn't like being the bearer of bad news.

The director of the University of Colorado Cancer Center's DNA Sequencing and Analysis Service recently analyzed a cell line that a researcher thought was endometrial cancer only to discover that it was actually breast cancer. The news forced the researcher to halt publication of a study in which he had used the misidentified cells. "It's hard to tell someone that their conclusions may be flawed and that they've lost 6 months', a year's, or a decade's worth of work," says Korch.

Unfortunately, such conversations aren't rare, says Korch. He and his colleagues recently published a study in *Gynecologic Oncology* that used DNA profiling to analyze dozens of ovarian and endometrial cell lines collected from multiple institutions in the United States, Europe, and Japan. They found significant rates of misidentification, contamination, and redundancy among the samples.

Among 51 samples purportedly from ovarian cancer cell lines, the researchers identified 8 as existing breast cancer, teratocarcinoma, or cervical cancer cell lines; 10 were redundant cell lines. Two supposedly normal endometrial cell lines were genotyped and found to be HeLa cervical carcinoma cells and MCF-7 breast cancer cells.

The new study adds to evidence compiled over several years showing that 18% to 50% of cell lines used in biomedical research, including cancer research, are misidentified, contaminated, or redundant.

Samples that are mislabeled and then shared aren't the only cause of identity problems. Equipment could be improperly sterilized or two researchers could be working with different cultures in the same hood, explains Korch. Also, cells can travel in aerosols, landing where they shouldn't, and survive. "HeLa grows well and can outcompete if they get into the culture of a slow-grower," he says.

The American Type Culture Collection, a nonprofit biologic resource center based in Manassas, VA, released voluntary guidelines in January calling for the routine authentication of cell lines with short tandem repeat (STR) profiling. Widely available, STR profiling takes about a week and costs $100 to $200 per sample.

"It's the equivalent of about 20 lattes to profile a cell line and know whether what you have is what you want," says Korch. "Is that too much to spend? Well, I'd rather be sure." ■

NCATS–Industry Project Gains Backers

An effort by the NIH National Center for Advancing Translational Sciences (NCATS) to connect academic researchers with industry to revive drugs that passed safety testing but failed for their initial treatment indications has signed on 5 additional pharmaceutical companies.

Early-adopters AstraZeneca, Eli Lilly, and Pfizer, who backed the Discovering New Therapeutic Uses for Existing Molecules program at its launch in May, are being joined by Abbott, Bristol-Meyers Squibb, GlaxoSmith-Kline, Janssen Pharmaceutical Research and Development, and Sanofi.

In fiscal year 2013, the program will provide up to $20 million to fund 2- to 3-year cooperative research grants that propose to investigate new therapeutic uses for any of the 58 compounds provided by the corporate partners.

The initiative "provides the opportunity to tap into the collective brain power of scientists across the United States and match a great scientific idea with the right industry compound," says program director Christine Colvis, PhD, of NCATS.

In addition, the pilot program's template agreements for intellectual property rights "will significantly reduce the amount of time it takes for each of the partners to negotiate the terms," says Colvis.

For corporate partners looking to take advantage of external research talent, the program makes perfect sense. "We're a very small percentage of the total knowledge base," says Donald Frail, PhD, vice president of Science New Opportunities at AstraZeneca Innovative Medicines in Waltham,