

## PEOPLE



Marcia McNutt

**Marcia McNutt, PhD**, took over as editor-in-chief of *Science* on June 1. The first woman to hold this role since the journal's inception in 1880, she succeeds

Bruce Alberts, PhD. McNutt formerly served as director of the U.S. Geological Survey. A former professor of geophysics at Massachusetts Institute of Technology in Cambridge, she has also served as president and CEO of the Monterey Bay Aquarium Research Institute in Moss Landing, CA.



Wellcome Library, London

**Jeremy Farrar, MBBS, DPhil**, a clinical scientist and infectious disease researcher, has been appointed director of the Wellcome Trust in London, UK, effective

October 1. He succeeds Sir Mark Walport, PhD, MB BChir. A professor of tropical medicine and global health, Farrar has been director of the Oxford University Clinical Research Unit in Ho Chi Minh City, Vietnam, since 1996. In addition, he serves on several World Health Organization advisory committees. The Wellcome Trust is a global charity that contributes more than \$1 billion annually to biomedical research.



Ernst Larsen

**Sir David Lane, PhD**, joined the Ludwig Institute of Cancer Research in New York, NY, as its scientific director on June 1. Lane is also the chief scientist

for Singapore's Agency for Science, Technology, and Research (A\*STAR). He will divide his time between A\*STAR and Ludwig, coordinating his new organization's global cancer research efforts.

Lane is credited with discovering the p53 protein, a vital tumor suppressor that is faulty in about half of human cancers. His current work focuses on controlling p53 and identifying targets for therapies that might restore its normal function.

## Bevacizumab Extends Cervical Cancer Survival

Findings from a randomized phase III study assessing two chemotherapy regimens with or without the angiogenesis inhibitor bevacizumab (Avastin; Genentech) show that adding bevacizumab extends overall survival in women with metastatic or relapsed cervical cancer by an average of four months compared to chemotherapy alone. The study, performed by the Gynecologic Oncology Group, represents the first time a targeted drug has significantly prolonged overall survival in these patients, researchers said.

The findings were presented on June 2 at the American Society for Clinical Oncology 2013 Annual Meeting in Chicago, IL, by Krishnansu Sujata Tewari, MD, a professor of obstetrics and gynecology at the University of California, Irvine, in Orange, CA.

Tewari said that standard chemotherapy demonstrates limited effectiveness against relapsed cervical cancer, extending survival by about 12 months. About 4,000 women die of cervical cancer in the United States every year. Worldwide, the disease claims about 250,000 lives annually.

"We learned that angiogenesis is very active in cervical cancer," said Tewari. "There's a lot of evidence that if we can inhibit or block this process, we can help eradicate the cancer."

Tewari's team began their trial in 2009, randomly assigning 452 women with recurrent or metastatic cervical cancer to receive chemotherapy with or without bevacizumab. Patients received one of two chemotherapies, either cisplatin plus paclitaxel or topotecan plus paclitaxel, so that the researchers could determine whether topotecan might be more effective than cisplatin, a standard chemotherapy option for advanced cervical cancer. However, there were no significant survival differences between the two chemotherapy arms.

The outcomes with bevacizumab proved different. The median overall survival for patients who received bevacizumab in addition to chemotherapy was 17.0 months compared with 13.3 months for patients who received only chemotherapy. Response

rates were also higher among the patients who received bevacizumab than among those who received only chemotherapy—48% versus 36%—and twice as many patients had complete responses (28 versus 14). Moreover, the responses lasted longer.

"We feel that's clinically meaningful in a population of patients that doesn't respond well" to standard treatment, Tewari commented.

Although they generally lived longer, the women who received bevacizumab did have a greater incidence of adverse events, especially gastrointestinal problems, genitourinary fistulas, high blood pressure, blood clots, and neutropenia—all side effects that have been previously linked to bevacizumab use. Yet women who received bevacizumab didn't report a significant decrease in quality of life, Tewari said.

"Showing an extension of survival is the gold standard, and I think this will be practice-changing," remarked Carol Aghajanian, MD, chief of the gynecologic medical oncology service at Memorial Sloan-Kettering Cancer Center in New York, NY.

Bevacizumab is approved by the U.S. Food and Drug Administration for the treatment of colorectal cancer, glioblastoma, non-squamous non-small cell lung cancer, and renal cell carcinoma. ■

## Going Public with Epigenetics

Epizyme, a biotech company based in Cambridge, MA, that specializes in drugs targeting epigenetic processes in cancer, filed with the Securities and Exchange Commission (SEC) in April for an initial public offering of stock. The company hopes to quickly develop its two leading drug candidates and to build a pipeline of similar drugs, all focusing on personalized treatments of cancers.

Four epigenetic drugs are currently approved by the U.S. Food and Drug Administration (FDA), targeting DNA methyltransferases and histone deacetylases. Epizyme focuses instead on a group of enzymes called histone methyltransferases (HMT) that are abnormally expressed in many cancers.