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ahead of
cancer

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New agenda?

BIOPROFILE

Written by Sukaina Virji-Jeganathan

PREDICTING THE FUTURE OF ONCOLOGY

A conversation with Anu D. Saad

The dynamic CEO of IMPATH Inc tells BIOPEOPLE of her plans to revolutionise cancer therapy discovery and development

When Anu Saad's family moved from India to America in the late 1960s, her father only planned to stay for the few years it would take to finish his studies. US cancer patients in particular will be grateful that he changed his mind.

More than 30 years on, this daughter of an English Literature professor is chairman and CEO of IMPATH Inc, the

hugely successful cancer information company. IMPATH is in the business of improving the prognosis of cancer patients. It has a database with more than 700,000 diagnostic profiles and is tracking in excess of 1.7 million cancer patients with respect to outcomes. In 2000, it analysed 175,600 cancer cases – almost 15% of the nation's total.

IMPATH provides patient-specific information to almost 8,000 physicians in about 2,000 hospitals and oncology centres. It also provides biotechnology and pharmaceutical companies with a comprehensive service to aid in drug discovery, clinical testing, approval and marketing.

IMPATH has a Biopharmaceutical/Genomics Services division, established about a year ago by Dr Saad, and recently renamed IMPATH Predictive Oncology. It provides information and other resources to companies conducting research into new cancer therapeutics, helping direct the research to where it is most valuable and furthering efforts to match patients to appropriate clinical trials. "We can help the biotechnology industry realise its potential," Saad says. "Up until now, it has been focused on discovery. The bottleneck at present is how to take the information and make it into real drugs. With cancer, to achieve success, they need IMPATH. With our vast store of retrospective data, we can help validate targets and plan clinical trials."

The well-documented example is the Genentech story. "We started our initial work with Genentech nine years ago," Saad explains. "There were



Photograph by Ronna Scharly

ten years on the board. Richard P. Adelson, the company's executive VP and COO, was appointed president.

Adelson joined IMPATH in 1992 as a salesman, at Saad's suggestion, it turns out. "I met Anu when she was scientific director, and I was working for another company. She told me to look into sales positions at IMPATH. So I did." He attributes Saad's success at IMPATH to "her understanding of the company's position and potential, and her astounding business instincts". So does this petite woman ever have to yell to get the job done? "Absolutely not, she leaves that to me," Adelson jokes. "She provides the guidance and the forethought, and leaves the execution to the rest of us."

So are there any plans for IMPATH to diversify into other disease categories? Not while Saad is in charge. "We have had the discipline to stay focused on cancer. It would have been easy in the early days to digress, but instead we have built a very powerful infrastructure

of information and technology."

IMPATH is almost exclusively focused on US cancer patients. Could its business be transferred to overseas projects? "We already have a number of collaborations with companies that are based outside of the US. They're going well and we expect this to continue and expand. But our physician services would be less easy to co-ordinate." The lack of a standardised cancer management strategy and screening protocol makes an IMPATH-type service difficult to administer in most European countries, particularly the UK, says Saad. IMPATH recently announced collaborations with Abgenix, Bristol-Myers Squibb and GlaxoSmithKline, although specific details were not disclosed.

Saad shrugs off any suggestion that being a woman has had a bearing on her success. "My strength has been in being a scientist where before there may have been a businessman in my position." But she describes the corporate atmosphere at IMPATH as "nurturing". She says the

management team at IMPATH is a close-working unit and that the turnover of staff is low. "There are many people at IMPATH that have been there a long time. We look after our own and promote from within. Maybe women respond better to this than men do."

What else would she like IMPATH to achieve whilst she is at the helm? "If we do nothing but make significant strides in cancer, then we'll have done quite a bit. In our lifetime, we're not going to get to a cure for cancer. But if we can get to a point where cancer becomes a chronic disease like asthma or diabetes, and a patient lives with cancer and dies at the age of 110 of a stroke or something, then that would be a huge victory. And we're getting there. Breast cancer, for example. If it's diagnosed early we can manage it extremely well. We have ways of monitoring the progress of patients after treatment, and these women can live perfectly normal, long lives. Patients do not need to die of cancer anymore." ■

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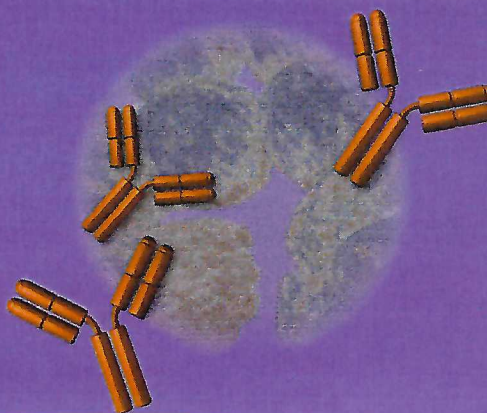


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