NATURE | NEWS

Surprising contenders emerge for Trump's NIH chief

A reproducibility guru, a former defence-research official and a controversial entrepreneur rumoured to be on list, along with current NIH leader and a congressman.

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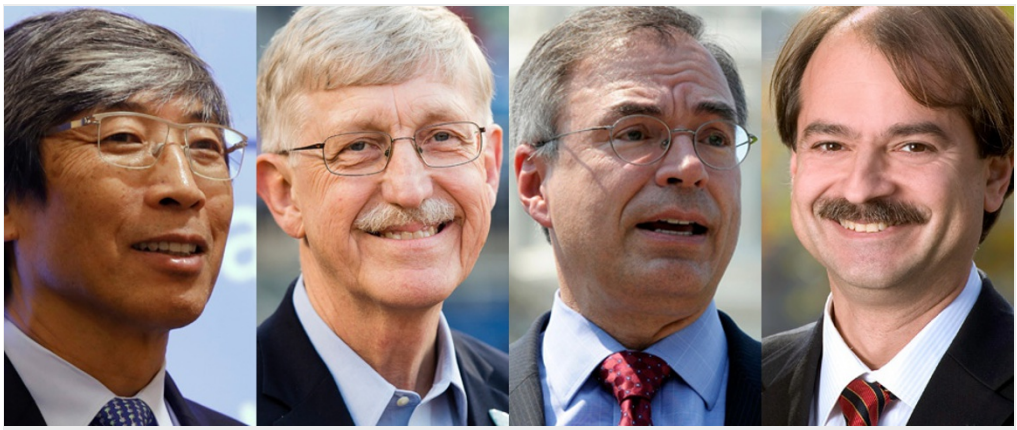

Reuters/AP/Getty/Stanford

Patrick Soon-Shiong, Francis Collins, Andy Harris and John Ioannidis are rumoured to be under consideration.

Could US president-elect Donald Trump be close to choosing a leader for the National Institutes of Health (NIH)?

Current NIH chief Francis Collins and Representative Andy Harris (Republican, Maryland), both front-runners for the job, met separately with Trump on 11 January, as did billionaire surgeon Patrick Soon-Shiong on 10 January. Several people familiar with the Collins and Harris meetings described them as job interviews.

Other rumoured candidates include Geoffrey Ling, a retired Army neurosurgeon and former director of biotechnology at the Defense Advanced Research Projects Agency (DARPA), who says that he met with Trump's transition team recently, and John Ioannidis, an epidemiologist at Stanford University in California who has pushed for reproducibility in biomedical science.

Although Ioannidis says that he has not been approached by Trump's staff, sources close to the transition team say that the scientist has been floated for the NIH position. "If they call, my first priority would be to make sure there are no strings attached in promoting any anti-science ideas," Ioannidis says, such as linking vaccines to autism.

But Collins — who has led the NIH since August 2009 — has already said that he would continue on if Trump asked. That would make Collins, the longest-tenured member of President Barack Obama's science 'dream team', the first NIH director since the 1970s to be chosen by two presidents.

Known for his skill at communicating with lawmakers, Collins has the backing of four senior Republican members of Congress, who signed a 2 December letter urging Trump to keep him on. But extending a single director's tenure for so long may not be in the agency's best interest, says Ezekiel Emanuel, a bioethicist at the University of Pennsylvania in Philadelphia.

"In general, I think more than eight years has not been a good idea," he says. "There's a cycle, and eight years is hard to have new ideas and new energy."

Others worry that Trump could go too far in the opposite direction, and pick an NIH chief without a significant science track record or experience in managing large research projects. With both Harris and Soon-Shiong, "my concern would be that this is a person who hasn't really been tested", says Keith Yamamoto, a biologist at the University of California, San Francisco.

Culture clash?

Harris, an anaesthesiologist, has taken a strong interest in the NIH during his three terms in the House of Representatives. He helped to write the 21st Century Cures Act, a law enacted last year to reform research and development at the NIH and the Food and Drug Administration, and pushed the NIH to develop a five-year strategic plan.

And Harris has taken a special interest in early-career scientists, proposing legislation that would force the NIH to set aside more money for young researchers and to lower the age at which investigators receive their first grant.

Many lobbyists and science advocates contacted by *Nature* refused to comment on the record about Harris. Some expressed worry that his policy positions — including staunch opposition to research with human embryonic stem cells — would be at odds with the NIH's culture.

"He would be much more entrepreneurial in outlook and attitude" than Collins, says one long-time NIH-watcher, who works in science policy. "If it's Harris, I think there would be a mass exodus of senior leaders."

Still, Harris may benefit from having served in the House with Representative Tom Price (Republican, Georgia), whom Trump has nominated to lead the Department of Health and Human Services, which oversees the NIH.

Business interests

And his interest in early-career scientists could give him an edge with key Trump advisers, including Silicon Valley billionaire Peter Thiel, who met with Trump on 11 January, and former House speaker Newt Gingrich. Both are said to be particularly interested in improving conditions for young researchers.

Another candidate who could appeal to Thiel is Ling. As the first director of DARPA's biotechnology office, Ling oversaw the kind of 'high-risk, high-reward' projects that the NIH does not often fund — and Thiel has said that science needs more bold, entrepreneurial ventures.

Ling says that he met with the Trump transition team as recently as the week of 9 January, although he would not comment on whether he met with Trump himself. "They're really spending a lot of time trying to decide what direction they want to go," he says.

If selected as director, Ling says that he would seek to increase NIH's engagement with the private sector, particularly with start-up companies. Doing so could help the NIH navigate difficulties posed by its relatively flat funding and increase opportunities for young scientists.

"NIH wants to grow," he says. The start-up world "is a robust environment right now, it's out there," Ling says, "but with a little bit of help from NIH, I think it could really explode and that's a good thing".

Dark horse

If Trump is looking for an outsider candidate, that could boost the chances of Soon-Shiong, a billionaire surgeon who runs a network of health companies called NantWorks.

Soon-Shiong was among the scientists who advised vice-president Joe Biden's Cancer Moonshot initiative. He also runs his own, separate programme called Cancer MoonShot 2020, a collaboration between several pharmaceutical companies that are developing immunotherapies.

Sources who have spoken with the transition team say that Soon-Shiong is also under consideration for other government positions, including presidential science adviser. (Another rumoured candidate for science adviser, former NIH director Elias Zerhouni, told Bloomberg News on 9 January that he did not want to leave his current post at drug giant Sanofi.)

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Updates

Updated: Updated with comments from Geoffrey Ling.

2 comments

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Bernadette Pajer • 2017-01-18 06:41 AM

I hope whoever Trump chooses is not tied to pharmaceutical companies, and is someone who understands the importance of ridding the NIH and all related entities of corporate influence. He/she needs to be able to work with Price, and to support Robert Kennedy, Jr. and the new Commission on Vaccine Safety and Scientific Integrity. For many Americans, the corporate control of government agencies that regulate and make policy on public health is a number one concern. The most pressing concern, is vaccine safety. I beseech the editors of NATURE to look deeply into the current science of vaccination and human immunity. We must move the conversation beyond the controversy and return it to science which shows unequivocally that vaccines and vaccine components can and do cause autism in those who are either genetically susceptible to injury, or those whose current health or other environmental exposures make them vulnerable. Let's set side aside arguments about the validity and weight of epidemiological studies and simply look at the biological and mechanistic studies of vaccine components. In May of 2016, cancer researchers announced that thimerosal downregulates ERAP1, the protein involved in peptide trimming. http://pubs.acs.org/doi/abs/10.1021/acsmedchemlett.6b00084?journalCode=amclct Impaired trimming is a hallmark of autism. Thimerosal has not been fully removed from all vaccines in the US, it is still found in trace amounts in Tripedia (DTaP), 2 versions of single dose flu vaccines (up to 1µg), and in full amounts in the multidose flu vaccines (25µg). Flu shots are now given to infants as young as 6 months. (see FDA data) As well, the vaccines in developing nations are predominantly multidose and contain the full amount of thimerosal. To only consider the health impact of American children is unethical. Another study sheds light on the involvement of immune stimulation and the introduction of antigens to chronic illness. The abstract concludes: "Processing of specific antigens, peptide-dependent changes in global properties of the MHC-I molecules, such as folding and stability, or both may be pathogenic." http://www.sciencedirect.com/science/article/pii/S0161589016301535 Since 2005 the FDA has known about the possible dangers of fetal cells in vaccines (http://www.fda.gov/ohrms/dockets/ac/05/slides/5-4188S1_4draft.ppt), and this study in 2014 shows a link between vaccines containing fetal cells and residuals and autism rates. http://www.academicjournals.org/journal/JPHE/article-full-text-pdf/C98151247042 There are numerous studies that not only show but utilize the ability of Polysorbate 80 (Tween 80) to penetrate the blood brain barrier, carrying other substances into the brain. Polysorbate 80 is an ingredient in many vaccines. The removal of most thimerosal from US vaccines coincides with an increase in the amount of aluminum in vaccines, and an increase in the number of vaccines administered. The studies on the neurotoxicity of aluminum abound. Here is one from 2015: Biopersistence and brain translocation of aluminum adjuvants of vaccines. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4318414/ "We previously showed that poorly biodegradable aluminum-coated particles injected into muscle are promptly phagocytosed in muscle and the draining lymph nodes, and can disseminate within phagocytic cells throughout the body and slowly accumulate in brain. This strongly suggests that long-term adjuvant biopersistence within phagocytic cells is a prerequisite for slow brain translocation and delayed neurotoxicity." In 2015, there was a momentous discovery: The lymphatic system is directly connected to the brain: "It's a stunning discovery that overturns decades of textbook teaching: researchers at the School of Medicine have determined that the brain is directly connected to the immune system by vessels previously thought not to exist." "The brain and the adaptive immune system were thought to be isolated from each other, and any immune activity in the brain was perceived as sign of a pathology. And now, not only are we showing that they are closely interacting, but some of our behavior traits might have evolved because of our immune response to pathogens," explained Jonathan Kipnis, chair of UVA's Department of Neuroscience." https://news.virginia.edu/illimitable/discovery/theyll-have-rewrite-textbooks In light of this discovery alone, everything we thought we knew and understood about the impact of vaccines and vaccine components should be reevaluated. To find a comprehensive exploration of environmental causes of autism, see Dr. James Lyons-Weiler's book on the subject. All his citations are online at envgencauses.com. This is just a sampling of the science not currently being considered and incorporated into vaccine design and vaccine policy. With any other pharmaceutical product, the science would not be argued and millions of parental reports of injury worldwide would not be dismissed. A few dozen, even a few hundred accounts of regression and other adverse events following vaccination could be considered coincidence, or temporal, but millions of such reports worldwide cannot continue to be dismissed. Observation is the first step in science. Observation indicates a closer look is indicated. When the makers of an entire pharmaceutical category have been shielded from liability for injury or deaths from their products, we have the recipe for disaster. Doctors are not being taught how to recognize vaccine injury. The current science is not incorporated into the policies and guidelines coming from the agencies they trust. Despite all of the evidence to the contrary, the AAP told its member physicians: "The opposition to the presence of aluminum as an adjuvant in some vaccines can be addressed by providing evidence for both the necessity of the aluminum for a vigorous immune response and the lack of evidence for its toxicity." https://pediatrics.aappublications.org/content/138/3/e20162146 CDC, FDA, AAP and others are failing doctors, putting them in an unconscionable position. Doctors have devoted their lives to healing and maintaining the health of their patients, but they are being fed information that is false, misleading, or absent critical details. Fraud is Rampant: for other products, vaccine makers are included in the top 100 False Claim Act cases, and the fines/settlements are in the

billions, and hundred-millions. Some cases were also assessed with criminal penalties: GlaxoSmithKline, Pfizer, Merck, Novartis, and Sanofi. http://www.taf.org/general-resources/top-100-fca-cases Why would companies such as Merck behave any differently for their line of vaccines—for which they have no financial liability? On October 12, 2011, in Bruesewitz v. Wyeth (No. 09-152), the Court decided Section 22(b)(1) of the 1986 NVICA categorically barred state-law claims alleging that a vaccine was defectively designed. Justice Sotomayor and Ginsberg dissented, saying: “Its decision leaves a regulatory vacuum in which no one ensures that vaccine manufacturers adequately take account of scientific and technological advancements when designing or distributing their products.” Add the revolving door between the CDC and FDA and pharmaceutical companies (Julie Gerberding is a prime example), and we find ourselves in desperate need of someone of high moral stature who puts science and children's health above corporate profit, and who will support Robert Kennedy, Jr. and the new Commission on Vaccine Safety & Scientific Integrity.

David Granovsky • 2017-01-17 07:59 PM

Is Trump for or against stem cell research? It depends on who he picks and which stem cells... https://repairstemcell.wordpress.com/2017/01/17/is-donald-for-or-against-stem-cells/