

ture with a few dozen small, biotech-like drug discovery teams, each focused on just one therapeutic area. Now, following the first formal review of its three-year-old strategic overhaul, the British pharmaceutical giant has announced plans to cut three of its 38 'discovery performance units', add four more and resize or refocus many others. Overall, the restructuring seems to be working, says Navid Malik, an analyst at Cenkos Securities in London. "Something is going right at the moment, because the R&D productivity is increasing." The company's new units will focus on nutrition, hemoglobin, traditional Chinese medicines and biopharmaceuticals.

Kidney cancer buster

On 27 January, the FDA cleared the seventh drug in seven years for the treatment of advanced kidney cancer. Like many similar agents, the newly approved antibody, Pfizer's Inlyta (axitinib), targets receptors of the vascular endothelial growth factor (VEGF), a protein used by tumors to promote blood vessel growth. But, according to Brian Rini, an oncologist at

the Cleveland Clinic in Ohio, Inlyta is much more potent biochemically than existing drugs such as Bayer's and Onyx's Nexavar (sorafenib). In November, Rini and his colleagues reported the results of a 723-person trial showing that Inlyta extended progression-free survival significantly longer than Nexavar with a comparable side-effect profile (*Lancet* **378**, 1931–1939, 2011). Similarly, on 3 January AVEO Pharmaceuticals and Astellas Pharma announced that the companies' tozoanib, an as-yet unapproved VEGF receptor inhibitor, outperformed Nexavar in a large head-to-head study. "As you move toward more selective, more potent drugs, you can get more clinical benefit for the same tolerability," Rini says.

PEOPLE

Fund farewell

In an effort to transform its governance, on 24 January the Global Fund to Fight AIDS, Tuberculosis and Malaria announced the appointment of



Sovereign Bank

Gabriel Jaramillo (pictured), a retired Brazilian bank executive, to serve as the Geneva-based organization's first general manager. However, the same day, executive director Michel Kazatchkine, a French clinical immunologist who had led the Global Fund for five years, said he would quit his post in mid-March, citing concerns over the decision that Jaramillo would report to the board, not to him. "There cannot be two heads in an organization," Kazatchkine told the French radio station RTL. The controversy was blunted somewhat two days later when the Bill & Melinda Gates Foundation agreed to give \$750 million over six years to the Global Fund.

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Jonathan Tilly

RESEARCH

Stem cell success

Human embryonic stem cells (ESCs) have passed an important clinical milestone. In the first published results from a trial involving an ESC-derived product, two people suffering from degenerative forms of blindness—a woman in her 50s with Stargardt's macular dystrophy and a woman in her 70s with age-related macular degeneration—showed some improvement in their vision with no harmful side effects four months after receiving injections of retinal cells made from stem cells (*Lancet* doi:10.1016/S0140-6736(12)60028-2, 2011). Buoyed by the findings, Advanced Cell Technology, the Marlborough, Massachusetts-based company behind the trial, treated two more people with the cell therapy in January, one in Los Angeles and one in London.

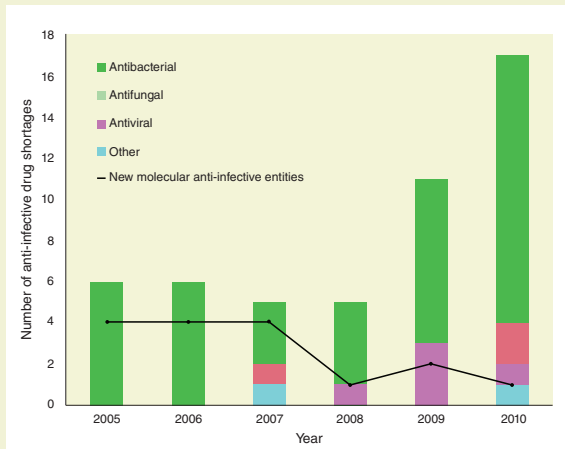
Correction

In the December 2011 issue, the article entitled 'Class of once-weekly diabetes drugs poised for approval' (*Nat. Med.* **17**, 1528, 2011) incorrectly stated that the pharmaceutical company Eli Lilly is based in New York, when in fact its headquarters are in Indiana. The error has been corrected in the HTML and PDF versions of the article.

Shortage of anti-infective drugs poses a threat to public health

More and more drugs used to fight infectious diseases are in short supply at the same time that dwindling numbers of new anti-infectives are being approved, according to a study published in the March issue of *Clinical Infectious Diseases* (**54**, 684–691, 2012). Among the first-line therapies that can be hard to obtain are those for treating pneumonia, tuberculosis and enterococcal infections. "These are standby medications that virtually any expert in infectious diseases would look to when asked how they would treat a serious condition," says Marc Sheetz, an infectious diseases pharmacologist at Midwestern

University near Chicago who led the study. To remedy the situation, on 31 January US lawmakers introduced the Drug Shortage Prevention Act, which, among other measures, would require the FDA to expedite the review of experimental agents that could help ease shortages.



Clinical Infectious Diseases