

work was crucial to cancer control, and had been ranked by his scientific peers in the top 10 percent of all grant applications submitted to NCI. They also pointed out that *JAMA* devoted most of its 19 July issue to Glantz's research. "A lot of people have said to me: 'The reason we're in a froth about this is that if they get you — we're next'," Glantz says.

In other actions, the bar on federal funds for human embryo research was proposed in the appropriations committee despite a report released last year by a special bioethics panel that endorsed the work. The committee, convened by the federal government, said the field held significant promise for medical advances, but proposed strict safeguards for its conduct. Many scientists believe that studying the early human embryo could yield knowledge about genetic diseases and cancer, with the most immediate benefits likely in the area of *in vitro* fertilization.

Abortion foes and sponsors of the ban, Representatives Jay Dickey (Republican, Arkansas) and Roger Wicker (Republican, Mississippi), see embryo research as the destruction and manipulation of human life. "Jay believes the federal government shouldn't be involved in human embryo research of any kind," says Bob Brooks, a spokesman for Dickey. "There are numerous private companies who are engaged in this, and have been for years. He [Jay] just said: 'We're not going to let NIH wander off into this area'."

For researchers, the action is reminiscent of, and as troubling as, the ban on research using fetal tissue. Research has shown that transplantation using fetal tissue shows promise as a cure for Parkinson's disease and could prove an effective treatment for other disorders. But bans such as these set a precedent and are difficult to reverse, says one NIH source. Indeed, even though it has been three years since Clinton lifted the ban on federally funded fetal tissue research, its effects linger on. NIH officials say that there have been far fewer grant applications for funding than they had anticipated, which they attribute to the impact of the ban.

Joan Samuelson, founder of the Parkinson's Action Network, says "You see it in the morale of the scientific community. Scientists always raise the issue, as if it were still in effect. What happens then is they get distracted, and get drawn into other [research] areas." Curt Freed, of the University of Colorado Health Sciences Center in Denver, one of only a few researchers who conducted fetal

work during the ban — using private money — agrees. "The politics of abortion continue, and everybody in the country is sensitive to that," says Freed, now the recipient of a federal grant to conduct fetal tissue transplantation research on Parkinson's patients.

Politics has also invaded the debate about violence and whether the subject — particularly when it involves guns — is a suitable topic for scientific research. Nine Republican Senators and one Democrat, Senator Max Baucus (Democrat, Montana), wrote to Senator Arlen Specter (Republican, Pennsylvania) in October condemning CDC's National Center for Injury Prevention and Control, saying its work "is driven in certain issue areas by preordained political goals" and not pure science. The letter appeared on an Internet site sponsored by the National Rifle Association, which has launched a campaign against the CDC's prevention centre. The senators were considering offering an amendment

to an unspecified spending bill to end the centre's funding to study gun violence, which last year was about \$2 million.

Like NIH's, the CDC's budget thus far remains intact. Both the full House and the Senate appropriations committee maintained the agency's current \$2.1 billion funding level. As to the coming threat, Bob Howard, a CDC spokesman, says the agency feels the violence work "is science-based epidemiology, and not an attempt to take away any Americans' rights."

Bioethicist Art Caplan of the University of Pennsylvania laments that "we're living in a time when ideology is driving science and medicine in unprecedented and terribly frightening ways. Areas that traditionally have been left to peer review are now being turned over to pork barrel. Science in America is at risk of getting drowned out in a chorus of yahoo-ism."

MARLENE CIMONS
Washington, DC

UK drug discovery unit takes shape

A new type of medical research institute that aims to bridge the gap between academic research and the pharmaceutical industry is to be set up in London. The Institute for Strategic Medical Research wants to capitalize on the increasing amounts of money pharmaceutical companies are putting into external collaborations and contract research by creating a multi-disciplinary research team working on projects with specific applications in mind.

The institute is the brain-child of Salvador Moncada, former director of research at Wellcome's UK research laboratory in Beckenham, Kent, which is in the process of being closed following the merger with Glaxo. Moncada, who first posited the biological role of nitric oxide, will be joined in the venture by several of his former Wellcome colleagues and a hand-picked team of researchers now at St George's Hospital and Kings College Medical Schools, both in London.

"This will give a unique blend of expertise in molecular and cell biology, medicinal chemistry and clinical pharmacology, allowing us to cover all aspects of drug discovery from bench

to [the] bedside," says Moncada.

The Institute, which will be part of University College London, has attracted UK£314.5 million (US\$497 million) of government money and matching amounts (\$492 million) from the medical charity, the Wellcome Trust. In the first commercial funding agreement with a company, Glaxo Wellcome is investing \$58.5 million over seven years for research into nitric oxide. Moncada says this could lead to drugs for cardiovascular disease, cancer, septic shock and inflammation.

"The idea is to carry out drug discovery in a university environment, away from the commercial pressures of the pharmaceutical industry, while maintaining a goal-oriented approach," says Moncada, who had been pondering how to create an institution with an intermediate structure between academia and industry for some time.

When fully staffed, the institute is expected to house 300 scientists, making it one of the biggest pharmaceutical research groups outside the industry.

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Trevor Humphries/Financial Times

Moncada — taking the top slot at the new medical institute.