

PROFILE

Allen Roses: Rebel with a cause

The new head of Glaxo Wellcome's genetic directorate brings a strong vision of the role of disease genetics in molecular medicine.

Vicki Brower

Colleagues in his laboratory were greatly surprised when Alzheimer's disease pioneer Allen Roses left his tenured position at Duke University after 26 years to head the new genetics directorate at Glaxo Wellcome (Durham, NC). Roses is a neurologist by training and has a strong research and clinical track record. Many had viewed him as a renegade. For them, the image of Roses as part of a corporate machine—his new job title at Glaxo Wellcome is “worldwide director and vice president”—is puzzling. But the man is not known for predictability.

Allen Roses is not a natural conformist. His ideas have disconcerted the establishment, and that has had repercussions. In 1993, he proposed that the gene encoding apolipoprotein E (apoE), a known risk factor for cardiovascular disease, was also a susceptibility gene for late-onset Alzheimer's disease. Initially, the idea met with considerable disbelief and scorn. It took a few years to become accepted. Since proposing the theory, however, his grant proposals to the US National Institutes of Health (NIH; Bethesda, MD) have yielded “zero return,” he says. He believes he was “blackballed” at NIH; none of his grant proposals passed the two-person triage committee. “We nearly had to close our doors at Duke before Glaxo Wellcome made [its] offer,” says Roses.

So will the Glaxo Wellcome corporate culture and Allen Roses be compatible? The initial transition was certainly rapid. In May, Roses' former colleague at Duke and now Glaxo Wellcome's director of R&D, James Niedel, approached him about running the recently established genetics directorate. A month later Roses moved in. “I left my office on Friday afternoon at Duke, arrived at Glaxo Wellcome on Monday morning, and didn't have to uproot my family. The only problem I had was getting my computer compatible with the one at Glaxo Wellcome,” Roses dryly comments.

At 54, Roses feels the timing is right. He had already served as a consultant to Glaxo Wellcome in its Alzheimer's program for three years and had a clear idea of the company's R&D direction. That matched his own professional goals. And then, says Roses, “they made me an offer I couldn't refuse. . . . Wouldn't you leave if you were given a lot of money to spend on the projects you were

already doing, and to develop the genetics capability of the largest drug maker in the world?”

Roses insists that he has not sold out to business. “I am a pragmatic idealist,” he says, who moved not for the salary, but to be part of an organization that could develop treatments for Alzheimer's and other serious disease as fast as possible. “Governments, universities, and most biotech companies don't make drugs,” Roses observed, “they make deals.” “I joined the largest, possibly the best company in the world that makes drugs. If [Glaxo Wellcome] can't do it, it can't be done.”



Allen Roses: No more 'either-or' research choices.

Roses expects the move to Glaxo Wellcome will facilitate his quest for susceptibility genes for multigenic diseases. At Duke, he developed a three-pronged approach combining genetic epidemiology, genetic screening and banking, and clinical studies. He wanted to identify genes associated with coronary artery disease, late-onset breast cancer, lung and brain cancer, and Parkinson's disease. As resources became limited, Roses helped found Cerberus, a biotechnology company at Duke (*Nature Biotechnology* 15:311, April 1997). That meant he was not only writing grants, but also fund-raising for the new company. That, Roses says, took him further away from research, and put money in the pockets of venture capitalists.

At Glaxo Wellcome, Roses will not have to spend time fund-raising or grant-writing. He doesn't expect to miss it. The budget he controls at Glaxo Wellcome is a vastly larger

than anything he could have raised at Cerberus. He can influence Glaxo Wellcome's R&D process worldwide in every disease area. He has a staff of over 150, and the power and resources to set up external collaborations, a prospect he relishes. “Now, I won't have to make ‘either-or’ choices concerning the diseases I pursue,” he says with relief. He plans to move his susceptibility gene research into other types of cancer, nonlipid causes of coronary arterial disease, and schizophrenia. Overall, his goal is to work toward “getting the right drug into the right patient.” His first task will be to educate Glaxo Wellcome's clinical R&D staff on the merits of genetic epidemiology—how to use populations in a coherent way to get data for drug development.

Roses expects to maintain his connections with both the Duke laboratory and Cerberus. There is a chance, he says, that Glaxo Wellcome will buy Cerberus outright. He will maintain his mentoring and professional relationships at the university, serving as an adjunct professor. His special link with Duke molecular biologist Ann Saunders, a coauthor on many of his papers, will cement the university link. They are married.

Roses expects that his research, and by extension, Glaxo Wellcome's, will still be able to benefit from the Duke connection. The main difference now is that, in addition to having access to disease-susceptible families, high-grade clinical evaluation, and academic intellectual property, he can also work with virtually any academic collaborator.

While a large part of Roses' new position is administrative, he is not worried about making his voice heard: “It's not like I'll be without influence,” he says. “I came into the company at a level at which I can speak with the administration and have an effect. In fact, things seem to be happening a lot easier at Glaxo Wellcome than they did at the university.”

The biggest difference he has observed to date between academia and industry is the certainty of his goals. “In academia, doubt about one's theories can end funding. But here, the bottom line is, does it work? If I succeed, the company succeeds, and at all levels I am wished well. At a company, it doesn't matter what one believes or if others believe it. The point is to discover new drugs.”

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