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Brody Recognized for Promising Pancreatic Cancer Research

Assistant Professor Jonathan Brody, PhD, has received a prestigious Career Development Award from the Pancreatic Cancer Action Network (PanCAN) and the American Association for Cancer Research (AACR) for his innovative research in pancreatic cancer.

One of three Career Development Awards granted to junior faculty at academic and medical institutions each year, Dr. Brody's award is named for the philanthropist and Rydex Investments founder Skip Viragh, who died of pancreatic cancer in 2003. Dr. Brody accepted the award at a formal ceremony held on April 20 at the annual meeting of the AACR in Washington, DC. He will receive \$200K over the next two years.

"While the need for scientific and medical breakthroughs in pancreatic cancer research is urgent, there is a major shortage of federal funding for research on this deadly disease," says Julie Fleshman, President and CEO of PanCAN. "Since 1999, PanCAN has been working to help fill this critical void. In 2010, we will disburse nearly \$2.3 million in funding for research grants. We are excited about this partnership with Dr. Brody and look forward to working with him as we make strides against this deadly disease."

Dr. Brody will use the funding to build upon his research on a stress-response protein called Hu antigen R (HuR), "activated" in pancreatic tumor cells. Dr. Brody and his team have found that HuR can actually be used to predict the effectiveness of the standard chemotherapy treatment for pancreatic cancer: gemcitabine.

"This means that HuR is essentially a biomarker, which we can use to determine up front whether a patient is likely to respond to this treatment or not," says Dr. Brody. The findings of his initial study, of which Dr. Brody was the senior author and Jefferson pathologist Dr. Agnieszka Witkiewicz closely collaborated on, were first published as a Priority Report in the journal *Cancer Research* in June 2009. A follow up report is being presented this month at the American Surgical Association in Chicago.

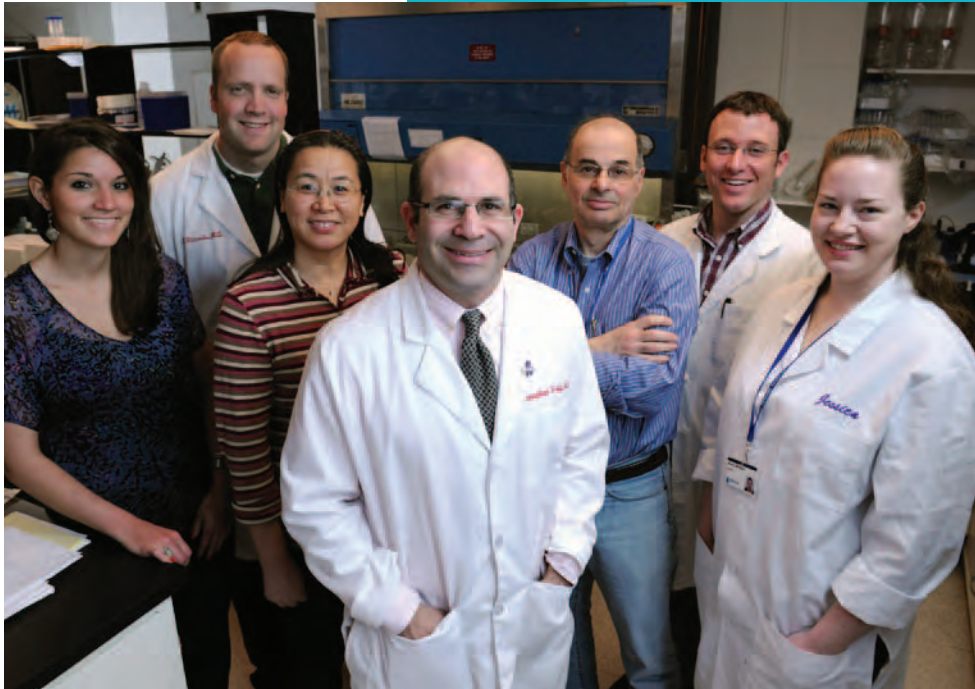
“By improving our understanding of drug metabolism and the molecular diversity that exists within the patient population, this study has important implications for the development of personalized medicine for pancreatic cancer,” notes Ms. Fleshman. “The results have the potential to help us learn how to customize treatments for patients to improve outcomes and survival.”

Dr. Brody and his team are now seeking a way to activate HuR in patients that show low levels of the protein. “The research is moving into expanding our clinical samples as well as building on pre-clinical animal models for further exploration,” says Dr. Brody. “We are intrigued as to whether other chemotherapeutic agents might also engage this same pathway.”

“As a young pancreatic cancer researcher I have always admired these two topnotch organizations,” says Dr. Brody, “and to be recognized by them truly is an honor and validates the direction of my research.” This award allows him to produce a body of high-quality data over the next few years as he strives to extend his funding and work with the aid of such agencies as the National Cancer Institute (NCI). Ultimately, Dr. Brody hopes this funding will help translate the work in his laboratory for the benefit of pancreatic cancer patients in the clinical setting.

[Editor’s note: Dr. Brody has, as of this writing, just been notified that he has been awarded an American Cancer Society grant in excess of \$700k over the next 4 years.]

Changing Lives Through Research



Jonathan Brody, PhD, and his team of technicians, residents and students are conducting studies that are garnering financial support for a historically underfunded field of research – pancreatic cancer.

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Katie Ashburn, CRNP, and Shawn Pierce, CNRP, are Vascular Surgery Nurse Practitioners for the outpatient and inpatient practices (respectively). They both assumed their positions in late spring of 2009.

What does an average day look like?

Katie: Between the vascular attending physicians and me, we see 40 patients a day in a fast-paced outpatient office. I perform patient history and physicals and develop a plan of care in conjunction with the attendings, to improve patient education and communication. I follow wound care patients and occasionally manage insurance issues. We work closely with the anticoagulation clinic and the hyperbaric treatment center.

Shawn: I work with the vascular team comprised of an intern, a resident, a fellow and Drs. Paul DiMuzio and Joshua Eisenberg. Together we manage patients in surgery as well as on the floor. I work closely with our case manager on more complicated discharge cases. After patients leave, I call to help with questions or complications.

What are your respective backgrounds?

Katie: I worked as a nurse at Jefferson for 5 years, including the Intermediate Surgical Intensive Care Unit for 18 months and the

On the Job



Surgical Intensive Care Unit for 3½ years. I earned my master’s degree at Jefferson during that time.

Shawn: I have been a nurse for 23 years and I taught for 10, so many of the nurses here know me as an instructor. I worked as a critical care “float” RN working in the Intensive Care Units and the Post Anesthesia Care Unit as needed.

Do the two of you work together?

Shawn: We share an office and often confer with each other to improve continuity in patient care. Patients appreciate how well we know them.

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