

Transcript Details

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Advancing Metastatic Breast Cancer Research Through Philanthropy

Announcer:

This is *On the Frontlines of Metastatic Breast Cancer* on ReachMD. Here's your host, Dr. Steve Jackson.

Dr. Jackson:

Welcome to *On the Frontlines of Metastatic Breast Cancer* on ReachMD. I'm Dr. Steve Jackson, and joining me today is Mr. Ted Giovanis, who's President and Founder of the Jane Koskinas Ted Giovanis Foundation for Health and Policy, which conducts research in the health policy and clinical arenas. Together, we'll be talking about the role of funding and philanthropy in advancing metastatic breast cancer research. Mr. Giovanis, thanks so much for being here today.

Mr. Giovanis:

Happy to be here, Steve.

Dr. Jackson:

Now, before we talk about the research landscape, I'd like to start with what brings you personally to this work. Can you share your connection to breast cancer and how that inspired the path that you're still on today?

Mr. Giovanis:

Sure. I'd always been a healthcare jock. I had a healthcare consulting firm—actually, several of them. And my wife Jane helped me in that firm. And Jane had breast cancer in 2001, and she went into treatment and everything was fine. It returned in 2008 and had metastasized to her left hip. And so she got all this treatment, but, on December 31st, 2010, she passed.

And it just so happened that I was in the middle of a fairly large litigation at that point in time against the Medicare program that basically took from 2006 until it ended in 2012. And as that was ending, I was deciding what else I was going to do. I was going to do something else. And as that occurred right at the end of 2012, I pivoted and created the foundation. And so that's where I am today, and that's where I focus all my energies.

Dr. Jackson:

It's definitely a powerful start, and, certainly, there can't be a more noble direction in which to go. Let's turn to the research landscape at large. When you think about metastatic breast cancer, what stands out to you about where we are and where more progress is still needed?

Mr. Giovanis:

Steve, as you know, nationally, a lot of funding dollars come from the federal government and through NIH—about 46 billion a year. And also, the pharmaceutical companies play a heavy role in that. They pick up the pieces after NIH does what it does.

But there are a lot of, what I'll call, biases in the funding. There's certainly grant-making bias, institutional bias, and biases inside of the federal government. But the federal government serves a great role, because it funds at least 40 major cancer centers around the country.

But we've become fairly drug-centric through this process. It's almost like, pictorially, looking at things like a football field. If you understand the red zone, which is the last 20 yards before you score, that's where the drug companies are. From the 20 back to about the 50, that's where NIH is. And where the answers are is down at the other end zone: how do cells talk to each other? What do they say? Why does your immune system listen to them? And so, if we find out something down there, we can move down the field fairly more efficiently.

Dr. Jackson:

When it comes to making that kind of progress possible, what are some of the biggest challenges you see in how metastatic breast cancer research is funded?

Mr. Giovanis:

Well, first of all, we need to change how we think about research. I think we've become more thoughtful looking down the opposite end of the field. And how we work and how I'm trying to make a change is, we pick people. We invest in the brightest minds in a particular area of metastasis. We focus on metastasis. Now we've taken that just to breast cancer.

We also generally need to be less risk-averse, because a lot of what research has done is it requires a proof of concept before any research money ever flows. We don't do that. We try to figure out the how and the why, and then, using AI, you can move things along more efficiently and learn faster, if that makes sense.

Dr. Jackson:

Right. Institutions that give money want a very quick ROI. They want a quick return on their investment, because that's business.

For those just tuning in, you're listening to *On the Frontlines of Metastatic Breast Cancer* on ReachMD. I'm Dr. Steve Jackson, and I'm speaking with Mr. Ted Giovanis from the Jane Koskinas Ted Giovanis Foundation for Health and Policy about the metastatic breast cancer research landscape and the role of funding and philanthropy.

So with those research and funding needs in mind, Ted, let's turn to the work of the foundation. How has this organization approached its role in helping move metastatic breast cancer research forward, and what guides the research and initiatives that you choose to support?

Mr. Giovanis:

As I said before, we focus on people. And also, we focus more on basic science than the end game. So our process is basically, we have a portfolio of projects going on in any number of areas. And they usually fall around the site of metastasis: lung, brain, liver, bone. And look at that, but we're also scanning the turf for how metastasis occurs. And that's primarily where we work.

Our process is totally different than anyplace else, which usually has an open season where you can submit proposals. We don't do that. We actually figure out where we want to go. We scan our environment and our contacts to figure out who the best and brightest are in those areas. Then we go to those particular people and try to find an unmet funding need. Then we cook up a proposal or a project to focus on that. And then, once we get their proposal, it's reviewed by a panel that we pick in the disciplines that are involved in that proposal, and then we curate it. Then we develop a contract with the organization, like the university. Then the researcher shows that to the university. That's the first time they have seen it.

And all of the people that are involved in research approvals—such as the grant administration people, the administration of the university, and the fundraising people—all of them have been cut out of this. So it actually empowers the researcher, because the researcher is coming with their own money now. And so that changes a lot of the dynamic inside a particular university. It empowers the researcher within the institution that they happen to reside. And it's the opposite of how NIH and major foundations do it. They all tend to do things the same way.

Dr. Jackson:

Oh, I agree with you. It is unique. So, before we started recording today, I had mentioned your translational cell biology area in Johns Hopkins, and you pointed out an important correction to that and how that relates to the direction that your model is pointing. Can you share that with us?

Mr. Giovanis:

Yes, Steve. As I just said before, the JKTG Foundation is predominantly focused in metastasis, and we have relationships and projects virtually all over the country, from Oregon to Florida. And so we're looking at things. What I wanted to do was leverage on some of that.

And so I work with a researcher that we had worked with at Hopkins, a guy named Andy Ewald. He's a really smart, bright guy. He's the head of cell biology there, and his basic background's in physics. And, with modeling, you need a background in understanding math. And so, what we did is, he helped me develop the Giovanis Institute for Translational Cell Biology.

And it has three roles. One, to continue to leverage on the work that we do in metastasis. Number two, to look for similarities between metastasis and breast cancer, and metastasis and other cancers like pancreas cancer. And number three, to get to the translational part. See how rapidly we can get what we find into the clinic.

And so that's what the Giovanis Institute's about. So I'm more outside Hopkins with the JKTG Foundation, and our work doesn't preclude

using people at Hopkins, but we use the right people for the right jobs. And we induce, like the GI does, collaborations. Because, what happens is that allows us to learn what each of us did that didn't work, and that's never published anywhere.

So if I was working with you, Steve, you could say, "Well, you know, we tried that, it didn't work." And then that allows us all to learn. If you are always working with the same people, you tend to get stagnant on the mistakes you made. Or it's not that you made them, it means you explored. You went down an avenue and it didn't work. And that's all part of learning. I mean, I've learned more from my mistakes than my successes. My successes are self-evident, but my mistakes are what you guys need to know, because I don't want you to make the same mistake. It's part of growth.

Dr. Jackson:

That's excellent. Thank you so much for clarifying that. Now, looking at this more broadly, where do you think philanthropy can have the greatest impact in supporting research and complementing other sources of funding?

Mr. Giovanis:

I think it can play a major role. Because we are in private philanthropy, we're not bound by the same rules that maybe governmental philanthropy is. I'm going to call it governmental investment in research. I mean, they have oversight. They have Congress looking at them. They have to respond to Congress. Why did you pick this? Why did you do that? We don't have those rules. We're spending our own money.

And so what we knew our biggest mistake would be—and my personal one—is making the wrong choice of researcher and project. So that's the biggest problem that I have. So what I do is, I surround myself with people that can look at different things. And so, if we have a particular type of metastasis, like one metastasis, I would involve people that I know are really good in that space. And if we're going to do mathematical modeling, I bring in other people that I know that are good in mathematical modeling to review it.

And so all of our projects include a diversity of disciplines, but they're all great people, because what I find is that great people want to work with other great people. It's almost like looking at your investment portfolio. Your portfolio is certainly wide, but you need to invest some of it in a high-risk area. We're more totally in high risk, managing that risk by selection of researchers and then our review process.

Dr. Jackson:

Now, let's look ahead before we close. What would you most like to see change in the way that metastatic breast cancer research is supported?

Mr. Giovanis:

My personal goal is to change how we think about research in the United States. We're thinking about it the wrong way. The way we think about it now, it's the same old, same old. This is how we've done it. This is how we get money. I want to explore this. And we've become more interested in funding our labs and keeping everything going, which is important. But what we've done is we've stayed in a safe spot, and we've become risk-averse.

Dr. Jackson:

Well, there's a whole infrastructure dedicated to that.

Mr. Giovanis:

Bingo.

Dr. Jackson:

That's hard to break free from.

Mr. Giovanis:

Yes. And the role of the federal government, Steve, is good, because it provides those foundational things with the infrastructure, the special super-duper microscopes, or whatever it might be. But we need to figure out how—and they do too—to move away from that and move more into what I'd call the unknowns.

And when I say risk, it's a risk that the hypothesis we are working on might not be proven. The system tends to send money to things that are proven. But knowing what not to do is just as important as knowing what to do. And so we have to take chances that the hypothesis might be right. Not a chance with a patient; that the hypothesis will not be proven. And so far, with us, we've made pretty good decisions and the hypotheses have been proven. And it's changed the thinking of some of the people in certain areas of research. It's like, "Oh, it really works," or it works in a different way that we didn't think. So that's what I think we should move more into a little bit: more risk-taking and more exploration, which is true science.

Dr. Jackson:

And as those forward-looking comments bring us to the end of today's program, I want to thank my guest, Mr. Ted Giovannis, for joining me to talk about metastatic breast cancer research, funding, and philanthropy. Mr. Giovannis, it was great speaking with you today

Mr. Giovanis:

It's great being with you, Steve.

Announcer:

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