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PUBLISHER Lisa Banket EDITOR Taren Grom CREATIVE DIRECTOR Marah Walsh

> MANAGING EDITOR Denise Myshko

ASSOCIATE EDITOR Elisabeth Pena Villarroel

FEATURES EDITOR Kim Ribbink

CONTRIBUTING EDITORS Cynthia Borda Autumn Konopka

> DESIGN ASSOCIATE Cathy Liszewski

NATIONAL ACCOUNT MANAGERS Melissa Drozdoff Cathy Tracy

> CIRCULATION ASSISTANT Robert Harrison

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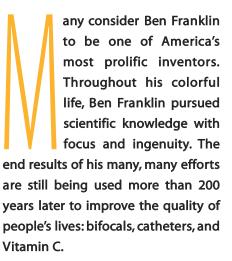
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The Franklin connection to this issue is significant, not only did this Philadelphia icon act as the unofficial host at the recent 42nd Annual Drug Information Association meeting held in the City of Brothery Love in June (see page 70 for a recap and photos for the event) but this issue also contains numerous examples of companies and people who are employing innovative ways to solve today's most pressing drugdevelopment, clinical, and marketing challenges.

This month's Forum — Cross-Functional Teams: Models of Success — profiles four companies that are employing a different model to improve efficiencies in the clinic. Representatives from MedImmune, Wyeth, Novartis, and Kalypsys provide their insights as to why a multidisciplinary approach to drug development can yield results beyond traditional methods. (See related article on page 10.)

At the DIA conference, Charles T. Gombar, Ph.D., VP of project management at Wyeth Research, outlined several reasons why the drug-development paradigm, in terms of business drivers, needs to be changed: spiraling R&D costs, increasing cycle times, rising attrition rates, and poor value definition. The growing pressure on the industry to move more products through the pipeline faster, smarter, and cheaper coupled with the complexity of treating diseases today and the advent of new technologies, have pharmaceutical company executives evaluating their current models.

This shifting paradigm has a domino effect. In essence, each of the supporting companies, those that provide services, products, and technologies to manufactur-



Ben Franklin and Taren Grom at the MediciGroup booth at the 42nd Annual Drug Information Association meeting in Philadelphia.

ing companies, also need to evaluate their business practices to make sure they are operating as efficiently as possible. One such sector of the industry is the independent, centralized institutional review board (IRBs). In the late 1980s, IRBs emerged as an innovative alternative to academic IRBs. As a result of current pressures to speed drugs to market, companies are relying more heavily on the independent IRBs because they can offer faster and more efficient protocol reviews. (See related article on page 40.)

Industry experts agree that for any development model to be successful, the focus must be on the end result: a safe and marketable drug that addresses an unmet patient need. And long before a drug reaches the market, it starts be formed into the "brand." It is at this point that our next set of innovative thinkers enter the picture. Choosing a brand name is one of the most defining moments in a pharmaceutical product's life. The name given to a brand will be the word used by physicians to prescribe a product, by pharmacists when they fill a prescription, and by patients when they request it or recommend it to friends and family. (See related article on page 28.)

By bridging the silos across multiple functions — toxicology, pharmacovigilance, clinical research, pharmacology, manufacturing, legal, marketing, and so on — companies can start to bring products to market quicker and more efficiently. Ben would be proud.

**PharmaVOICE** 

Taren Grom Editor