

1

“Omigod!”

“Based on his age, it seemed unlikely that he had prostate cancer. But I did a blood test and examined him. As soon as I felt his prostate, I knew instantly that he had cancer and that it had spread. After 20 years of practicing urology, you can tell just by the condition of the prostate even before it’s confirmed by a biopsy. This was not some subtle indication; it was very obvious. Another thing 20 years of practice teaches you: Don’t blurt out something like ‘Oh my God!’ You keep your cool.”

There’s nothing pretentious about Stuart Holden, M.D., even if he is one of America’s most distinguished urologists. He’s been called “Skip” his entire life. But his usually ebullient manner turns serious when he describes the most difficult part of his work – confirming the worst fears of worried patients that they have cancer. In the case of one of his most famous patients, Michael Milken, the task was compounded by the knowledge that Milken had just emerged from the devastating strain of a legal battle that had become one of the 20th century’s most overwrought media events.

It was early 1993 and Mike Milken had just started to return to active leadership in educational and medical philanthropy, areas that he’d pursued intently since the 1970s. After going through hell and back, it was time to have some fun. For Milken, nothing was more fun than figuring out creative and effective ways to give back to society the wealth he had earned as Wall Street’s most important financier since J. P. Morgan. [Details of Milken’s career are at www.mikemilken.com.] First, though, he was overdue for a routine medical checkup.

“I saw a very fine internist,” recalls Milken, “And he did the usual poking and prodding. Then I told him I wanted a test for prostate cancer because my friend Steve Ross, the late Chairman of Time Warner, had recently passed away from that disease. The doctor told me that at age 46 I was too young to worry about it. I think I said something like ‘Humor me; I can afford it.’ ”

The news started out bad for Milken and then just got worse. His first indication was the Prostate Specific Antigen (PSA) blood test, which prompts doctors to do further testing if it's elevated. The upper limit of the normal PSA range is 4 ng/ml. Milken's was 24. A friend who had been treated for prostate cancer recommended Skip Holden, a specialist at Cedars Sinai Medical Center in Los Angeles. Holden performed a digital rectal exam and repeated the PSA, which showed the same elevated reading. Then he did a biopsy, which definitively confirmed the presence of prostate cancer. One evaluation from the biopsy – called the Gleason score – measures a cancer's aggressiveness. On a scale of 2 to 10, with 10 being the most aggressive, Milken's score was 9.

There was more bad news. Further tests showed cancer had spread to Milken's lymph nodes, which were grossly enlarged. At the time, the prognosis for a man with cancer that advanced was 12 to 18 months of life. Another leading specialist told Milken and his wife, Lori, to get their affairs in order and seek psychological counseling to deal with the fact that his disease was terminal.

When Skip Holden told Milken just how grave the situation appeared, he expected the usual emotional response from a patient who has been handed a virtual death sentence. Instead ...

“Mike was outwardly passive. But I could see the wheels turning as soon as he absorbed the blow. He was almost immediately in crisis-management mode. Within minutes, he had gathered every detail of my contact information including my home phone number. That night, I was on conference calls with him to several top medical scientists around the country, some of whom he knew from his earlier support of medical research through the Milken Family Foundation. He was quickly spreading the net.”

What happened next – and continues to this day – helps explain why tens of thousands of American men who were expected to be in their graves are walking around today. Over the decade beginning in 1993, actual prostate cancer mortality has been driven down, not up as the experts projected. This book tells the story of the organization that was born from Milken’s personal ordeal as “CaP CURE” and is now called the Prostate Cancer Foundation.

Cancer was nothing new

Several of Milken’s close relatives, including his father, had succumbed to various forms of cancer. But none was as young as he was at the time of diagnosis. As early as 1972, when his mother-in-law was diagnosed with breast cancer, Milken had begun a quest for medical solutions through a combination of study, involvement with the medical community and philanthropy. After his father died from melanoma in 1979, he joined with his brother Lowell and their families to formalize their efforts in a charitable organization. The result was the Milken Family Foundation, which opened its doors early in 1982. (Lowell Milken is a business executive and educational pioneer as well as a major philanthropist, both through the Milken Family Foundation and through the L&S Milken Foundation, a private charity that he heads with his wife, Sandy.)

From the beginning, Mike Milken was determined to help brilliant young medical investigators early in their careers. During the 1970s, he had traveled to leading medical centers around the country, originally in an effort to help his dying father. Later, he met with medical school deans and prominent physicians who deepened his understanding of the gap between the promise and the reality of medical research. One of the many things he learned was that the best young research physicians were too often tempted to leave their low-paying jobs at the laboratory bench to pursue more-lucrative clinical practices treating patients.

As Milken talked to young doctors and scientists in the 1980s, he was impressed with their dedication and convinced that most hadn’t entered medicine to get rich. (That was consistent with Milken’s long experience financing emerging entrepreneurs. He

points out that virtually every truly successful business leader he worked with in his financial career started out with a plan to accomplish something and create value. The personal financial rewards they later enjoyed were a by-product, not the original motivation.) But these young medical scientists did have to feed their growing families, save for their children's education and plan for retirement. So Milken decided to establish a formal program – the Milken Family Foundation Cancer Research Awards – that would allow some of these researchers to stay in their labs for a few more crucial years.

One friend who helped set up the Research Awards program was Samuel Broder, M.D., who later would become the Director of the National Cancer Institute, where his path would again cross with Milken's (see Chapter 3). "Of all the programs we've supported over the last generation," says Milken, "the biggest payoff in terms of social benefit has come from the awards to young investigators." Among those who received awards in the 1980s were Dr. Dennis Slamon, who later discovered Herceptin, a revolutionary breakthrough in the treatment of one type of breast cancer; Dr. Bert Vogelstein, who did pioneering work on the crucial p53 gene whose mutant form is believed to be involved in more than half of human cancers; Dr. Owen Witte, whose subsequent work provided the basis for the development of the breakthrough drug Gleevec, now used as a frontline therapy for patients with chronic myelogenous leukemia; Dr. Lawrence Einhorn, who as the developer of a highly successful chemotherapy regimen for testicular cancer, later treated seven-time Tour de France winner Lance Armstrong; Dr. Philip Leder, a pioneer in molecular biology who contributed to the deciphering of the genetic code; Dr. Charles Myers, who went on to become Chief of the Clinical Pharmacology branch of the National Cancer Institute and today heads the American Institute for Diseases of the Prostate; and many more.

After two decades of this kind of involvement, Milken acquired a deep layman's knowledge of cancer and other serious diseases. He could talk knowledgeably about breast cancer, melanoma, brain tumors, neurological disorders, AIDS, leukemia and more. That made it all the more surprising when he realized how little he knew about prostate cancer, the most common non-skin cancer in

America. Even more shocking was the fact that little was being done about prostate cancer.

The conventional view at the time was that money wasn't available for prostate cancer research because there were no new ideas. Researchers responded that it was futile to spend months developing grant proposals that would be rejected for lack of funds. Milken decided to jump into the middle of this vicious circle and see if he could pull off something revolutionary. Something as revolutionary as the changes he had wrought in democratizing the capital markets beginning in the late 1960s when he figured out how to provide access to capital for entrepreneurs who had great ideas but little financial backing.

Typically, Milken didn't see things through the conventional lens. "The problem isn't a lack of financial capital," he said. "The scarce resource is human capital." He figured he'd better get working on changing that because he didn't have much time. And 35,000 American men expected to die from prostate cancer in 1993 shared his plight.

To order a copy of *A Call to Action*, call 1-800-757-CURE or send \$22.95 (\$19.95 plus \$3.00 shipping and handling) to:

A Call to Action
Prostate Cancer Foundation
1250 Fourth St.
Santa Monica, CA 90401