William Potter, MD, PhD

Independent expert (retired from NIMH, Lilly, and Merck)

Bill Potter's professional training began with an early MD/PhD program at Indiana University in the late 1960's where he obtained his MD. His PhD dissertation was based on research carried out at the NIH as a fellow in the laboratory of B. B. Brodie who was viewed as one of the fathers of psychopharmacology. Upon completion of the fellowship, he remained in the Public Health Service (PHS) under a joint residency program in psychiatry with two years devoted to clinical training and a third to clinical research. This formed the foundation for two decades of translational psychopharmacology research in NIH intramural programs until his retirement from the PHS in 1996.

There, his research centered on exploring whether specific biochemical mechanisms could be linked to specific therapeutic effects, especially in depression and manic-depressive illness. Bill began with exploring concentration/clinical effect relationships and then differential effects on brain biochemistry (with studies of fluid compartments including CSF) ultimately over-seeing a diverse research group involving both preclinical and clinical studies on molecular mechanisms of action of a variety of compounds. His team's research became well known with Bill involved at multiple levels in national and international psychopharmacology efforts with former trainees from his lab holding senior positions both in academia and industry in the US, Europe, Asia and South America. As methods for exploring brain function in humans advanced, he has become even more interested in translation from the bench to bedside of novel molecular targets on components of psychiatric illness. It became apparent by the mid 1990's that this line of research exceeded the scope of what was possible within an independent intramural research group and required the kind of team science being carried out in industry

In 1996 Bill joined Eli Lilly to be lead early clinical development of CNS compounds championing incorporation of emerging biomarkers to establish doses and reduce the need for purely empirical dose ranging studies in Phase 2 and Phase 3 studies. At the same time, he led precompetitive efforts to build shared databases to better understand placebo response and how to increase signal detection in clinical trials – activities in which he continues to the present working across organizations such as ISCTM and ASCP to bodies such as the Foundation of the NIH Biomarker's Consortium and the Neuroforum of the National Academy of Sciences where representatives from government (NIH, FDA, VA and DOD), industry, academia and advocacy interact.

In 2004 he became head of CNS early development at Merck and then of "translational neuroscience" with a focus on even more extensive incorporation of biomarkers into novel drug development. Because of intense interest in beta amyloid formation as a target for Alzheimer's, much focus was devoted to

biomarker research in AD which continues to this day in his chairing of precompetitive efforts managed through the FNIH. Following Bill's retirement from industry at the age of 65 in 2010 he has devoted even more time to how to accelerate improving signal detection in clinical trials and applying biomarkers to increase the yield from studies of compounds acting on still-to-be-validated molecular targets. Until recently, much of his time was to bring this message to the NIMH in the role of a senior advisor. Bill continues to view working together across public and private stakeholders as the surest way to accelerate the identification of novel treatments for CNS disorders.