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Personalized Medicine, Genetic Exceptionalism, and the Rule of Law: An Analysis of the Prevailing Justification for Invalidating BRCA1/2 Patents in *Association of Molecular Pathology v. USPTO*

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PERSONALIZED MEDICINE, GENETIC EXCEPTIONALISM,
AND THE RULE OF LAW: AN ANALYSIS OF THE PREVAILING
JUSTIFICATION FOR INVALIDATING BRCA1/2 PATENTS IN
ASSOCIATION OF MOLECULAR PATHOLOGY V. USPTO

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ABSTRACT

As medicine advances toward a more personalized model, the significance of genetic information is growing exponentially. While unlocking the genetic code has advanced the state of medicine, it has also reinvigorated the debate over the boundaries of patentable subject matter. The potential clash between having access to state-of-the-art medicine and protecting intellectual property investments came to a head in the case, Association of Molecular Pathology v. USPTO (“Myriad”). This Article analyzes the legal opinion rendered by the district court through the unique lens of genetic exceptionalism—a concept previously reserved to social science and public policy. Then, this Article analyzes Judge Sweet’s unprecedented incorporation of genetic exceptionalism into the Patent Act by first tracing the historical roots of the exceptionalism doctrine and then dissecting the Myriad decision through that historical lens. As it stands at publication, it has yet to be seen whether the Supreme Court will similarly adopting a novel interpretation of the

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Patent Act that incorporates genetic exceptionalism into the Act's subject matter restrictions.

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INTRODUCTION

Judge Sweet's decision in *Association of Molecular Pathology v. USPTO* ("Myriad")¹ has reinvigorated the longstanding debate of whether genes qualify for patent protection and whether granting such protection does more harm to patients than good for innovation. In a health care system moving more toward personalized medicine, the resolution of these questions is vital for the stability—and possibly the survival—of genetic innovation. *Myriad* has the potential to greatly impact the way personalized medicine is administered to patients by increasing access to more at-risk patients and decreasing the cost of genetic testing. On the other hand, the decision could be a potential setback to genetic innovation that results in more harm to patients by stifling research incentives. Regardless, stakeholders on both sides of the debate are eagerly awaiting the appeal that will provide some stability in an unsettled area of patent law.

There is no disagreement that since its discovery, DNA has captivated audiences from the science, medical, ethical, and legal fields, at times rising DNA to a near-reverent status. Despite the promise that genetic science holds, the science is susceptible to abuse, as has been demonstrated by the history of eugenics and

¹ 702 F. Supp. 2d 181 (S.D.N.Y. 2010). The procedural history of this case—following Judge Sweet's opinion in district court—is complicated. The Federal Circuit first affirmed in part and reversed in part the lower court's decision in *Ass'n for Molecular Pathology v. U.S. Patent and Trademark Office*, 653 F.3d 1329 (Fed. Cir. 2011) (reversing the lower court's decision on gene patentability by holding, among other things, that human genes are eligible patent matter). Certiorari was granted by the United States Supreme Court, only to have the case remanded back to the Federal Circuit for reconsideration. *See Ass'n for Molecular Pathology v. Myriad Genetics, Inc.*, 132 S. Ct. 1794 (2012). After the Federal Circuit reviewed the case, the Supreme Court again granted certiorari, limiting the issue to whether human genes are patentable. *See Ass'n for Molecular Pathology v. U.S. Patent and Trademark Office*, 689 F.3d 1303 (Fed. Cir. 2012) and *Ass'n for Molecular Pathology v. Myriad Genetics, Inc.*, 133 S. Ct. 694 (Nov. 30 2012) (certiorari granted in part). As it stands, the parties have until March 2013 to file their briefs on the merit. For an up-to-date status of the case as it proceeds through the Supreme Court, visit the case on the Scotus Blog, available at <http://www.scotusblog.com/case-files/cases/association-for-molecular-pathology-v-myriad-genetics-inc/>.

ethnically targeted genetic screening programs. It is this unharnessed power to do both good and bad that has directed scientists, academia, and policy makers alike to treat genetic information differently than other scientific knowledge, resulting in “genetic exceptionalism.” Until the *Myriad* decision, however, genetic exceptionalism did not exist as a legal principle under the Patent Act, but was instead relegated to areas of discrimination, privacy, and insurance.

To better understand *Myriad*'s impact on personalized medicine and the progeny of gene patents flowing from the genome, it is helpful to first understand basic genetic science, the development of genetic exceptionalism in other contexts, the various types of gene patents, and the existing law on subject matter patentability. Part I of this Article begins with an overview of personalized medicine and its relation to genetic science. Parts II and III discuss the impact of patenting these genetic tools and the types of patent protection falling within the catch-all category of “gene patents.” In Part IV, the Article provides a summary of the precedent governing the subject matter patentability requirement. Finally, Part V addresses Judge Sweet's incorporation of genetic exceptionalism into the Patent Act by first tracing the historical roots of the exceptionalism doctrine and then dissecting the *Myriad* decision through that historical lens. After doing so, the Article concludes that the court in *Myriad* inappropriately adopted genetic exceptionalism as a legal principle on patentability instead of leaving the gene patent policy decision to Congress.

I. CHANGING THE FACE OF MEDICINE ONE STRAND AT A TIME:
HOW GENETIC INFORMATION IS ALTERING THE PRACTICE OF
MEDICINE

A. *Defining Personalized Medicine*

What does the ambiguous phrase “personalized medicine” actually mean? After all, doctor-patient relationships have traditionally been of a personal nature. New advances in technology have altered this traditional doctor-patient approach to

treatment² and solidified “personalized medicine” as a term of art. Building on the traditional doctor-patient relationship, personalized medicine moves health care one step further by providing physicians with a more precise tool to evaluate, diagnose, and treat patients. Beyond promising better health outcomes for individual patients, personalized medicine also has the potential to transform the entire health care delivery infrastructure into a more efficient, cost-effective system.³

Despite being a recognized term of art, “personalized medicine” has multiple definitions. On the literal end of the spectrum, personalized medicine refers to the development of stem cell based therapies that are specifically tailored to an individual.⁴ In this context, doctors would use cloned stem cells—embryonic or adult—to generate additional cells, tissues, or organs to circumvent the inherent risks associated with individual transplantations.⁵

On the other end of the spectrum, personalized medicine is cast more broadly, referring to technologies and treatments that can be administered to a subset of the population based on common characteristics found in DNA and environmental factors. More in line with this broader definition, the Personalized Medicine

² See, e.g., Kent Bottles, *The Doctor/Patient Relationship for the 21st Century*, THE PHYSICIAN EXECUTIVE 10-14 (Sep.-Oct. 2001), available at <http://www.kentbottles.com/pdfs/Doctor-Patient-Relationship-for-the-21st-Century.pdf> (discussing different views of the doctor/patient relationship).

³ See generally James P. Evans et. al., *Preparing for a Consumer-Driven Genomic Age*, 363 NEW ENG. J. MED. 1099 (2010) (discussing personalized health care in the direct-to-consumer genetic testing context); Eric D. Green & Mark S. Guyer, *Charting a Course for Genomic Medicine from Base Pairs to Bedside*, 470 NATURE 204 (February 2011) (discussing a 2011 vision for moving towards an era of genomic medicine); Margaret A. Hamburg & Francis S. Collins, *The Path to Personalized Medicine*, 363 NEW ENG. J. MED. 301 (2010) (discussing the hurdles in moving from concept to clinical use); The Case for Personalized Medicine, PERSONALIZED MEDICINE COALITION, http://cllcanada.ca/2010/pdfs/TheCaseforPersonalizedMedicine_5_5_09.pdf (discussing the benefits of personalized medicine and the necessary steps for widespread implementation).

⁴ See Matthew Herder, *Patents & the Progress of Personalized Medicine: Biomarkers Research as Lens*, 18 ANNALS HEALTH L. 187, 190-91 (2009).

⁵ *Id.* at 190. Currently embryonic stem cell therapy is in its nascent stage and not a realistic therapeutic option.

Coalition describes the emerging practice as follows:

Personalized medicine uses new methods of molecular analysis to better manage a patient's disease or predisposition toward a disease. It aims to achieve optimal medical outcomes by helping physicians and patients choose the disease management approaches likely to work best in the context of a patient's genetic and environmental profile. Such approaches may include genetic screening programs that more precisely diagnose diseases and their sub-types, or help physicians select the type and dose of medication best suited to a certain group of patients.⁶

Other definitions go even further to dispel the potential misunderstanding surrounding the term "*personalized*." For instance, the President's Council of Advisors on Science and Technology stressed that personalized medicine "does not literally mean the creation of drugs or medical devices that are unique to a patient but rather the ability to classify individuals into subpopulations that differ in their susceptibility to a particular disease or their response to a specific treatment."⁷

In other words, personalized medicine interpreted broadly enables physicians to provide better diagnoses and earlier interventions, to engage in more effective drug development, and to implement more effective therapies for various subsets of patients who share the same genetic variations.⁸

⁶ *Personalized Medicine: An Introduction*, PERSONALIZED MEDICINE COALITION, http://www.personalizedmedicinecoalition.org/sites/default/files/personalmed_backgrounder.pdf.

⁷ *Priorities for Personalized Medicine*, President's Council of Advisors on Science and Technology (September 2008), http://www.whitehouse.gov/files/documents/ostp/PCAST/pcast_report_v2.pdf.

⁸ *Id.* Because this paper focuses primarily on gene patents, the term personalized medicine should be understood in the broader context as defined by the Coalition and the President's Council.

B. The Science Underlying Genetics and Personalized Medicine

Genetic science continues to revolutionize the practice of medicine by enabling treatment tailored to individual patients and providing insight to better therapeutic approaches. Although many patients utilize personalized medicine at some point over the course of their medical treatment, not all patients understand the science behind such treatment. While understanding the basics of genetic science and the types of patents currently available for the countless discoveries in the field would aid the reader's understanding of the genetic impact on medicine, an in-depth discussion of this complex science is beyond the scope of this paper.⁹ Instead, this Article will provide a basic explanation from a patient's perspective: what are genes and how are they patented? This section will define the key terms and introduce the basic scientific foundations of genetics, moving into an overview of the various categories of patents that collectively are referred to as "gene patents."

The genomic structure is best understood by explaining the different parts of DNA and how its components direct the formation of proteins.¹⁰ DNA (deoxyribonucleic acid) is a double helix structure created by two chemically-bonded strands that

⁹ See, e.g., Alan E. Guttmacher & Francis S. Collins, *Genomic Medicine – A Primer*, 347 N. ENG. J. MED. 1512-20 (2002); W. Gregory Feero & Alan E. Guttmacher, *Genomic Medicine – An Updated Primer*, 362 N. ENG. J. MED. 2001-11 (2010); Wylie Burke, Genetic Testing, 347 N. ENG. J. MED. 1867-75 (2002).

¹⁰ Many articles go into great detail on the structure of DNA and its corresponding science. See, e.g., Eric D. Zard, Note, *Patentability of Human Genetic Information: Exploring Ethical Dilemmas Within the Patent Office and Biotechnology's Clash with the Public Good*, 6 U. ST. THOMAS L.J. 486-490 (2009); Lorelei Perez Westin, Note, *Genetic Patents: Gatekeeper to the Promised Cure*, 25 T. JEFFERSON L. REV. 271, 276-79 (2002). Similarly, the Federal Circuit has discussed molecular genetics in greater depth. See, e.g., *In re Deuel*, 51 F.3d 1552, 1554-56 (Fed. Cir. 1995); *Amgen, Inc. v. Chugai Pharm. Co., Ltd.*, 927 F.2d 1200, 1207-08 (Fed. Cir. 1991); *In re O'Farrell*, 853 F.2d 894, 895-99 (Fed. Cir. 1988). This Article will not rearticulate the scientific foundation in as great detail, but will rather provide sufficient background to understand the gene patents and their relationship with genetic exceptionalism.

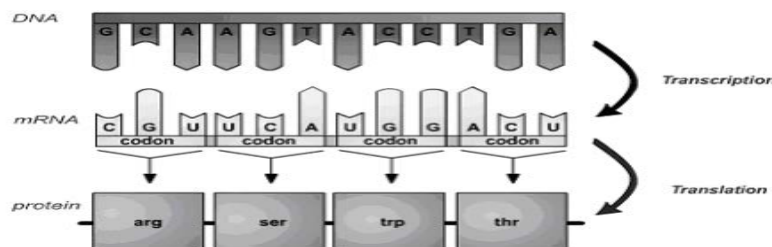
stores and encodes an organism's genetic information.¹¹ Each DNA strand contains four base molecules (A, G, C, and T) that serve as the building blocks.¹² Before the cell can make the protein, the DNA strand must undergo three processes: (1) copying the DNA strand into RNA (transcription); (2) removing or splicing of the inactive regions (introns) and connecting the active regions (exons); and (3) translating the RNA (ribonucleic acid) into its corresponding amino acids.¹³ When joined together, these amino acids fold into unique three-dimensional shapes that determine the property and function of the protein in the body.¹⁴

While the human genome contains more than three billion base pairs,¹⁵ only two percent of these base pairs represent the 20,000 to 25,000 genes present in the human genome.¹⁶ In comparing human

¹¹ Wylie Burke, *Genetics Primer*, NATIONAL ASSOCIATION OF WOMEN JUDGES, GENOME JUSTICE, September 2005, 1-14.

¹² *Id.*

¹³ The following figure, a reproduction of Figure 14.5 from DAVID KROGH, *BIOLOGY: A GUIDE TO THE NATURAL WORLD* 249 (5th ed., 2005), depicts the two processes for decoding genetic information:



¹⁴ There are typically three regions that are relevant to genetic patents: (1) the exon region (coding region of the gene); (2) the promoter and terminating regions of a gene (which mark the beginning and the end of gene); and the (3) intron region (non-coding regions that are spliced or removed during the transcription phase). See Mark A. Chavez, *Gene Patenting: Do the Ends Justify the Means*, 7 *COMPUTER L. REV. & TECH. J.* 255, 256 (2003).

¹⁵ The human genome refers to the complete set of DNA from the combined chromosomes. See *The Science Behind the Human Genome Project: Basic Genetics, Genome Draft Sequence, and Post-Genome Science*, HUMAN GENOME PROJECT INFORMATION (Mar. 26, 2008) http://www.ornl.gov/sci/techresources/Human_Genome/project/info.shtml.

¹⁶ *How Many Genes Are in the Human Genome?*, HUMAN GENOME PROJECT INFORMATION (Sept. 19, 2008) http://www.ornl.gov/sci/techresources/Human_Genome/faq/genenumber.shtml. Currently, the average gene is

genomes, scientists have discovered that humans share approximately 99.9 percent of the same code, resulting in only .01 percent variation between human genomes.¹⁷ Scientists have identified 1.4 million locations where these single-base variations occur.¹⁸ These variations are referred to as single nucleotide polymorphisms, or “SNPs.”¹⁹

Depending on where the variation occurs, the mutation(s) may result either in minor changes that account for the normal range of characteristic like hair color, height, or medication response, or in more profound changes that are responsible for various forms of genetic diseases.²⁰ While a single mutation may cause a handful of diseases, the majority of diseases are multifactorial, depending on a complex interaction of multiple genes and numerous environmental factors.²¹

II. PATENTING THE TOOLS OF PERSONALIZED MEDICINE: A LOOK AT THE IMPACT OF GENETIC PATENTS ON PATIENT CARE

Each step towards understanding the human genome fortifies the bridge between DNA code and a patient’s bedside by creating new possibilities in personalized medicine. With the completion of the Human Genome Project, researchers have unlocked the key to a wealth of genetic information. But discovering the function and relationship of genes and translating these discoveries into

approximately 3,000 bases, with the largest known gene having 2.4 million. And of the known genes, scientists can identify the function for only approximately 50 percent.

¹⁷ Burke, *supra* note 9, at 4.

¹⁸ *Id.*

¹⁹ *Id.*

²⁰ *Id.* SNPs help determine the likelihood that a person will develop a disease during his or her lifetime.

²¹ *See id.* at 7, 12. The media coverage has influenced the public’s perception of genetic diseases, often oversimplifying the causation between a mutation and a disease and overemphasizing the determinative effect of a genetic mutation. Diseases caused by single gene mutations can be broken down into autosomal dominant, autosomal recessive, and X-linked recessive disorders. Chromosomal conditions, another subset of genetic diseases, are caused by a deficiency or excess of chromosomal material. *Id.* at 9-11.

beneficial treatment is an ongoing, complex endeavor. Currently, there are over 6,000 diseases that can be traced to a single gene,²² while there are thousands of other conditions that are linked to genetic variations in multiple genes and interactions with environmental factors. As scientists better understand these complex genetic interactions, further progress can be made in the development of diagnostic tools, prevention techniques, and therapeutic treatments.²³

With the progress in personalized medicine comes the desire to protect the intellectual property associated with such advancements. The impetus behind the U.S. patent law system has always been the careful balancing between the competing interests of incentivizing innovation, encouraging the disclosure of inventions for the public good, and fostering competition. The framers of the U.S. Constitution were mindful of these tradeoffs in drafting Article I § 8, which provides that Congress shall have the power “[t]o promote the Progress of Science and useful Arts, by securing for limited Times to Authors and Inventors the exclusive Right to their respective Writings and Discoveries.”²⁴ America’s founding fathers understood that granting an exclusive right for a period of time may justify an otherwise undesired monopoly so long as the exclusive right provided sufficient incentives to invest in research and development that would otherwise not come to fruition absent the incentive. In exchange for this period of exclusivity, however, the patentee must contribute to the public a useful, novel, non-obvious invention—disclosing sufficient information for a person skilled in the arts to practice the invention.²⁵

Understanding that innovation and ongoing discovery is

²² Melissa Conrad Stoppler, *Genetic Diseases Overview*, MEDICINENET.COM (May 11, 2010), http://www.medicinenet.com/genetic_disease/article.htm.

²³ Eric D. Green & Mark S. Guyer, *Charting a Course for Genomic Medicine from Base Pairs to Bedside*, 470 NATURE 204 (2011); see also Ethical, Legal & Social Issues: Gene Testing, HUMAN GENOME PROJECT INFORMATION (July 7, 2010) http://www.ornl.gov/sci/techresources/Human_Genome/elsi/patents.shtml.

²⁴ U.S. CONST. art. I, § 8, cl. 8.

²⁵ See 35 U.S.C. §§101-103, 112 (2003).

financial interests.”³¹ He also found that “twenty-eight percent of the geneticists surveyed reported that they were unable to duplicate published research because other academic scientists refused to share information, data, or materials,”³² thereby preventing scientists from verifying the studies.

Further compounding the problem of gene patents is the “patent thicket”—a term critics use to refer to the multiple patents on various components of a gene—which, according to some critics, “may be stifling life-saving innovations further downstream in the course of research and product development.”³³ In other words, if research scientists must acquire multiple licenses from multiple parties to conduct research on any given gene, then the cost of researching gene therapy is greater and the research itself is at risk of being derailed by a patent holder who refuses to license a necessary input to the research.³⁴

While some critics concede that a level of patent protection is necessary for incentivizing research, they suggest that the patent system is offering protection at the wrong stage in the development process.³⁵ By issuing patents early in the development process when little is understood about the role the gene plays, a patent holder can assert the patent against later discovered mutations or genetic associations when more is understood about the gene’s role in genetic diseases.³⁶ Arguably, the patent system grants the equivalent of a “hunting license” to the pioneering scientist, rewarding the search without compensating later discoveries that

³¹ Lori B. Andrews, *The Gene Patent Dilemma: Balancing Commercial Incentives With Health Needs*, 2 HOUS. J. HEALTH L. & POL’Y 65, 81 (2002) (summarizing findings in David Blumenthal et al., *Withholding Research Results in Academic Life Sciences*, 277 JAMA 1224, 1224 (1997)).

³² *Id.* (citing David Blumenthal et al., *Data Withholding in Academic Genetics*, 284 JAMA 473, 477 (2002)).

³³ *Id.* at 85 (quoting Michael A. Heller and Rebecca S. Eisenberg, *Can Patents Deter Innovation? The Anticommons in Biomedical Research*, 280 SCI. 698, 701 (1998)).

³⁴ *See id.* at 85-86.

³⁵ *See id.*

³⁶ *See id.* at 87-88. But consider that some people, including Steven Shavell, argue that awarding patents early in the process prevents excess duplicative investment.

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from one organism to another, or (4) genetically modified cells or organisms, processes used for the making of genetically modified products and the uses of genetic sequences or proteins for genetic tests.⁴²

The patents are generally issued as “compositions of matter” or “method-of-use” patents, and although sometimes erroneously interpreted as patenting the gene itself, the patent only covers genetic information that has been isolated and purified.⁴³

A. cDNA Patents

Complementary DNA (cDNA) is a synthetic copy of an isolated section of DNA that includes only the coding-region for a protein as opposed to the entire gene as it is found in the body.⁴⁴ Scientists take the mRNA (which is copied DNA minus the non-coding regions) and convert it into a new DNA molecule through reverse transcription (cDNA).⁴⁵ Structurally and functionally different from genes found in nature, cDNA molecules can be used to produce large quantities of human protein in non-human species, to identify disease-causing mutations for diagnostic testing, to treat genetic disorders (gene therapy), and to enable new discoveries with their use as chemical reagents and research tools.⁴⁶ Although critics of cDNA patents assert that the information contained in cDNA is identical to naturally occurring DNA, even those critics acknowledge that naturally occurring DNA cannot be used for commercial diagnostic testing and research.⁴⁷

⁴² E. Richard Gold & Julia Carbone, *Myriad Genetics: In the Eye of the Political Storm*, http://www.theinnovationpartnership.org/data/ieg/documents/cases/TIP_Myriad_Legal.pdf (working document).

⁴³ *Id.*

⁴⁴ See Kevin Noonan, *Why Genes Must Remain Eligible for Patenting*, 23 GENEWATCH, 24, 30 (Oct.-Dec. 2010).

⁴⁵ *Id.*

⁴⁶ See Terry, *supra* note 41.

⁴⁷ See Magdalena Gugucheva, *The Physical Embodiment of Information*, 23 GENEWATCH 26-27 (Oct.-Dec. 2010). Vectors, which are larger molecules with integrated cDNA, that can be used to insert genes into other cells, are also patentable.

SNP patents permit the patentee to claim one “letter” of a sentence. As previously discussed, SNPs are unlike cDNA and EST fragments because they represent a genetic mutation (or variation) in only one nucleotide base in a genetic sequence.⁵⁴ These minor variations can have a major impact on the way that humans respond to disease, environmental factors, or pharmaceuticals and medical treatment.⁵⁵ Typically, SNP patents include claims for the method of determining a patient’s susceptibility to a disease by detecting a particular SNP in a known gene and for the isolated SNP molecule itself.⁵⁶

D. Patents on DNA Tests

The relationships between genetic mutations and diseases allow practitioners to tailor medical diagnoses and treatment to individual patients. Once a gene is discovered, scientists then work to develop a complementary test to screen individuals for the genetic mutation associated with a disease.⁵⁷ Genetic tests offer a window to a person’s genetic make-up, making it possible to confirm suspected diagnoses, to predict likelihood of future illness, to detect carrier status in unaffected individuals, and to evaluate a person’s response to medical treatment.⁵⁸ The tests differ in the manner by which they identify genetic variations. For example, some tests utilize short pieces of DNA, called probes, to seek out a complementary sequence to the mutated gene which then binds to the sequence if present.⁵⁹ Another type of genetic testing directly compares the patient’s DNA sequence to a normal version of the sequence, looking for any differences between the two sequences.⁶⁰ Finally, other genetic tests detect gene products, such

⁵⁴ See Genome Project Information, *Ethical, Legal & Social Issues: Gene Testing*, HUMAN GENOME PROJECT INFORMATION (July 7, 2010) http://www.ornl.gov/sci/techresources/Human_Genome/elsi/patents.shtml.

⁵⁵ *Id.*

⁵⁶ *Id.*

⁵⁷ *Genetic Testing*, NATIONAL HUMAN GENOME RESEARCH INSTITUTE (Jan. 10, 2013), <http://www.genome.gov/10002335>.

⁵⁸ *Id.*

⁵⁹ *Id.*

⁶⁰ *Id.*

IV. GENETICS AND THE LAW: AN OVERVIEW OF SUBJECT MATTER PATENTABILITY PRECEDING *MYRIAD*

The watershed case invalidating Myriad Genetics' gene patents was not the first to address gene patents, albeit perhaps the first to directly attack the patents under the subject matter requirement.⁶⁸ Patent law's history is fraught with cases that courts can draw on for the gene patentability analysis, dating as far back as the late 1800s.⁶⁹ The earlier cases addressing biotechnology patents focused primarily on the novelty and obviousness prongs of patentability.⁷⁰ It was not until after the Patent Act of 1952, however, that courts recognized the requirements of subject matter, novelty, and non-obviousness were wholly separate inquiries.⁷¹

The purification doctrine⁷² has long been the linchpin for justifying gene patents. In 1874, the Supreme Court addressed the validity of a patent on purified cellulose used to make paper.⁷³ The Court reasoned that because the product was not substantially different than the naturally occurring product either in form or substance, the patent was invalid for lack of novelty.⁷⁴

Subsequent courts interpreted this decision to mean that inventors could potentially patent purified or isolated products of nature with a new commercial or therapeutic use. In the early 1900s, *Parke-Davis & Co. v. Kalo Inoculant Co.*, decided whether purified adrenaline could be patented.⁷⁵ In upholding the validity

⁶⁸ Myriad Genetics is the company that holds the patents on BRCA1/2, which are the patents the plaintiff sought to invalidate in the case referred to herein as *Myriad*.

⁶⁹ See Ashley McHugh, *Invalidating Gene Patents: Association for Molecular Pathology v. U.S. Patent & Trademark Office*, 62 HASTINGS SCI. & TECH. L.J. 185, 191-92 (2010).

⁷⁰ See *id.*

⁷¹ See *id.*

⁷² The purification doctrine states that naturally occurring substances may still be patentable, despite being products of nature, if the substance can be isolated and purified from its naturally occurring state. See, e.g., *Parke-Davis & Co. v. H.K. Mulford Co.*, 189 F. 95 (S.D.N.Y. 1911).

⁷³ *American Wood-Paper Co. v. Fibre Disintegrating Co.*, 90 U.S. 566 (1874).

⁷⁴ *Id.* at 593-96.

⁷⁵ *Parke-Davis & Co. v. H.K. Mulford Co.*, 189 F. 95 (S.D.N.Y. 1911).

“art, machine, manufacture, or composition of matter” language. The Court also provided additional language that suggests it was not deciding the case on the subject matter prong of patentability:

Each of the species of root nodule bacteria contained in the package infects the same group of leguminous plants which it always infected. No species acquires a *different use*. The combination of species produces no new bacteria, no change in the six species of bacteria, and no enlargement of the *range of their utility*. . . . Their use in combination does not *improve in any way their natural functioning*.⁸²

Because the *Funk Brothers* analysis was directed at the invention or discovery prong—not the subject matter prong—the holding should be narrowly construed in subsequent cases.⁸³ Opponents of gene patents should not be quick to conclude that the case prohibits patenting naturally occurring biological products since the likely correct interpretation invalidates only those patents that fail to apply the naturally occurring substance in a non-obvious way.⁸⁴

Indeed, *Funk Brothers* did not foreclose the door for patents on naturally occurring substances despite Justice Douglas’ “phenomena of nature” reasoning.⁸⁵ In 1980, the Supreme Court

⁸² *Id.* at 131 (emphasis added).

⁸³ *See id.* at 132 (“[W]e conclude that the product claims do not disclose an invention or discovery within the meaning of the patent statutes, we do not consider whether the other statutory requirements contained in 35 U.S.C. § 31, R.S. § 4886, are satisfied.”) (emphasis added).

⁸⁴ *See* John M. Conley & Robert Makowski, *Back to the Future: Rethinking the Product of Nature Doctrine as a Barrier to Biotechnology Patents*, 85 J. PAT. & TRADEMARK OFF. SOC’Y 301 (2003).

⁸⁵ *See, e.g., Merck & Co. v. Olin Mathieson Chemical Corp.*, 253 F.2d 156, 164 (4th Cir. 1958). In 1958, the Fourth Circuit Court of Appeals upheld a patent on purified vitamin B-12 based on the therapeutic and commercial value of the biological product, noting that nothing in the language of the Patent Act of 1952 prohibited the patenting of naturally occurring substances. *Id.* The court found that compositions of matter necessarily included products of nature, stating:

All of the tangible things with which man deals and for which

to DNA in the two decades that followed this revolutionary decision.⁹²

Despite the proliferation of DNA patents, none have been invalidated for lack of subject matter. Instead, challenges to gene patents focus primarily on the novelty, utility, and non-obviousness requirements for patentability.⁹³

V. BEGGING THE QUESTION: DOES GENETIC EXCEPTIONALISM HAVE A PLACE IN THE PATENT ACT?

A. *The History of Genetic Exceptionalism in Social Science and Public Policy*

Several bioethicists and legal commentators have discussed the role of genetic exceptionalism in the areas of privacy, insurance, and discrimination laws, with some questioning whether the special treatment of genetic information is necessary or even beneficial.⁹⁴ Despite the body of literature replete with arguments for and against gene patentability, genetic exceptionalism is conspicuously absent from the debate. The recently decided case invalidating Myriad's BRCA1/2 patents, however, arguably opened the door to a more nuanced application for genetic exceptionalism: invalidating gene patents based primarily on a gene's unique function in nature as an information carrier. To better understand how Judge Sweet's legal analysis effectively directs gene patents down the road to exceptionalism, it is first

⁹² *Id.*

⁹³ Because this Article focuses solely on genetic exceptionalism's influence on the subject matter requirement for gene patents, the court decisions regarding utility, novelty, obviousness, and enablement will not be discussed here. Recognizing these requirements are equally important to gene patentability, the Author suggests reading Lauren M. Nowierski, Note, *A Defense of Patenting Human Genome Sequences Under U.S. Law: Support For the Patenting of Isolated and Purified Substances*, 26 CARDOZO ARTS & ENT. L.J. 473 (2008), for an in-depth overview of genetic patent challenges under these patentability prongs. See also Conley, *supra*, note 40.

⁹⁴ See, e.g., Sonia M. Suter, *The Allure and Peril of Genetics Exceptionalism: Do We Need Special Genetics Legislation?*, 79 WASH. U. L.Q. 669, 671 (2001).

waiting for the promise to come to fruition.⁹⁹ As one author comments, “Science reporters must first and foremost attract readers, a difficult task when competing with more attention-grabbing topics like war and pop culture. Likely in response to this pressure, two trends have emerged in media coverage of genetics: oversimplification and sensationalism.”¹⁰⁰

Prior to 1993, media coverage focused on newly discovered genes, but as these discoveries became “old news,” the stories lost their luster.¹⁰¹ The media responded by shifting their angle to the pitfalls and perils of genetics, reporting on cautionary tales of discrimination and the proliferation of designer babies.¹⁰² Regardless of whether the undulating media coverage currently paints genetics with a brush or negative, the public’s impression that genetics deserves a unique, tailored discourse has already been solidified in the collective mind.

Throughout the ongoing discourse, the public and media have not ignored the other side of the proverbial genetic coin. Simultaneous with genetics’ elevation to its “Holy Grail” status was the emergence of a historically-based distrust of genetics’ misuse. While the majority of the public most readily identifies the eugenics movement’s apex with the Nazi experiments of World War II, the principles of reproductive selection have existed since the days of Darwin.¹⁰³ And as evidenced by the oft-reviled United

⁹⁹ See *Gene Therapy*, HUMAN GENOME PROJECT INFORMATION (Aug. 24, 2011), http://www.ornl.gov/sci/techresources/Human_Genome/medicine/genetherapy.shtml. Gene therapy remains in the experimental stage and has yet to have a solidly successful clinical trial. The technology has not overcome the difficulties presented by the short-lived nature of gene therapy, immune responses in recipients, problems with viral vectors, and the complex nature of multigene disorders.

¹⁰⁰ Ellen Dupont, *Diagnosing the Geno-Hype: Genetic Determinism in the Mass Media*, 5 THE SCI. IN SOC’Y REV. 20, 21 (Spring 2009).

¹⁰¹ Suter, *supra* note 94, at 678 n.1.

¹⁰² See Dupont, *supra* note 100; see also David A. Hyman, *Lies, Damned Lies and Narrative*, 73 IND. L.J. 797 (1998) (discussing the power of anecdotal evidence to shape public opinion); Mike Snider, *How Genetics Can Be Used Against You*, USA TODAY, Nov. 17, 1993, at 9D, available at 1993 WL 6726460; Lisa Goldstein, *If You Knew Your Child Would Be Born Deaf*, S.F. CHRON., Feb. 1, 1999, at A19.

¹⁰³ Although deemed most prolific implementation of eugenics practice, the

driving force of the exceptionalism movement was the dedication of “the largest expenditure of money for biomedical ethics and health law in the country” to the study of the ethical, legal, and social issues (ELSI) in genetic research.¹¹⁰ This unprecedented expenditure generated a vast body of literature and countless studies dedicated exclusively to genetic issues, and “even if much of the scholarship is not explicitly premised on notions of genetics exceptionalism, . . . [it] intensifies the media’s attention to genetics issues and public fear about genetics.”¹¹¹ While many of the same threats for misuse and potential social consequences exist in other disciplines, no other science has captivated the public with equal pervasiveness as genetic science.¹¹²

The confluence of lofty promises for cures, the trendy appeal of the ethical issues, and the sordid history of misuse can explain genetic exceptionalism in American culture. Traditionally, scholars have analyzed genetic exceptionalism in the areas of employment discrimination, insurance discrimination, and privacy laws.¹¹³ The

family medical histories and information pertaining to an individual or family member’s genetic tests and genetic services. Although several states had already acted to protect against genetic discrimination, GINA served to set the minimum level of protection afforded to individuals.

¹¹⁰ Suter, *supra* note 94, at 685 n.1 (quoting Robert Weir, *Why Fund ELSI Projects?*, in *GENES AND HUMAN SELF KNOWLEDGE: HISTORICAL AND PHILOSOPHICAL REFLECTIONS ON MODERN GENETICS* 189 (Robert F. Weir et al. eds., 1994)).

¹¹¹ Suter, *supra* note 94, at 685-86.

¹¹² See Thomas H. Murray, *Genetic Exceptionalism and “Future Diaries”*: *Is Genetic Information Different from Other Medical Information*, in *GENETIC SECRETS: PROTECTING PRIVACY AND CONFIDENTIALITY IN THE GENETIC ERA* 60, 61 (Mark A. Rothstein ed., 1997); Suter, *supra* note 94. *But see* Eric T. Juengst, *FACE Facts: Why Human Genetics Will Always Provoke Bioethics* 32 *J.L. MED. & ETHICS* 267 (2004) (arguing that genetic information’s intrinsic moral value justifies the continued prominence of genetic exceptionalism in bioethics).

¹¹³ See Suter, *supra* note 94; see also Trudo Lemmens, *Selective Justice, Genetic Discrimination, and Insurance: Should We Single Out Genes in Our Laws?*, 45 *MCGILL L.J.* 347 (2000) (discussing the desirability of genetic-specific legislation in the insurance context); Douglas H. Ginsburg, *Genetics and Privacy*, 4 *TEX. REV. L. & POL.* 17 (2000); Mark A. Rothstein, *Genetic Exceptionalism and Legislative Pragmatism*, 35 *J.L. MED. & ETHICS* 59 (2007); Lawrence O. Gostin & James G. Hodge, Jr., *Genetic Privacy and the Law: An End to Genetic Exceptionalism*, 40 *JURIMETRICS J.* 21 (1999) (arguing that there

embraces the genetic exceptionalism ideals by finding that genes are *inherently different* and thus deserving of unique treatment under the Patent Act.¹¹⁷ Despite whether genetic information should be treated differently in other contexts—for example with insurance, discrimination, and privacy laws—Judge Sweet overlooks the fact that the genetic information itself is not patented. As such, researchers are able to utilize the genetic information disclosed in the patent for purposes such as performing sequence comparisons or detecting genetic polymorphisms.¹¹⁸ This section dissects the law on patentable subject matter from the opinion’s genetic exceptionalism components, and then evaluates whether the holding can stand based purely on the legal arguments that remain.

1. Background of BRCA1/2 and the *Myriad* Litigation

In 1990, a team of geneticists discovered that a mutation in the BRCA1 gene was linked to an increased risk for developing breast and ovarian cancers.¹¹⁹ Of the patients with hereditary breast cancer, five to ten percent have a substituted allele that inactivates the BRCA1 gene, leading to an abnormal cellular gene expression of the protein.¹²⁰ If a patient has a mutated gene, she has a lifetime risk of 40 to 85 percent for developing breast cancer and a risk of 16 to 40 percent for developing ovarian cancer.¹²¹ Other known factors, such as the type of mutation (e.g., insertion, deletion, or rearrangement of codons) and family history can impact the lifetime risk of developing cancer, as well as the likely interaction

¹¹⁷ Some philosophers have viewed genes as more than the “common heritage of mankind,” arguing that genes are an “un-encloseable commons-by-necessity . . . free for use by any and all.” David Koepsell, *Naturally Occurring Genes and the Commons by Necessity*, 23 *GENEWATCH* 32, 34 (Oct.-Dec. 2010).

¹¹⁸ *Id.* at 31.

¹¹⁹ Bryn Williams-Jones, *History of a Gene Patent: Tracing the Development and Application of Commercial BRCA Testing*, 10 *HEALTH L.J.* 123, 131 (2002).

¹²⁰ *Id.* at 127.

¹²¹ *Id.*

ovarian cancer and the market for developing therapeutics to treat patients with one of the mutations.¹³⁰

Over the course of the 1990s, Myriad did not assert its exclusivity rights over its BRCA1/2 patents, but instead allowed researchers to use the tests under certain circumstances. Myriad offered to license its patents to the University of Pennsylvania Genetic Diagnostic Laboratory so that the laboratory could continue its screening program on BRCA1 and BRCA2.¹³¹ Not satisfied with the scope of the license, the University and its physicians rejected the licensing proposal.¹³² Myriad subsequently sent cease-and-desist letters to the University of Pennsylvania and on August 26, 1998, sent notice that the physicians were infringing Myriad's patents and filed the infringement suit in November of the same year.¹³³ Although the laboratory was forced to stop performing tests, Myriad informed the University that it was free to continue academic research on the genes.¹³⁴ A similar course of conduct—Myriad offering a license and the plaintiffs rejecting the license—occurred with the other plaintiffs in the case.¹³⁵

Myriad asserted seven patents against the plaintiffs, identifying fifteen claims within those patents that the plaintiffs allegedly infringed.¹³⁶ The claims fell into one of two categories: composition claims or method-of-use (or process) claims.¹³⁷ Because there were several composition claims within the patent,

¹³⁰ In the years following the issuance of the patents, Myriad developed a host of tests to screen and diagnose patients with an increased risk for breast cancer. Among the tests (listed from least to most expensive) include: (1) a single site test for patients having a family history of the mutation, designed to identify carriers; (2) a multisite test that searches for three common mutations in the Ashkenazi Jewish population; (3) a comprehensive test identifying the full gene sequence; and (4) a rapid test designed to return the full gene sequence within seven days. Williams-Jones, *supra* note 119, at 133-34. Myriad's tests were arguably more sensitive than other tests offered at the time because Myriad's tests identified each base-pair within the gene. *Id.*

¹³¹ *Myriad*, 702 F. Supp. 2d at 205.

¹³² *Id.*

¹³³ *Id.*

¹³⁴ *Id.*

¹³⁵ *Id.*

¹³⁶ *Id.* at 212.

¹³⁷ *Id.*

that the term “DNA” should be construed to mean “a sequence of nucleic acids, also referred to as nucleotides.”¹⁴⁵ As Myriad pointed out, this definition implies that DNA refers to a description of the sequence of nucleic acids (i.e., information only).¹⁴⁶ Myriad contended that “DNA” encompasses a “real and tangible molecule, a chemical composition made up of deoxyribonucleotides linked by a phosphodiester backbone.”¹⁴⁷ In resolving this dispute in Myriad’s favor, the court looked at the specification of Myriad’s patent, which explicitly referred to DNA as a *physical manifestation* of the nucleotides such that the DNA *could be separated* from the other components of the cells that naturally accompany DNA.¹⁴⁸ Similarly, the court adopted Myriad’s definition of “isolated DNA” as set forth in the specification, which defined isolated DNA as “a DNA molecule which is substantially separated from other cellular components which naturally accompany a native human sequence”¹⁴⁹

The second claim concerned the definition of BRCA1 and BRCA2. The plaintiffs argued that each meant “a particular fragment of DNA found on chromosome 17 [13 for BRCA2] that relates to a person’s predisposition to develop breast and ovarian cancer.”¹⁵⁰ Once again, however, Myriad acted as its own lexicographer, defining in the patent specification each gene as “a human breast cancer predisposing gene . . . some alleles of which

down into two categories, intrinsic and extrinsic evidence, with more weight given to the former. Some of the intrinsic evidence considered by a court includes: words of the claims themselves, the written description, and the prosecution history of the patent. *Id.* at 214-15. In looking at this evidence, the court will not read a limitation in a dependent claim into the independent claim, nor will the court read a limitation from the specification into the claim (but does read the claim “in light of” the specification). Finally, if the patentee acts as its own “lexicographer,” then the court will use the patentee’s definition for a disputed term. The court may also look at the extrinsic evidence available: dictionaries, treatises, and expert testimony. Usually, extrinsic evidence is used to inform the judge of the field of science and technology. *Id.* at 215-16.

¹⁴⁵ *Id.*

¹⁴⁶ *See id.*

¹⁴⁷ *Id.*

¹⁴⁸ *Id.* at 216.

¹⁴⁹ *Id.* at 217.

¹⁵⁰ *Id.*

evidence that *Funk Brothers* was decided on grounds other than subject matter patentability,¹⁵⁷ however, the court interpreted the case as standing for the exclusion of natural phenomena from subject matter patentability.¹⁵⁸

The court next turned in passing to *Chakrabarty*, which is arguably more controlling in *Myriad* since it was decided under § 101 of the current Patent Act.¹⁵⁹ While he included some of the language of the opinion, Judge Sweet omitted any meaningful discussion on the analysis underlying the Court's holding. For instance, he seemingly glossed over the part of the *Chakrabarty* opinion that states that without a specifically designed exception from Congress, § 101 should be construed broadly and in such a way that includes living things.¹⁶⁰ Since the decision, *Chakrabarty* has supported patenting living products that have “markedly different characteristics from any found in nature and one having the potential for significant utility.”¹⁶¹

Throughout the next several pages of the *Myriad* opinion, Judge Sweet proffered a litany of cases that essentially require “something more” than merely isolating or purifying a substance from its native state to fall within the scope of statutory subject matter.¹⁶² Read collectively, these cases require that a patentable product have qualities or characteristics that were absent in its

for Alnylam Pharmaceuticals, Inc. as Amici Curiae Supporting Defendants-Appellants, Ass'n for Molecular Pathology v. Myriad Genetics, Inc. 133 S.Ct. 694 (2012) (No. 12-398) at 8 (“Debunking myths of Funk Bros. Seed Co. v. Kalo Inoculant Co.”), available at <http://patentdocs.typepad.com/files/alnylam-amicus-brief.pdf>. There is ample language in the *Funk Brothers* opinion that suggests the mixture was not patentable because the proffered “invention” conferred no new quality or use (i.e., obvious) for any one bacterium in the mixture or for the collective whole. Rather, the mixture merely provided consumers with a more convenient way to purchase the component bacteria.

¹⁵⁷ See *id.* For a discussion on this very issue, visit the 37 Thoughts legal blog, available at <http://37thoughts.wordpress.com/2010/03/30/save-the-funk-brothers/>.

¹⁵⁸ *Myriad*, 702 F. Supp. 2d at 222.

¹⁵⁹ *Id.* at 223.

¹⁶⁰ *Chakrabarty*, 447 U.S. at 318.

¹⁶¹ *Id.* at 310.

¹⁶² *Myriad*, 702 F. Supp. 2d at 223-28.

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of the patent.”¹⁷² Without scratching the surface of the case, Judge Sweet merely pointed out the court’s conclusion that purified Vitamin B12 was more than a “mere advance in the degree of purity of a known product.”¹⁷³

3. Genetic Exceptionalism Transcribed into Legal Principle: Isolated DNA is not “Markedly Different” from Native DNA

After setting forth the legal precedent, Judge Sweet identified the applicable test for determining the subject matter patentability of Myriad’s isolated BRCA1 and BRCA2 gene patents. Namely, whether the isolated DNA claimed in the patent possesses “markedly different characteristics” from the native (or genomic) DNA.¹⁷⁴ Focusing on the chemical make-up of DNA, Myriad argued that the isolated DNA *is* markedly different because it differs both structurally and functionally from genomic DNA.¹⁷⁵ Instead of looking at the similarities and the differences between the two compositions, Myriad argued the court should look exclusively at the differences.¹⁷⁶ Judge Sweet rejected this approach, citing Supreme Court precedent that requires claims be considered as a whole.¹⁷⁷ While a correct statement of the law, the law may be misapplied; reading the claim as a whole means looking at the entire claim regarding *isolated* DNA, not the genomic DNA that falls outside the scope of the patent.¹⁷⁸

At this point in the opinion, Judge Sweet diverges from a purely legal argument into what is viewed by some as carving out an exception for gene patents based on the inherent information carrying function of genes themselves. He explained that focusing on the chemical nature of DNA “fails to acknowledge the unique characteristics of DNA that differentiate it from other

¹⁷² *Id.*

¹⁷³ *Myriad*, 702 F. Supp. 2d at 227 (quoting *Mathieson*, 253 F.2d at 164).

¹⁷⁴ *Id.* at 227-28.

¹⁷⁵ *Id.* at 229.

¹⁷⁶ *Id.*

¹⁷⁷ *Id.*

¹⁷⁸ *See id.* at 228.

not associated with chromosomal proteins.¹⁸⁶ The court rejected this argument, stating it was only a matter of purity.¹⁸⁷ Next, Myriad asserted that native DNA contains introns (noncoding regions) that are absent from the isolated or purified DNA, which only contains the exons (coding regions).¹⁸⁸ However, Judge Sweet found that because the isolated DNA contains *some* of the same gene fragments (e.g., the same fifteen nucleotide sequence), the two are not sufficiently different.¹⁸⁹ Judge Sweet stated that the claims covering the compositions of matter for BRCA1/2 (i.e., cDNA molecules) cover the same product that is produced by naturally-occurring splicing within the cell.¹⁹⁰ Yet he failed to recognize that the isolated DNA—as a chemical molecule—is much smaller, not three dimensional, and lacks the chemical complexity of genomic DNA, all properties which permit novel and innovative uses.¹⁹¹

Arguably, Myriad's strongest argument rested with isolated DNA's ability to be practically applied in ways that native DNA cannot. By extracting and significantly altering native DNA, scientists are able to use the isolated molecules to improve patient health care.¹⁹² With the adapted DNA, scientists are able to perform diagnostic tests using the molecule as a probe, primer, or template for sequencing genes.¹⁹³ Likewise, isolated DNA opens the door to medical treatment options ranging from preventative care to gene therapy.¹⁹⁴ Without the isolated DNA molecules, none of these health care innovations would be possible.¹⁹⁵

¹⁸⁶ *Id.* at 228-29.

¹⁸⁷ *Id.* at 229.

¹⁸⁸ *Id.* at 230.

¹⁸⁹ *Id.*

¹⁹⁰ *Id.* at 229-230.

¹⁹¹ See Brief for Am. Intellectual Prop. Law Ass'n as Amici Curiae Supporting Neither Party, *Ass'n for Molecular Pathology v. USPTO*, 653 F.3d 1329 (Fed. Cir. 2011) (No. 2010-1406) at 14, available at <http://www.aipla.org/Advocacy%20Shared%20Documents/AIPLA-Myriad-Amicus-filed.pdf> [hereinafter "AIPLA Brief"].

¹⁹² *Id.*

¹⁹³ *Id.*

¹⁹⁴ *Id.*

¹⁹⁵ *Id.* at 14-15.

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and advantages of the patent system by *arbitrarily excluding* it at the outset from the § 101 categories of patentable invention on the *sole ground that it is alive*. It is because it is alive that it is useful. . . .²⁰⁰

By analogy, DNA's chemical characteristics enable it to be used as a medical tool, but not unless it is isolated and purified. Without the man-made changes, the DNA molecule is unable and unreliable as a diagnostic tool. Thus, neither law nor fact supports arbitrarily excluding isolated DNA from patent protection owing to the fact that it carries the same information as genomic DNA. As an *Amicus Curie* brief eloquently summarized, "By selectively assigning dispositive importance to one shared characteristic of the claimed purified/isolated DNA molecules and discounting all the differences, the District Court adopted precisely the rationale that *Bergy* rejected."²⁰¹

CONCLUSION

After reviewing Judge Sweet's 152-page opinion, the Author would argue that there is no legal or factual basis for declaring isolated DNA outside the scope of patentable subject matter. Instead, it appears that the impetus behind the *Myriad* decision is rooted in genetic exceptionalism. By adhering to the principles of genetic exceptionalism, the opinion tends to overlook legal precedent to arrive at a conclusion that the nature of DNA as information carriers naturally exempts itself from patent protection absent an express exclusion from Congress. One could conclude that the *Myriad* decision was largely influenced by the societal, moral, and ethical issues—not by the legal precedent—raised by the plaintiffs. The opinion devoted several pages to the negative impacts that gene patents have on costs and access to health care as well as the possible chilling effect on research innovation. While these are important considerations in determining patent *policy*, they are not factors to be applied under the Patent Act. If such was the case, patented and statutorily permissible subject matter—such

²⁰⁰ *Id.* at 975 (emphasis added) (internal citations and quotations omitted).

²⁰¹ AIPLA Brief at 17 (citing *Bergy*, 596 F.2d at 975).

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