

shares vindicated the move.

Then in 2007 the stock soared again. The firm was the only maker of the blood-thinner heparin whose product did not have to be recalled because of contamination that killed 81 people. Soon-Shiong split and sold the company, saying it was “two unique businesses.” The generics business, including heparin, went to Fresenius in 2008 for \$4.6 billion. In 2010 the drug business, Abraxis, was bought by biotech giant Celgene for \$4.5 billion. Soon-Shiong owned some 80% of each.

Another multibillion-dollar windfall soon followed. Despite Soon-Shiong’s insistence that Abraxane was “a breakthrough,” by 2011 sales were just \$386 million—a middling success in the booming biotech sector. Then last year a study showed the drug extended the lives of pancreatic cancer patients by 1.8 months. Sales jumped 90% and are projected to hit \$2 billion by 2017.

Celgene’s stock—Soon-Shiong remains the largest individual shareholder—surged in lockstep.

Cleverness, determination and luck had left Soon-Shiong with enormous wealth—we put his current net worth at \$12 billion. But it also left him with a reputation as more of a wheeler-dealer than a scientist, which pains him, say confidants. “He has recognition in the business community,” says Michael Crow, the president of Arizona State University, another institution Soon-Shiong is talking about working with. “But that’s very different from the recognition that this was the man who built the intellectual fabric that allowed cancer survival rates to be increased 80%.”

SOON-SHIONG’S GRAND NEW project promises the closest thing that Earth has ever had to *Star Trek’s* fabled tricorder. In theory it will work like this: A cancer patient will

arrive at the hospital for diagnosis. Everything from her DNA to the proteins in her blood will get instantly analyzed via a proprietary and superfast network, with the data collected automatically in real time—no pens, paper or clipboards. Within minutes computers will recommend which drugs to try. Once the patient is sent home, the same technology will travel with her, allowing doctors to continue to monitor her in real time, as hospital administrators evaluate the efficacy and costs of various procedures and medicines and compare notes with hospitals across the country.

This vision came during the approval process for Abraxane in 2005. Doctors were making bad decisions. One study found that two-thirds of pancreatic cancer patients received the wrong treatment. Computer brainpower wasn’t enough to fix this, Soon-Shiong realized, if it wasn’t paired with

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AND NOT JUST ME,” SAYS
SOON-SHIONG. “AND WE HAVE
A BETTER WORLD FOR IT.”

a high-tech nervous system. “How could we ever hope to win the war against cancer using our newly gained molecular insights against a disease that has the capacity to constantly change and mutate?” he says.

Like a mechanic rummaging for parts, he started buying companies to build his new machine. He grabbed Eviti, based in Philadelphia, which sold its services to insurers as a way to ensure that cancer doctors weren’t prescribing medicines improperly (and billing for their errors). Thirty oncologists and nurses pore over the latest medical journals to make sure the information is up to date.

Another purchase: iSirona, a firm in Panama City, Fla. that’s attempting to connect hospital machines

with electronic health record systems. Soon-Shiong now claims that it can integrate 6,000 different medical devices, including pulse oximeters, blood pressure monitoring devices and bathroom scales, as well as hundreds of different types of clinical and financial software from every major medical vendor.

There were other technologies, too: Qi Imaging, a tool that allows CAT scans and MRIs to be viewed on mobile devices; GlowCap, an \$80 pill bottle that lights up when patients at home need to take their medicine and lets doctors know they are opening the cap. He purchased and refurbished the National Lambda Rail, a high-speed government computer network, at a cost of \$100 million, so all this data could move quickly from place to place. “In order to have value-based care you need to monitor outcomes in real time,” says Soon-Shiong. “And you need to monitor cost in real time. You’re going to have patient-centered highest-quality care at the lowest cost.”

All of these pieces—and dozens more that he’s bought or built—combine into a corporate structure as byzantine as his overarching product. His 800 employees are splintered across offices in 14 cities, and NantWorks, the parent holding company, houses nine separate units, all with different investor groups and each apparently designed to trade independently as a tracking stock. The first IPO, as early as next year, will likely be NantHealth, his health care information technology play, poised to profit from new payment schemes created by ObamaCare. Investors include Verizon, Celgene, BlackBerry and the Kuwait Investment Authority. FORBES values NantHealth alone at \$1.6 billion. All told, FORBES values the entirety of Soon-Shiong’s Nant-related holdings at \$7.7 billion.