

NCI Update

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Outline of Presentation

- FY16 Budget and FY17 Proposal
- PMI for Oncology
- Vice President's Cancer Initiative
- Other Updates

Outlook for Cancer Research Funding

- Strong bipartisan support for NCI/NIH
 - Key role of advocacy
 - Faster progress for patients
- Potential for continuing increases in Federal cancer research funding
- Coordination with private funding efforts

NCI FY16
Appropriation:
A ~5% increase

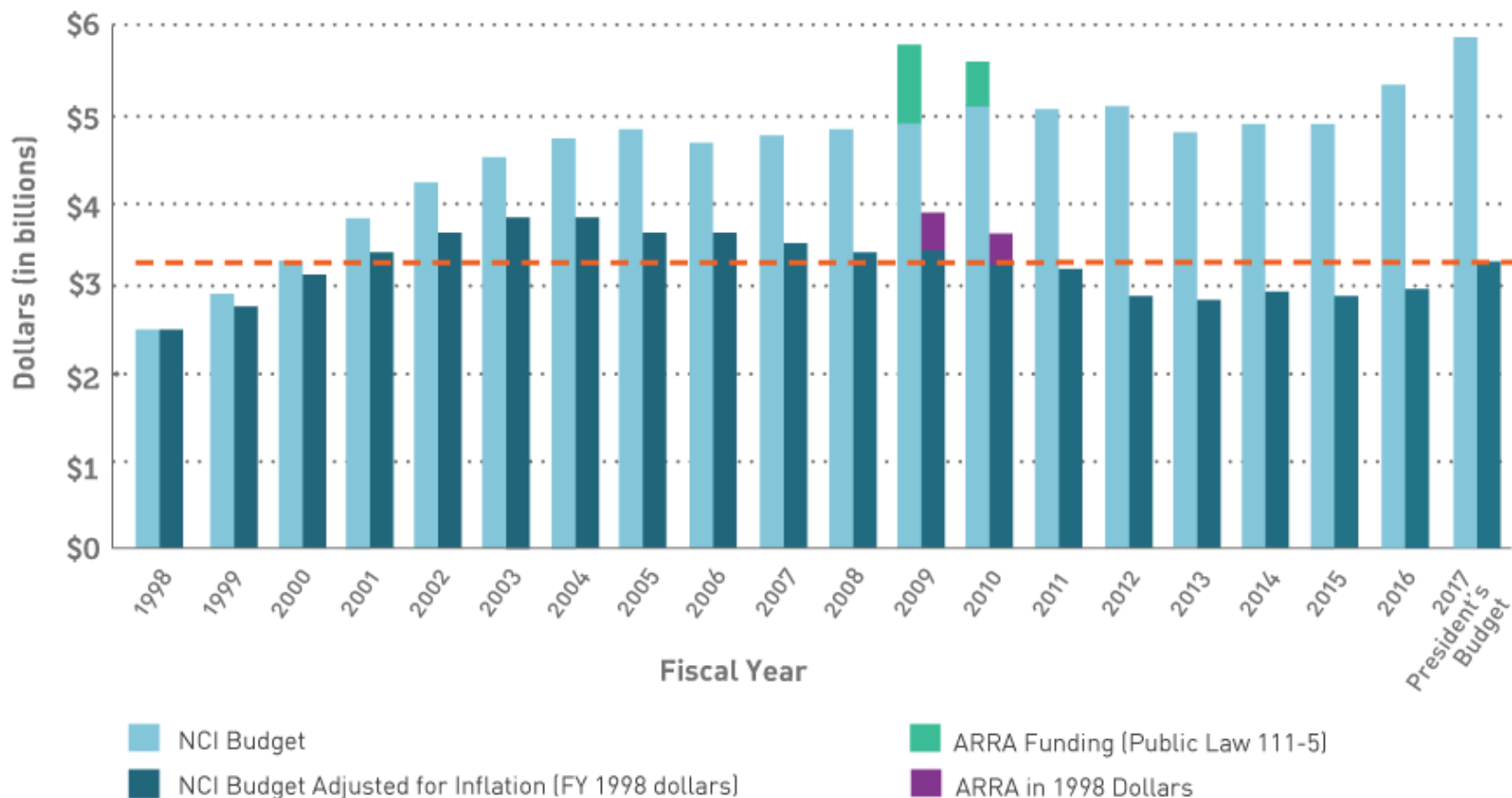
- ~\$265 million total increase
- \$70 million for the President's Precision Medicine Initiative in Oncology (PMI-O)
- \$195 million: Mandatory increases + new initiatives

NCI FY16
Appropriation
Increase: Non-PMI-O
Funding

- \$195 million: Non-PMI-O increase
 - ~\$50 million for increased fixed costs (lights, etc.)
 - \$10 million: Increase base for Cancer Center Support Grants
 - \$55 million: jump-start Vice President's Cancer Initiative
 - \$80 million: ~\$50 million for type 2 RPG pool, ~\$30 million for new & competing RPG pool

NCI BUDGET 2005 – 2015: A PERIOD OF LEVEL BUDGETS & PROGRESSIVELY DECREASING PURCHASING POWER

FY 2016 & 2017: AN ENCOURAGING TREND



----- The dashed line at approximately \$3.3 billion indicates that the inflation-adjusted FY 2017 proposed budget is similar to the FY 2000 budget

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Components of PMI-Oncology

- Developing and expanding clinical therapy trials in precision oncology
- Improving predictive oncology: by overcoming drug resistance, determining effective combination targeted therapy, and advancing immunotherapy
- Creating a new array of laboratory models, to increase understanding of cancer biology and achieve the goals of predictive oncology
- Building a national cancer knowledge system that integrates cancer genomic information, clinical information, and laboratory model information

NCI MATCH Current Status

- **Launched August 2015**
- **Nearly 800 patients registered in 3 months**
- **Protocol directed pause in accrual to screening (Nov 2015) to evaluate early results and make needed adjustments**
 - Tumor histologic types
 - Match rate (current 10 arms and planned arms)
 - Laboratory performance
 - Biopsy quality
- **Trial “arms” remain open for those who matched**
- **Continuing the process of activating new arms**
 - Anticipate 20-24 arms open by May 2016
- **Adding laboratory capacity**
 - Preanalytics
 - Sequencing

NCI MATCH Protocols in Development

- **KIT sensitizing mutation**
- **PTEN loss**
- **PIK3Ca mutation**
- **SMO/PTCH1 mutation**
- **TORC1/2 mutation**
- **TSC1/2 mutation**
- **DDR2 mutation**
- **NF1 mutation**
- **GNAQ/GNA11 mutation**
- **FGFR abnormalities**
- **AKT mutations**

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The Vice President's Cancer Initiative--

A preliminary draft of ideas

- Accelerate progress in cancer, including prevention & screening
 - From cutting edge to wider uptake of standard of care
- Encourage greater cooperation and breaking down silos
 - Within and between academia, government, and private sector
- Importance of data sharing

Proposed for Prevention, Screening, and Implementation

- Developing preventive vaccines against infectious and non-infectious targets
- Developing screening tests with body fluid samples (e.g, blood, saliva)
- Increasing uptake of standard of care for prevention, screening, and treatment

Proposed for Cancer Treatment Trials

- Increase immunotherapy trials and combination therapy trials
- Increase participation in clinical trials
- Develop an NCI drug formulary from many companies to facilitate preclinical and trial access to investigational agents

Other Proposed Research

- Develop drugs for pediatric cancer
- Increase genomic analysis of tumor cells and stromal cells
- Develop an “exceptional opportunities fund”



Cancer Moonshot Federal Task Force: Feb 1, 2016

Blue Ribbon Panel

- Researchers and other stakeholders
- Evaluate the current proposal: science, collaboration, public-private partnerships, etc.
- Consider other research opportunities
- Report to NCAB at June 2016 meeting

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Other Updates

- NCAB Cancer Centers Report and Follow Up
- NCAB SPORE Working Group Report
- EDRN RFA
- ETCTN Supplements
- Chemical Biology Consortium

The New Base Awards – Increases for 21/69 Cancer Centers

BASIC (2/7; 29%)

Center	FY15 Budget	Proposed Base FY16
Purdue	1,060,500	1,200,000
Jackson	1,156,367	1,200,000

CLINICAL (12/17; 71%)

Center	FY15 Budget	Proposed Base FY16
Indiana	999,867	1,400,000
Emory	1,000,000	1,400,000
Mt. Sinai	1,000,000	1,400,000
MUSC	1,000,000	1,400,000
Oregon	1,000,000	1,400,000
Hawaii	1,000,000	1,400,000
Kansas	1,000,000	1,400,000
Kentucky	1,000,000	1,400,000
Maryland	1,000,000	1,400,000
Nebraska	1,000,000	1,400,000
VCU	1,000,000	1,400,000
UT-SA	1,204,014	1,400,000

COMPREHENSIVE (7/45; 16%)

Center	FY15 Budget	Proposed Base FY16
Wake	1,000,000	1,500,000
UT-SW	1,000,000	1,500,000
Utah	1,111,000	1,500,000
Arizona	1,257,443	1,500,000
New Mexico	1,272,293	1,500,000
City of Hope	1,300,357	1,500,000
Georgetown	1,454,514	1,500,000

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