

Responses to questions received following the 1st Virtual Joint NCI Board of Scientific Advisors and National Cancer Advisory Board Meeting held on April 9, 2020

- 1. Would there be a possibility of extending training grants and fellowships, especially for people that have had to wait out this pandemic before heading back to the laboratory to complete experiments.**

NCI and NIH are committed to working with our applicants and recipients during this public health emergency. In addition, we recognize that there may be delays in submission of Research Performance Progress Reports and other reports. Recipients should contact the NCI grants management specialist and program official named in the Notice of Award to alert them of any effects on the NIH funded research. See [NOT-OD-20-086](#) for details on late submission.

- 2. Mid-career investigators have been already hit with most funding in the last 2 years aggressively channeled to ESIs and senior investigators. Are there any plans to save these investigators before more labs close and we lose the generation of scientists that we invested so much in? Mid-career investigators and in particular K to R investigators seem to be the forgotten generation.**

NCI and NIH value mid-career investigators and, indeed, we recognize the importance of catalyzing the development of a 21st century workforce, at all levels of training and experience, capable of advancing cancer research. NCI Director Dr. Norman Sharpless, [in a recent post on NCI's Bottom Line blog](#), described a "robust budget increase" for the Institute in FY2020. He said "we are extending our paylines and anticipate funding more than 125 additional competing awards in FY 2020 than we did in FY 2019." That means more funding opportunities for all investigators. Dr. Sharpless urged all grantees to continue to follow [NCI's Bottom Line blog](#) for budget and policy updates that affect the NCI extramural grantee community.

- 3. How long can NCI expect to suspend other in-person programming (non clinical trial, e.g., meetings)?**

At NCI, we are committed to sustaining progress against cancer, now and always. With this commitment in mind, deputy director Dr. Douglas Lowy is leading an NCI task force with a broad mandate, which includes maintaining the continuity of NCI operations during the COVID-19 public health emergency. We are prepared to maintain operations through remote programming for as long as it is necessary to maintain physical distancing in the interest of public health.

- 4. Can the link to the slack channel that was mentioned during the call be distributed?**

On March 16, 2020, the Association of American Cancer Institutes (AACI) launched a Slack workspace as a forum for AACI cancer center members and National Cancer Institute leaders to

share challenges and best practices related to COVID-19 and cancer. To ensure confidentiality and encourage open discussion, all requests to join the forum require administrative approval from AACI. Contact mail@aacii-cancer.org (<https://www.aaci-cancer.org/covid-19-resources>)

- 5. Like many other grant applicants, our labs are closed and we are unable to perform the experiments we have planned to support our application for NCI-PAR-17-331 which is due June 5. The study section for the grant does not convene until October. Is the NIH considering allowing a window for the submission of supplemental data to the application prior to the study section meeting?**

NCI and NIH continue to monitor the emergency and will continue to issue guide notices and update FAQs and additional resources. We encourage you to monitor cancer.gov and nih.gov for updates to existing guidance for researchers.

For information related to the specific circumstances of a grant award that is affected by COVID-19, please contact the NCI grants management official and program official named in your Notice of Award.

- 6. I love that you are doing all of this now, but as was mentioned, when this pandemic is over, we need to keep this level of urgency in the fight against the types of cancers that have no effective treatment. Major changes need to be made in how drugs are developed for cancer to allow for easier access for patients as well as combinations. I am working on this now in the form of a bill in congress to create a conditional approval pathway. We need your help in supporting it.**

NCI, the United States' principal agency for cancer research, is part of NIH, which is an operating division of the United States Department of Health and Human Services (HHS).

We hope you will understand that, while NCI can offer information on drug research and development to Congress and other government and legislative bodies, as a federal research agency NCI and its staff are prohibited by law (Anti-Lobbying Act) to use any appropriated funds to lobby any federal, state or local government official about any pending or proposed legislation, resolution, appropriation, or measure. This law is not intended to inhibit the necessary flow of information and communications between the Executive (i.e. HHS, NIH, and NCI) and Legislative Branches (i.e. Congress), but to prevent any undue influence on the legislative process.

We believe that the Nation's strong support for research on new treatments of cancer is fundamental to improving outcomes for patients affected by the disease. These efforts include the development of more effective and less toxic treatments, such as targeted therapies, immunotherapies, and cancer vaccines.

NCI shares the goal of enabling easier access for patients to new cancer drugs as well as to innovative combination treatments.

7. Is there any treatment for cancer based on research?

Cancer research has been and continues to be instrumental in the development of more effective and less toxic treatments, such as targeted therapies, immunotherapies, and cancer vaccines. Research is also crucial to improving mainstay cancer treatments that have existed for decades, such as chemotherapy, radiation therapy, and surgery.

Cancer.gov provides detailed information on cancer research, its impact on treatment methods, and NCI's role in promoting research. You may be particularly interested in the following areas of our website:

- NCI's [Cancer Treatment Research](#) page discusses the importance of research and the challenges it faces. It also offers links to specific NCI-sponsored research programs.
- The PDQ (Physician Data Query) collection of [cancer information summaries](#) offers comprehensive, evidence-based information on cancer treatment, screening, prevention, genetics, and supportive care. Most of these summaries are presented in lay language (patient) and technically detailed (health professional) versions.
- The [Annual Report to the Nation on the Status of Cancer](#) provides long-term trends in cancer incidence rates (new cases) and mortality rates (deaths) in the United States.
- NCI's [Annual Plan & Budget Proposal for Fiscal Year 2021](#) outlines NCI's research strategy for the coming year, focusing on emerging areas: the immune system and microbiome, artificial intelligence, and implementation science.

8. I would love to see telemedicine become a standard practice in cancer care ... My question is, how can I help assist the projects you presented during the meeting?

As Dr. Sharpless mentioned at the joint meeting of the BSA and NCAB, telehealth is becoming a critical tool in delivering care to cancer patients. Healthcare delivery research can help address questions about how to incorporate telemedicine into routine practices – to see what works well and what doesn't.

Thank you for your interest in working with NCI to help assist in the projects described at the meeting. Our Office of Advocacy Relations (OAR) serves as NCI's principal conduit for engaging cancer advocates. OAR works with the entire cancer advocacy community—from individual research advocates to national organizations—to create a culture of advocate engagement at the NCI. OAR facilitates meaningful engagements that improve understanding, opportunity, and progress in cancer research. To find out how you or your group can get involved, email NCIadvocacy@nih.gov to connect with OAR today.

Responses Prepared by the NCI Office of Communications and Public Liaison