

National Cancer Advisory Board (NCAB)
Ad hoc Subcommittee on Global Cancer Research

Hyatt Regency Bethesda Hotel
Diplomat/Ambassador Room
1 Bethesda Metro Center
Bethesda, MD
September 12, 2011
6:30 p.m. – 8:30 p.m.

DRAFT SUMMARY

Subcommittee Members:

Dr. Olufunmilayo Olopade, Chair
Dr. Marcia Cruz-Correa
Dr. Kim Lyerly
Dr. Kevin Cullen
Dr. Edward Trimble, Executive Secretary

NCAB Members:

Dr. Bruce Chabner
Dr. Judith Kaur

Other Participants:

Linda Brown
Nelvis Castro
Henry Ciolino
Robert Croyle
Geraldina Dominguez
Deborah Duran
Nina Ghanem
Holly Gibbons
Jorge Gomez
Sreelatha Meleth
Kimberly Myers
Lisa Newman
Nada Vydelingum
Dan Xi
Michael Burgio, Rapporteur

Welcome and Introductions

Dr. Funmi Olopade introduced herself and thanked the participants for coming to discuss ongoing efforts, new opportunities in, and barriers to global cancer research. Participants introduced themselves to the group. The NCI has recently established the Center for Global Health and is seeking the Subcommittee's advice on the Center's roles and priorities.

Overview of Current NCI international Activities and Research; Goals for the New NCI Center for Global Health

Dr. Edward Trimble presented results from a report of NCI programs and collaborations in global cancer research in 2010. Data for the report was collected from a variety of sources, including: annual reports on international activities submitted by Divisions, Offices, and Centers; identification of grants to foreign institutions; and reporting of domestic grants that include a significant foreign component. Data collection was difficult and the NCI has no comprehensive way to track foreign activities; the reports submitted to Divisions, Offices, and Centers have been varied in their detail, comprehensiveness, and reporting of domestic grants, with significant foreign components relying on self reports by the principal investigators. Until recently, data on the international activities of the NCI designated cancer centers were neither solicited nor collected. Data from cooperative agreements also could not be tracked. For these reasons, the figures in the report are likely to be underestimates of the NCI's foreign activities. It also was not possible to track international cancer-related activities funded by other NIH institutes.

The National Institute of Allergy and Infectious Diseases (NIAID) has the largest international portfolio within the NIH, which comprises approximately \$500 million of its budget annually. The NIAID has put significant effort into developing a software package and database to track its international activities. In spite of this investment, its international activities database has not been made public due to concerns about its accuracy. Tracking these activities is a difficult problem. Data from the report indicated that funding for current NCI international activities was less than \$100 million. Even assuming an undercount of 50 percent, this represents a fraction of the NCI budget and significantly less investment than the NIAID.

International collaborations are more critical to infectious disease research than for cancer research. In an era of retracting budgets, international scientific opportunities will have to be leveraged carefully. Globally, approximately 17 percent of cancer incidence is related to infectious disease; it may be possible to leverage networks established for malaria and AIDS research. International collaborations already are being formed for genetic cancer research.

Dr. Harold Varmus, Director, NCI, has stated that cancer prevention and control will be priorities for the NCI's global initiatives. Efforts in these areas should focus on well-established risk factors where interventions exist, such as screening and vaccination for oncogenic infections, smoking cessation, diet, and obesity prevention. Developed countries may be more interested in more sophisticated lines of research, such as targeted therapies. Although targeted therapies are too expensive to implement in many international settings, there is still value in coordinating international efforts to ensure that different international and U.S. organizations are not duplicating efforts. Also, international advances in smoking cessation and obesity prevention may be applicable within the United States because domestic efforts in these areas have not been highly effective.

There is significant interest in other countries for collaborations with researchers from the United States. Often foreign governments are willing to contribute funding to these research efforts but need expertise and training from international collaborators. For example, some Latin American countries are willing to send pathologists to the United States for training in molecular pathology techniques. A joint program has been developed between the United States and China to fund collaborative cancer

research between American and Chinese researchers. More than 90 applications were received, reviews were conducted jointly by Chinese and American reviewers, and projects are being funded by both countries.

Chinese research budgets are increasing exponentially. There may be significant opportunities for scientific collaboration with emerging economies, such as Brazil and China, which can provide funding for research projects but need expertise. Education for clinical trials often is lacking, and the NCI likely can make an impact in the area of training programs. International partners often need support developing data standards and bioinformatics infrastructures.

Scientific training is the area where the NCI has made the greatest international impact. The NIH likely trains more international scientists than any other organization in the world, and increasingly these scientists are returning to their home countries to conduct research. However, there has not been a coordinated effort to either track trainees after they leave the NCI or maintain collaborative relationships. Also, training has not been conducted strategically; the locations of NCI-trained researchers do not coincide with the areas of greatest need. There may be a role for the NCI to establish quality benchmarks and curricula for training programs and workshops. In addition, providing therapeutic interventions training is critical.

There was a consensus that the NCI needs to take a leadership role in global oncology research. European countries have been more aggressive in fostering international partnerships with China and African countries. The NCI has suffered from little coordination and a lack of a strategic plan for global health initiatives. There is high rate of turnover in senior leadership at the NCI, and interest in global health has varied throughout the years. This has made it difficult to forge long-term partnerships with international organizations. Many signature international collaborations, such as the Ireland-Northern Ireland-NCI Cancer Consortium (also known as the All-Ireland NCI Cancer Consortium) and the Middle East Cancer Consortium, were initiated outside of the NCI.

Report from the NCI Office of Communications and Education (OCE)

Ms. Nelvis Castro, Associate Director, Multicultural and International Communications Program, provided a report on the international activities of the NCI OCE. The program was created in 2009 and is focused on providing culturally appropriate strategic council and coordination to all NCI offices that are working with multicultural and international programs. It is responsible for the communication efforts of the Office of Latin American Cancer Program Development (OLA|CPD) and the Office of China Cancer Programs. It also supports the recently launched International Clinical Trials web portal and some activities of the Office of International Affairs. The OCE manages the Spanish version of the cancer.gov website and publishes the Spanish version of the NCI *Cancer Bulletin*.

Much of the OCE's work has been with the OLACPD. The program maintains the OLACPD website in English and Spanish and will be launching the Portuguese version within a few weeks. It also works with the U.S. State Department and Latin American Embassies to coordinate media activities. It has established the Communications Working Group, which includes representatives from each of the five OLACPD countries and the NCI OCE.

One of the OCE's initiatives is "Cancer Research in the Media: Inter-American Workshop for Scientific Journalism," which was initiated last year. This 1.5-day workshop was held in Rio de Janeiro

