

Statements from the President's Cancer Panel

*President's Cancer Panel
Strategies for Maximizing the Nation's Investment in Cancer
September 10, 2007*

A distinguished roundtable of experts convened before the President's Cancer Panel on September 10, 2007 in Atlanta, Georgia to deliberate strategies for maximizing the Nation's investment in cancer research and care. The meeting was the first in a series of four meetings being held by the Panel on this topic in 2007-2008.

Federal Government representatives, pharmaceutical executives, academic institution/cancer center directors, advocates, business leaders, media, and health care experts spent the day addressing the primary question of what changes to the current system of cancer research and care would have the largest impact on cancer morbidity and mortality, and how those changes can and should be achieved.

Noted hurdles impeding the current research system include restrictive regulatory practices (i.e., the Health Insurance Portability and Accountability Act inhibits both human biological and survivorship research) and intellectual property laws (i.e., patent/ownership issues create disincentives to collaborative research and drug development). On the clinical side, in addition to obvious inequities in accessing cancer care, lack of standard electronic health records and insufficient adult participation in cancer clinical trials were discussed.

Posed with the question of what would have the greatest impact on reducing cancer deaths, the overwhelming response was elimination of tobacco use. Experts consider it critical that the Food and Drug Administration have meaningful authority to regulate tobacco. Likewise, the interface between smokers and clinicians must be seized as an opportunity to provide evidence-based smoking cessation interventions; 70 percent of smokers see a physician at least once per year and this interface is not effectively leveraged, in part because the health care system does not offer physicians incentives for providing prevention information to patients. Access to affordable cancer care, including clinical trials, was cited as another vital determinant of cancer mortality, and is essential if we are to increase the return on investments in the cancer system. The best scientific discoveries will not save lives if patients cannot access them. Adoption of and insurer reimbursement for preventive interventions for reducing cancer risk (i.e., lifestyle modifications and pharmaceutical interventions) along with recommended cancer screenings would add to reductions in cancer morbidity and mortality. The group advocated as well for development of imaginative diagnostics that could assist clinicians in addressing cancer at its earliest, preinvasive stages.

Discussants argued that leadership and vision at the highest levels are needed to foster change and save lives. A moral imperative exists to achieve more rapid progress in basic cancer research, effectively translate discoveries, and overcome systemic barriers to optimal cancer care. Cancer kills more than 1,500 people a day or nearly 560,000 people per year; totaling far more deaths on American soil than any terrorist event or recent war. Yet no leader has initiated a national debate on cancer.

Panelists advocated for a “patient-centered” cancer enterprise—a birth to death continuum of coordinated research and care focused on patients. This highly coordinated system would incorporate feedback loops among investigators and clinicians, and provide necessary end-of-life care versus “extended life” care.

The role of the National Cancer Institute in a changing cancer enterprise may also need to be re-evaluated. Its scope and responsibilities were broadened under the National Cancer Act of 1971; however, cancer research has evolved dramatically since that time. As the Nation’s principal agency for cancer research and training, the NCI should play a key role in the coming decades in maximizing return on investments in the National Cancer Program in order to best benefit cancer patients.

There are three more meetings in this series after which the Panel will conclude deliberations and prepare its annual report to the President.

The President's Cancer Panel, an advisory group established by Congress to monitor the Nation's efforts to reduce the burden of cancer, reports directly to the President on delays or blockages in that effort. For more information, visit the Panel's web site at <http://deainfo.nci.nih.gov/ADVISORY/pcp/pcp.htm>, call 301-451-9399, or e-mail to pcp-r@mail.nih.gov.