

NCI

**FACT
BOOK**

**National
Cancer
Institute**

The information set forth in this publication is compiled and amended annually by the financial management staff of the National Cancer Institute and is intended primarily for use by members of the Institute, principal advisory groups to the Institute and others involved in the administration and management of the National Cancer Program. Questions regarding any of the information contained herein may be directed to the Financial Management Branch, National Cancer Institute, 9000 Rockville Pike, Bethesda, Maryland, 20892.

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This publication may be viewed on the World Wide Web by pointing a browser to the Financial Management Branch homepage on the National Cancer Institute's website: www.nci.nih.gov or www.cancer.gov .

National Cancer Institute

Director's Biography

Richard D. Klausner, M.D.

Dr. Klausner was appointed as the Director of the National Cancer Institute (NCI) on August 1, 1995. From 1984 until 1997 he was Chief of the Cell Biology and Metabolism Branch of the National Institute of Child Health & Human Development. Dr. Klausner received his undergraduate degree from Yale University and his medical degree from Duke University. After post-graduate medical training at Harvard, he began his research career at the National Institutes of Health in 1979.

Dr. Klausner is well known for his contributions to multiple aspects of cell and molecular biology. Over the past several years, he has been recognized as one of the 20 most highly cited scientists in the world in this burgeoning area of biology and biomedical research. Dr. Klausner's research has illuminated the genetics and biochemistry of metals as essential but toxic nutrients for virtually all forms of life, has illuminated the pathways by which molecules traffic and speak to each other within the cell, and has described novel mechanisms by which genes are regulated.

His work has been recognized with numerous honors and awards including the Outstanding Investigator Award from the American Federation of Clinical Research and the William Damashek Prize for Major Discoveries in Hematology. In 1993, Dr. Klausner was elected to the National Academy of Sciences and chaired their project charged with writing standards for science education for the United States from kindergarten through 12th grade. This project represents the first comprehensive attempt to describe a vision of scientific literacy for all students and to provide the criteria for the educational system required to achieve the fulfillment of that vision.

Dr. Klausner is the past President of the American Society for Clinical Investigation. In October 1996, he was elected to the Institute of Medicine. He is the author of over 290 scientific articles and several books.

Former Directors of the National Cancer Institute

Samuel Broder, M.D.

December 1988-March 1995

Dr. Broder joined NCI in 1972 as a Clinical Associate in the Metabolism Branch. In 1981, he became Associate Director for NCI's Clinical Oncology Program. In 1985 he led the laboratory team that discovered the therapeutic effects of AZT and other drugs now approved for the treatment of AIDS including, DDI and DDC.

Vincent T. DeVita, Jr., M.D.

January 1980 - June 1980 (Acting)

July 1980 - August 1988

Dr. DeVita joined NCI in 1963 as a Clinical Associate in the Laboratory of Chemical Pharmacology. He served NCI as head of the Solid Tumor Service, Chief of the Medicine Branch, Director of the Division of Cancer Treatment and Clinical Director prior to his appointment as Director of NCI.

Arthur Canfield Upton, M.D.

July 1977 - December 1979

Prior to his tenure as NCI Director, Dr. Upton served as Dean of the School of Basic Health Sciences at the State University of New York at Stony Brook.

Frank Joseph Rauscher, Jr., Ph.D.

May 1972 - October 1976

Dr. Rauscher served as Scientific Director for Etiology, NCI, prior to his appointment as Director of NCI in 1972.

Carl Gwin Baker, M.D.

November 1969 - July 1970 (Acting)

July 1970 - April 1972

During his tenure with PHS, Dr. Baker served as Scientific Director for Etiology, NCI, and as Acting Director of NCI prior to his appointment as Director in July 1970.

Kenneth Milo Endicott, M.D.

July 1960 - November 1969

Dr. Endicott served as Chief of the Cancer Chemotherapy National Service Center, PHS, and as Associate Director, NIH, prior to being appointed Director, NCI in July 1960.

John Roderick Heller, M.D.

May 1948 - June 1960

Dr. Heller joined PHS in 1934 and became Chief of the Venereal Disease Division prior to his appointment as Director of NCI in 1948.

Leonard Andrew Scheele, M.D.

July 1947 - April 1948

Dr. Scheele served in various capacities during his tenure with PHS prior to his appointment as Assistant Chief and, subsequently, Director of NCI in July 1947.

Roscoe Roy Spencer, M.D.

August 1943 - July 1947

Dr. Spencer became NCI's first Assistant Chief and, subsequently, was appointed Director of the Institute in 1943.

Carl Voegtlin, Ph.D.

January 1938 - July 1943

Dr. Voegtlin served as Professor of Pharmacology and Chief of the Division of Pharmacy at the Hygienic Laboratory prior to becoming the first Director of NCI in 1938.

National Cancer Advisory Board

Appointment	Expiration of Appointment	Appointment	Expiration of Appointment
Smir Abu-Ghazaleh, M.D. Gynecologic Oncologist Avera Cancer Institute Sioux Falls, South Dakota 57105	2006	The Honorable James E. McGreevey Mayor Woodbridge Township Woodbridge, New Jersey 07095	2004
James O. Armitage, M.D. Professor and Dean College of Medicine University of Nebraska Medical Center Omaha, Nebraska 68198-6545	2006	Susan M. Love, M.D. Adjunct Professor Department of Surgery University of California School of Medicine Pacific Palisades, California 90272	2004
Richard J. Boxer, M.D. Professor of Family & Community Medicine Professor of Health Policy Medical College of Wisconsin Urology Specialists S.C. Milwaukee, WI 53209	2002	Sandra Millon-Underwood, Ph.D., R.N. Associate Professor University of Wisconsin-Milwaukee School of Nursing Milwaukee, WI 53211	2002
Mr. Stephen C. Duffy Executive Vice-President American Academy of Facial Plastic and Reconstructive Surgery & International Federation of Facial Plastic Surgery Societies Alexandria, Virginia 22314	2006	Arthur W. Nienhuis, M.D. Director St. Jude Children's Research Hospital Memphis, Tennessee 38105	2004
Ralph S. Freedman, M.B.B.Ch., Ph.D. Professor Department of Gynecologic Oncology The University of Texas M.D. Anderson Cancer Center Houston, Texas 77030	2006	Amelie G. Ramirez, Dr. P. H Associate Professor, Department of Medicine Deputy Director Chronic Disease Prevention & Control Research Center, Baylor College of Medicine San Antonio, TX 78230	2004
James H. French, M.D. Physician The Center for Plastic Surgery Annandale, Virginia 22003	2006	Ivor Royston, M.D. President and CEO Sidney Kimmel Cancer Center San Diego, California 92121	2002
Elmer E. Huerta, M.D., M.P.H. Cancer Prevention Specialist Department of Medicine/Oncology Washington Cancer Institute Washington Hospital Center Washington, DC 20010	2004	Larry Norton, M.D. Director Medical breast Oncology Evelyn, H. Lauder Breast Cancer Memorial Sloan-Kettering Cancer Center New York, New York 10021	2004
Frederick, P. Li, M.D. Chief Division of Cancer Epidemiology and Control Dana-Farber Cancer Institute – Smith 201 Boston, MA 02115	2002	Ms. Ellen L. Stovall Executive Director National Coalition for Cancer Survivorship Silver Spring, MD 20910	2002
<u>Chairperson</u> Phillip A. Sharp, Ph.D. Institute Professor Center for Cancer Research Massachusetts Institute of Technology Cambridge, Massachusetts 02139		<u>Executive Secretary</u> Marvin R. Kalt, Ph.D. Director, Division of Extramural Activities National Cancer Institute, NIH Bethesda, MD 20892-8327	
		<u>Committee Management Officer</u> Ms. Linda Quick-Cameron Division of Extramural Activities National Cancer Institute, NIH Bethesda, MD 20892-8344	

National Cancer Advisory Board (continued)

Ex Officio Members

Ms. Ann Brown
Chairman
Consumer Product Safety Commission
Bethesda, Maryland 20842

Kenneth W. Kizer, M.D., M.P.H.
Under Secretary for Health
Veterans' Health Administration
Department of Veterans' Affairs, #10
Washington, D.C. 20420

The Honorable Sue Bailey, D.O.
Assistant Secretary of Defense
for Health Affairs
Pentagon
Washington, D.C. 20301-1200

Air Patrinos, Ph. D.
Deputy Director, Office of Biological
and Environmental Research
Office of Energy Research
U.S. Department of Energy
Washington, D.C. 20585

Ms. Carole M. Browner
Administrator
Environment Protection Agency
Washington D.C. 20460

Ms. Rachel Levinson
Assistant Director for Life Sciences
Office of Science and Technology Policy
The White House
Washington, D.C. 20506

Jane E. Henny, M.D.
Commissioner
Food and Drug Administration
Rockville, Maryland 20857

Kenneth Olden, Ph. D.
Director
National Institute of Environmental Health Sciences
National Institute of Health
Research Triangle Park, NC 27709

The Honorable Alexis M. Herman
Secretary of Labor
Washington D.C. 20210

The Honorable Donna E. Shalala, Ph.D.
Secretary
Department of Health and Human Services
Washington, D.C. 20201

Linda Rosenstock, M.D., M.P.H.
Director
National Institute for Occupational
Safety and Health
Washington, D.C. 20201-0001

Ruth Kirschstein, M.D.
Acting Director
National Institute of Health, PHS
Bethesda, Maryland 20892

Alternates to Ex Officio Members

Hugh W. McKinnon, M.D., M.P.H.
Associate Director for Health
National Risk Management Research
Laboratory (MD-225)
U.S. Environmental Protection Agency
Cincinnati, Ohio 45268
(Ms. Carole M. Browner - EPA)

T. G. Patel, M.D., M.A.C.P.
Captain MC USN (Retired)
Program Chief
Veterans Health Administration
Department of Veterans' Affairs, #10
Washington, DC 20420
(Kenneth W. Kizer, M.D. - VA)

Alison Martin, M.D.
Division Oncology FDA
Food and Drug Administration
Rockville, Maryland 20857
(Jane E. Henney, M. D. - FDA)

Peter Kirchner, Ph.D.
Program Manager
Office of Biological & Environmental Research
Division of Medical Science
U.S. Department of Energy
Germantown, MD 20874-1290
(Ari patrinos, Ph.D. - DOE)

Eugene Schwartz, M.D.
Medical Officer
Office of Occupational Medicine
Department of Labor, OSHA
Washington, D. C. 20210
(The Honorable Alexis M. Herman - DOL)

Steven K. Akiyama, Ph.D.
Associate Director for Research and Training
Division of Intramural Research
National Institute of Environmental Health Sciences
National Institute of Health
Research Triangle Park, NC 27709
(Kenneth Olden, Ph.D. - NIEHS)

Board of Scientific Counselors Intramural Programs

Subcommittee A: Clinical Sciences

Appointees	Expiration of Appointment	Appointees	Expiration of Appointment
Martin D. Abeloff, M.D. Chair	2000		
Carlos L. Arteaga, M.D.	2004	John Mendelsohn, M.D.	2001
Martin A. Cheever, M.D.	2004	Beverly Mitchell, M.D.	2003
Deborah Collyar	2003	Olufunmilayo Olopade, MBBS, FACP	2004
Theodore Colton, Sc.D.	2001	John D. Potter, M.D., Ph.D.	2001
Timothy J. Eberlein, M.D.	2003	Robert L. Reddick, M.D.	2000
Harold Harvey, M.D.	2000	Jonathan M. Samet, M.D.	2000
Elizabeth A. Holly, Ph.D., MPH	2003	David A. Savitz, Ph.D.	2004
David J. Hunter, Sc.D.	2004	Margaret Ann Tempero, M.D.	2004
Mark A. Israel, M.D.	2001	Jouni Uitto, M.D., Ph.D.	2000
Michael B. Kastan, M.D., Ph.D.	2004	James K.V. Willson, M.D.	2000
Timothy J. Kinsella, M.D.	2001		
Joanne Kurtzberg, M.D.	2000		
Albert F. Lobuglio, M.D.	2000		
Frank McCormick, Ph.D.	2003	Executive Secretary - Maureen Johnson, Ph.D.	

Subcommittee B: Basic Sciences

Bruce Stillman, Ph.D., Chair	2001		
James P. Allison, Ph.D.	2000	Stanley J. Korsmeyer, M.D.	2000
Alan Bernstein, Ph.D.	2000	Carol L. Prives, Ph.D.	2000
David Botstein, Ph.D.	2002	Naomi Rosenberg, Ph.D.	2001
Mario Capecchi, Ph.D.	2002	Suzanne Sandmeyer, Ph.D.	2003
Jon Clardy, Ph.D.	2004	Matthew D. Scharff, M.D.	2000
Max Cooper, M.D.	2001	Andrey Shin-Yee Shaw, M.D.	2003
Robert N. Eisenman, Ph.D.	2000	Anna Marie Skalka, Ph.D.	2001
Brenda L. Gallie, M.D.	2000	Susan S. Taylor, Ph.D.	2000
E. Peter Geiduschek, Ph.D.	2003	Craig B. Thompson, M.D.	2001
Stephen P. Goff, Ph.D.	2002	Robert Tjian, Ph.D.	2001
Beatrice H. Hahn, M.D.	2002	Gregory L. Verdine, Ph.D.	2004
Ira Herskowitz, Ph.D.	2000	Inder M. Verma, Ph.D.	2002
David E. Housman, Ph.D.	2004	Jean Y.J. Wang, Ph.D.	2000
Thomas J. Kelly, Ph.D., M.D.	2004	Executive Secretary - Florence Farber, Ph.D.	

Board of Scientific Advisors Extramural Programs

Frederick R. Applebaum, M.D. Chair	2001		
David B. Abrams, Ph.D.	2004	Nancy E. Mueller, Sc.D.	2001
David S. Alberts, M.D.	2004	Allen I. Oliff, M.D.	2000
Hoda Anton-Culver, Ph.D.	2004	Franklyn G. Prendergast, M.D., Ph.D.	2002
Joan Brugge, Ph.D.	2000	Richard L. Schilsky, M.D.	2004
Esther H. Chang, Ph.D.	2004	Ellen V. Sigal, Ph.D.	2003
Mary Beryl Daly, M.D., Ph.D.	2000	Joseph V. Simone, M.D.	2002
Virginia L. Ernster, Ph.D.	2001	Louise C. Strong, M.D.	2002
Suzanne W. Fletcher, M.D.	2002	Peter K. Vogt, Ph.D.	2001
Waun Ki Hong, M.D.	2002	Daniel D. VonHoff, M.D., F.A.C.P.	2000
Susan B. Horwitz, Ph.D.	2004	Barbara L. Weber, M.D.	2002
E. Tyler Jacks, Ph. D.	2000	Alice S. Whittemore, Ph.D.	2000
Kenneth W. Kinzler, Ph.D.	2004	William C. Wood, M.D.	2000
Herbert Y. Kressel, M.D.	2002	Robert C. Young, M.D.	2001
Amy S. Langer, M.B.A.	2000	Elias A. Zerhouni, M.D.	2002
Caryn E. Lerman, Ph.D.	2001		
Joan Massague, Ph.D.	2000	Phillip S. Schein, M.D., NCAB Liaison	2000
Deborah K. Mayer, RN, MSN, AOUN, FAAN	2000		
W. Gillies McKenna, M.D., Ph.D.	2000	Executive Secretary - Paulette S. Gray, Ph.D.	
Enrico Mihich, M.D.	2001		
John D. Minna, M.D.	2001		

President's Cancer Panel

Harold Freeman, M.D. **2000**
Chairman
Director and CEO
North General Hospital
New York, NY

Paul Calabresi, M.D. **2000**
Professor and Chairman, Emeritus
Department of Medicine
Brown-Tufts Cancer Center
Rhode Island Hospital
New England Medical Center
Providence, RI

Frances M. Visco, Esq. **2000**
President
National Breast Cancer Coalition
Washington, DC

Maureen O. Wilson, Ph.D.
Executive Secretary

Executive Committee Members

Richard Klausner, M.D.
Director

Marvin Kalt, Ph.D.
Director, Division of Extramural Activities

Alan Rabson, M.D.
Deputy Director

Susan Sieber, Ph.D.
Associate Director for Special Projects

Dinah Singer, Ph.D.
Director, Division of Cancer Biology

Edison Liu, M.D.
Director, Division of Clinical Science

MaryAnn Guerra
Deputy Director for Management

Barbara Rimer, Dr. P.H.
Director, Division of Cancer Control and Population Sciences

Joseph Fraumeni, M.D.
Director, Division of Cancer Epidemiology and Genetics

Alan Rabson, M.D.
Acting Director, Division of Basic Sciences

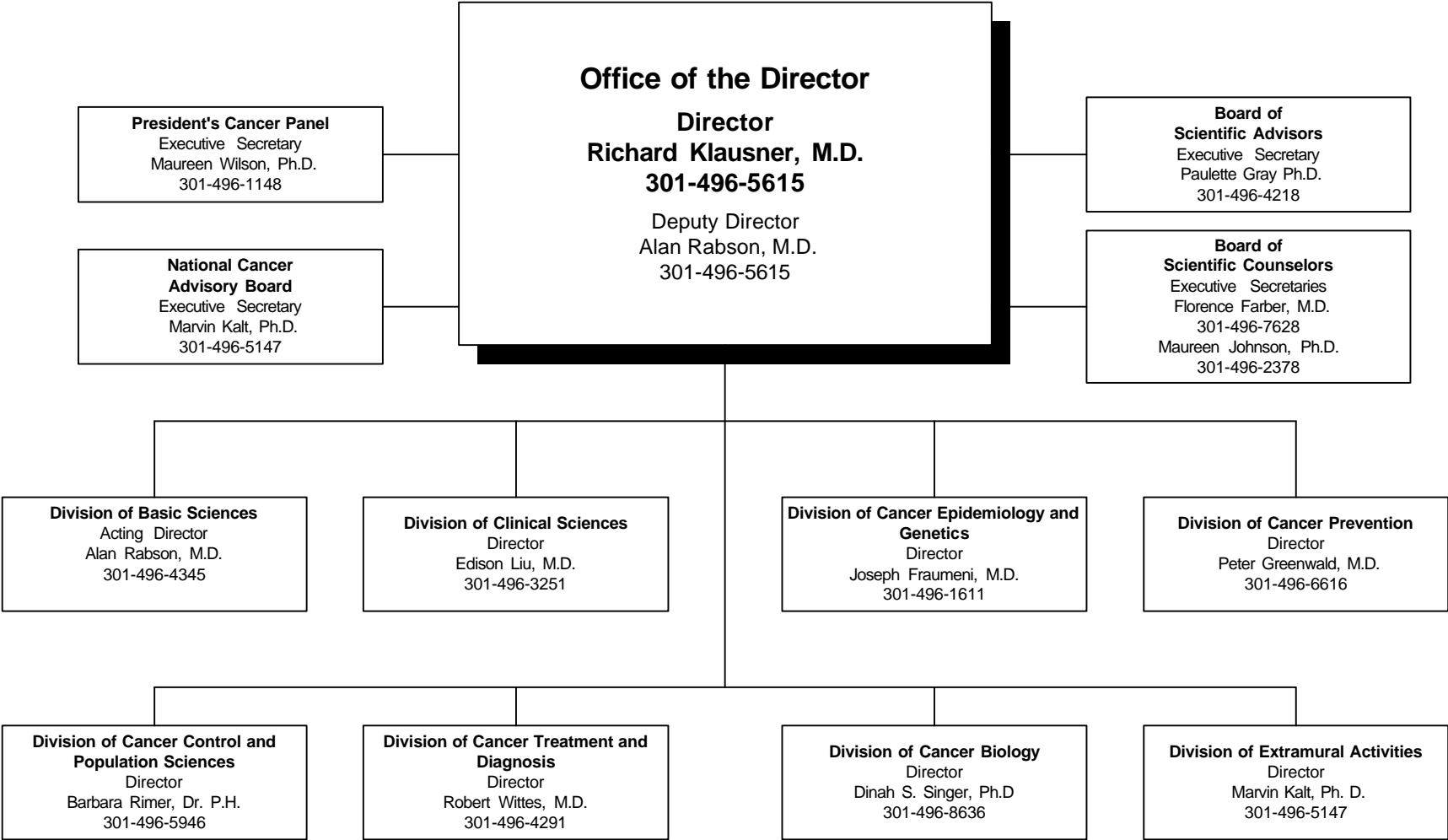
Peter Greenwald, M.D.
Director, Division of Cancer Prevention

Robert Wittes, M.D.
Director, Division of Cancer Treatment and Diagnosis
Deputy Director for Extramural Science

Joe Harford, Ph.D.
Associate Director for Special Projects

Sandy Koeneman, M.S., M.P.A.
Executive Secretary

National Cancer Institute



Office of the Director

Director

Dr. Richard Klausner

301-496-5615

Deputy Director

Dr. Alan Rabson

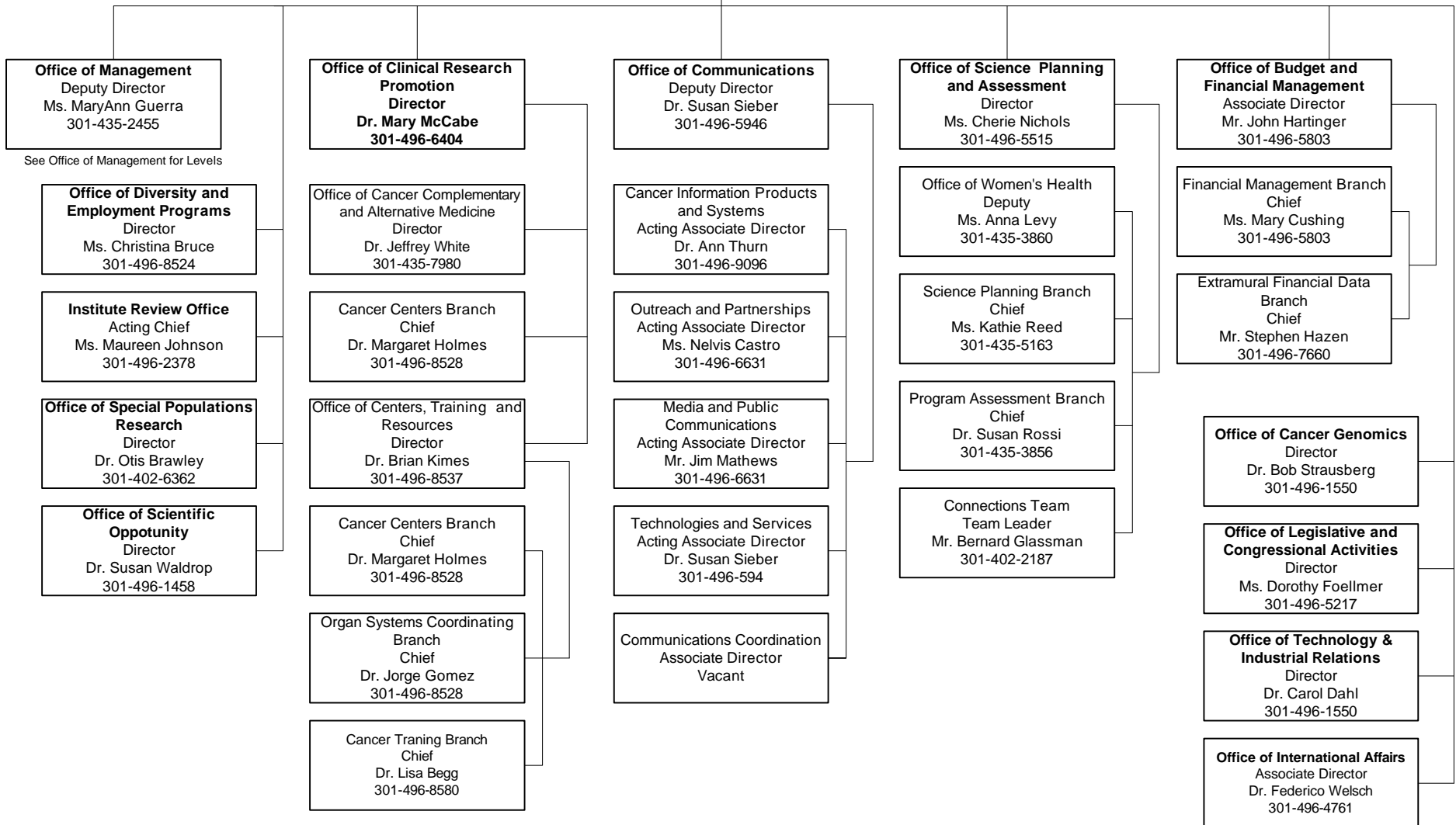
301-496-5615

Associate Director for Special Projects

Dr. Joe Harford
301-496-5534

Associate Director for Special Projects

Dr. Susan Sieber
301-496-5946



Office of Management

Director

Ms. MaryAnn Guerra

301-435-2455

Deputy Executive Officer

Mr. Steve Gibson

301-435-7520

Office of Space and Facilities Planning

Chief

Mr. Frank Battistello

301-496-1724

Information Systems and Computer Services

Associate Director

Dr. Jed Rifkin

301-496-1629

Infrastructure Services

Chief

Mr. Todd Cox

301-496-1629

Customer Resource Services

Chief

Mr. Calvin Hollinsworth

301-496-1038

Web Development Services

Chief

Mr. Dan Sands

301-496-1629

Business System Services

Chief

Mr. Harvey Karch

301-496-1629

Administration Operations

Acting Associate Director

Ms. Janis Mullaney

301-496-0079

Human Resources Management and Consulting Branch

Chief

Mr. Dan DuPuis

301-497-3337

Innovation & Evaluation

Associate Director

Ms. Pat Abell

301-402-3511

Management Analysis Branch

Chief

Ms. Marilyn Jackson

301-496-6985

Strategic Technical Review and Innovative Initiatives Core

Chief

Ms. Cathleen Peters

301-496-2720

Business Operations and Development

Acting Associate Director

Mr. Jack Campbell

301-496-8628

Technology Development and Commercialization Branch

Chief

Dr. Kathy Sybert

301-496-0477

Grants Administration Branch

Chief

Mr. Leo Buscher Jr.

301-496-7753

Research Contracts and Acquisition Branch

Chief

Mr. Jack Campbell

301-496-8628

Frederick-Management Operations & Support Branch

Chief

Mr. Ron Defelice

301-846-1113

Administrative Resource Centers (ARC)

Division of Basic Sciences

Manager

Ms. Betty Fitzpatrick

301-496-5372

Division of Clinical Sciences

Manager

Ms. Ruth Ann Talley

301-402-2559

Division of Cancer Epidemiology and Genetics

Manager

Ms. Donna Gellerson

301-594-7507

Division of Cancer Treatment and Diagnosis

Manager

Ms. Melissa Bronez

301-496-6303

Division of Cancer Biology

Manager

Ms. Bridgette Tobiassen

301-496-2871

Frederick Cancer Research and Development Center

Manager

Ms. Gretchen Jolles

301-846-1166

Division of Cancer Control and Population Sciences

Manager

Ms. Ellen Moul

301-496-8571

Division of Cancer Prevention

Manager

Ms. Jackie Havens

301-496-9606

Office of the Director

Manager

Ms. Susan Kiser

301-496-5801

DEA/6116 ARC

Acting Manager

Ms. Lisa Mascone

301-594-3343

ARC 10A

Acting Manager

Ms. Sharon Desmond

301-496-6303

EP ARC

Manager

Mr. Phil Lowery

301-402-5516

ARC 10B

Manager

Mr. Gary Unger

301-496-6303

ARC 37

Manager

Mr. Todd Danielson

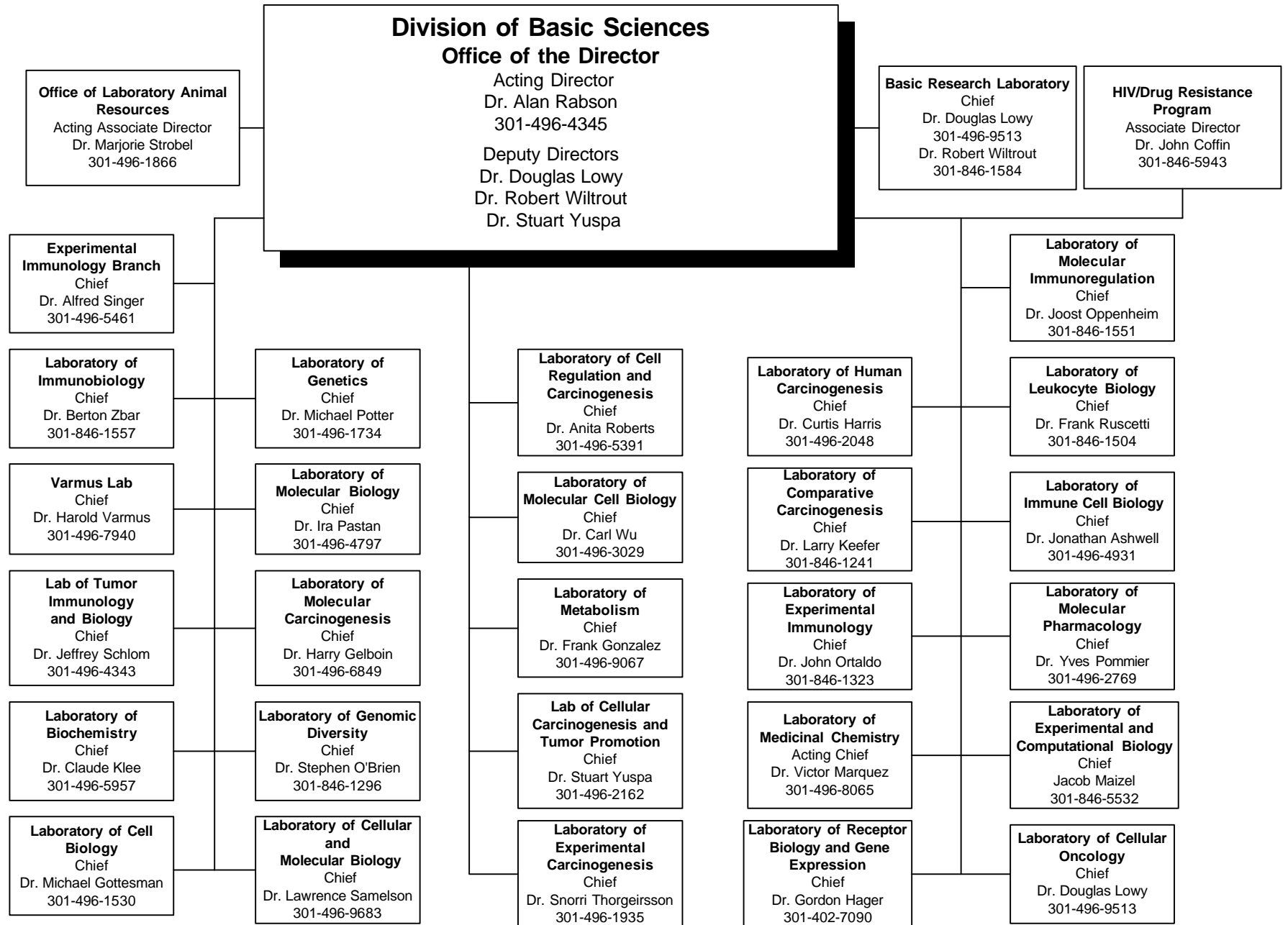
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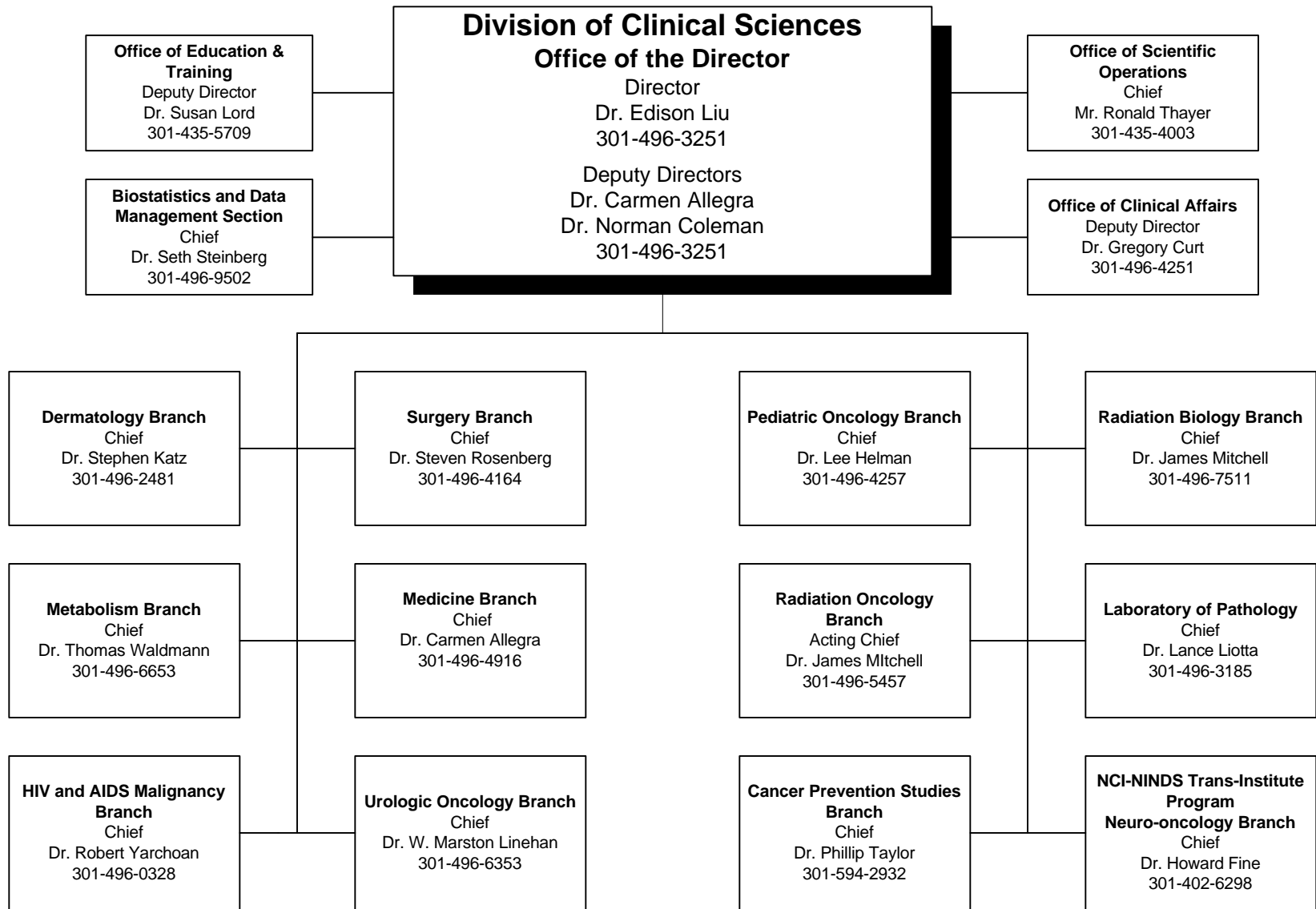
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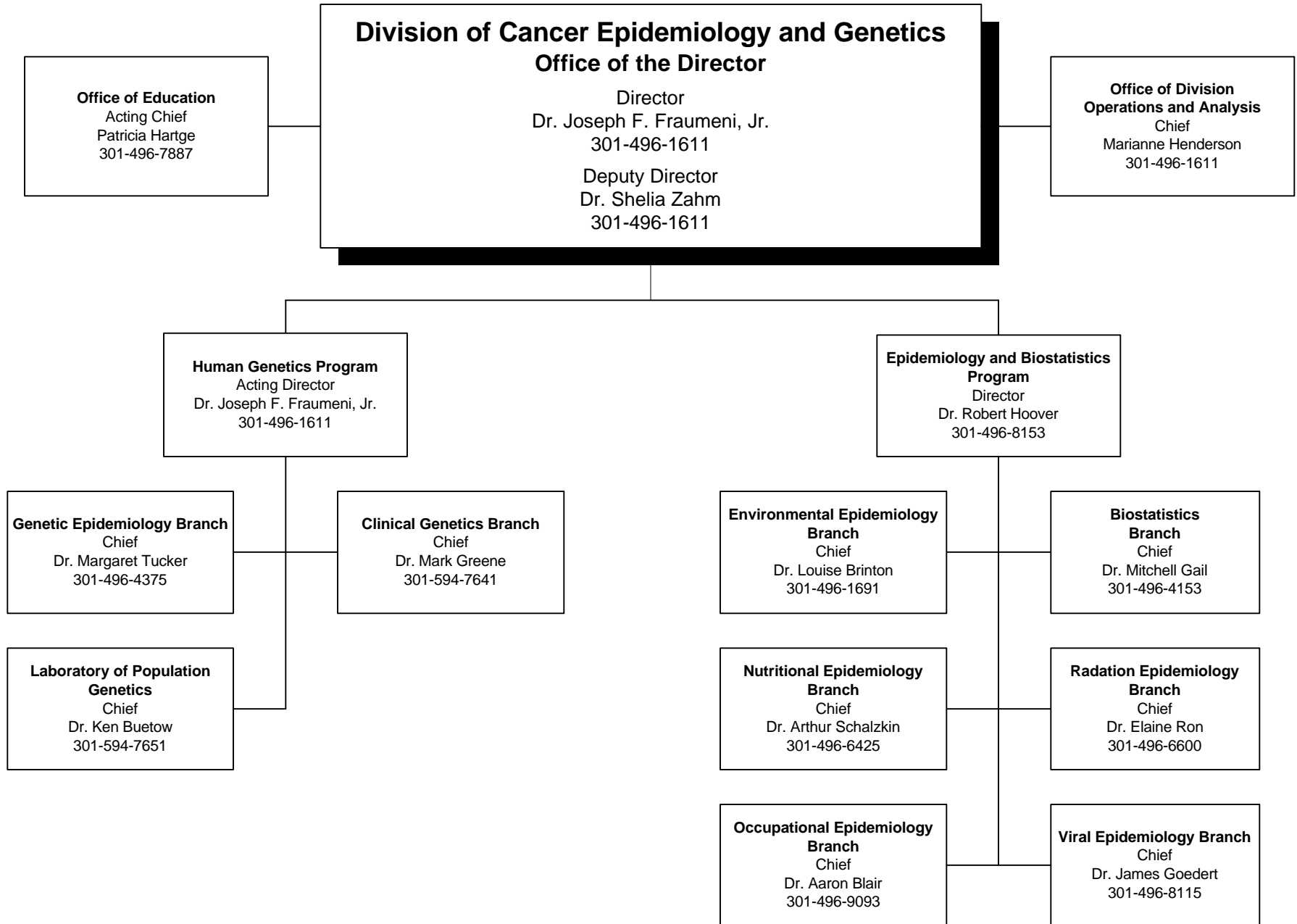
Manager

Ms. Kathy McBrien

301-496-3667







**Division of Cancer Prevention
Office of the Director**

Director
Dr. Peter Greenwald
301-496-6616

Deputy Director
Dr. Barnett Kramer
301-496-9569

Associate Director for Clinical Research
Dr. Leslie Ford
301-496-0265

Office of Preventive Oncology
Chief
Dr. Douglass Weed
301-496-8640

Chemoprevention Agent Development Research Group
Acting Chief
Dr. Gary J. Kelloff
301-496-8640

Early Detection Research Group
Chief
Dr. John Gohagan
301-496-8544

Nutritional Science Research Group
Acting Chief
Dr. Carolyn Clifford
301-496-8573

Community Oncology and Prevention Trials Research Group
Chief
Dr. Lori Minasian
301-496-8541

Biometry Research Group
Acting Chief
Dr. Phillip Prorok
301-496-8556

Basic Prevention Science Research Group
Acting Chief
Dr. Peter Greenwald
301-496-6616

Cancer Biomarkers Research Group
Acting Chief
Dr. Sudhir Srivastava
301-496-8544

Breast & Gynecologic Cancer Research Group
Acting Chief
Dr. Karen Johnson
301-496-8526

Gastrointestinal & Other Cancer Research Group
Acting Chief
Dr. Ernest Hawk
301-496-8563

Prostate & Urologic Cancer Research Group
Acting Chief
Dr. Ronald Lieberman
301-496-8563

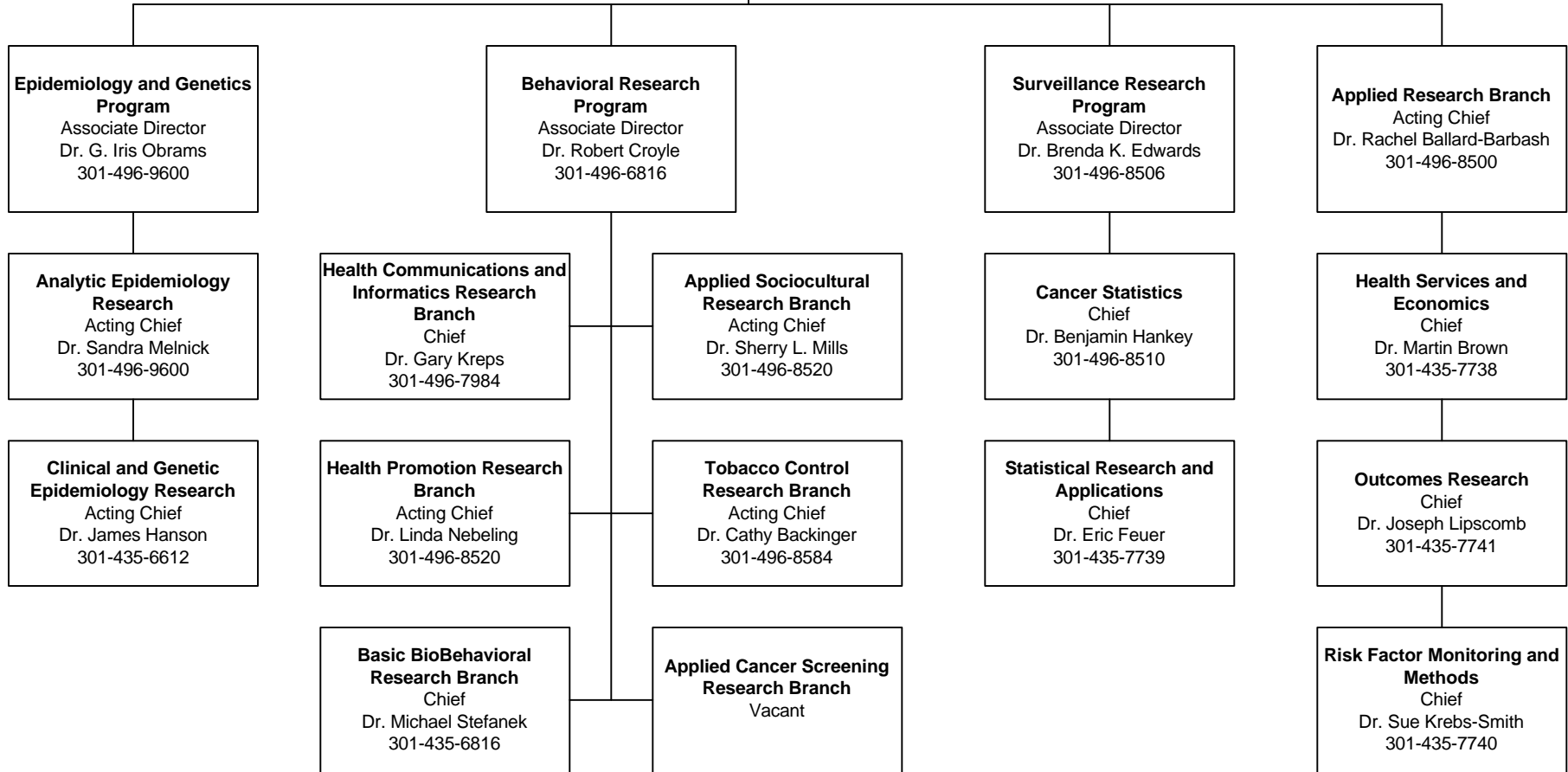
Lung & Upper Aerodigestive Cancer Research Group
Acting Chief
Dr. Christine Berg
301-496-8544

Division of Cancer Control and Population Sciences
Office of the Director

Director
Dr. Barbara Rimer
301-594-6776

Deputy Director
Dr. Robert Hiatt
301-594-7206

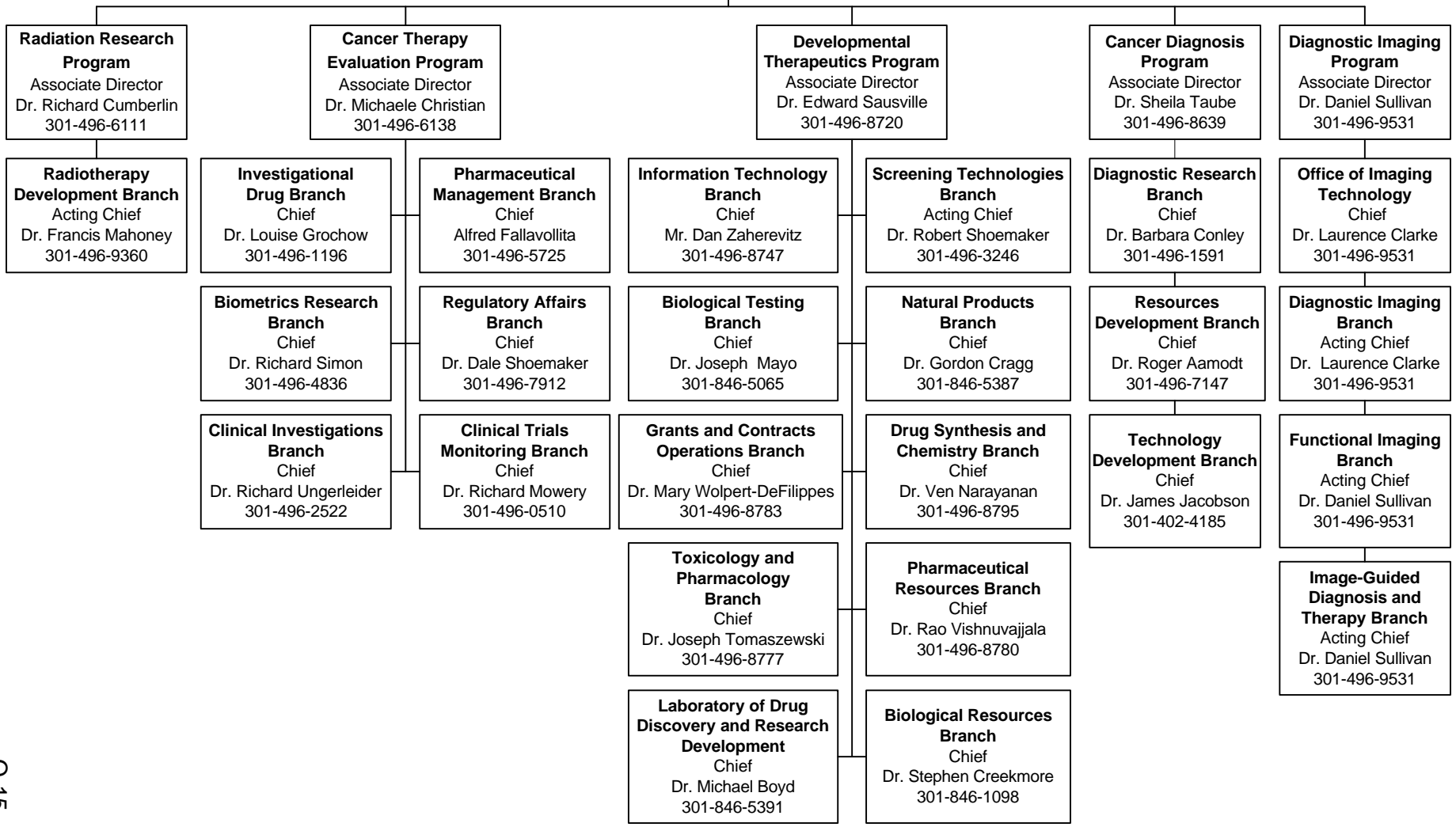
Office of Cancer Survivorship
Chief
Dr. Julia H. Rowland
301-435-7206

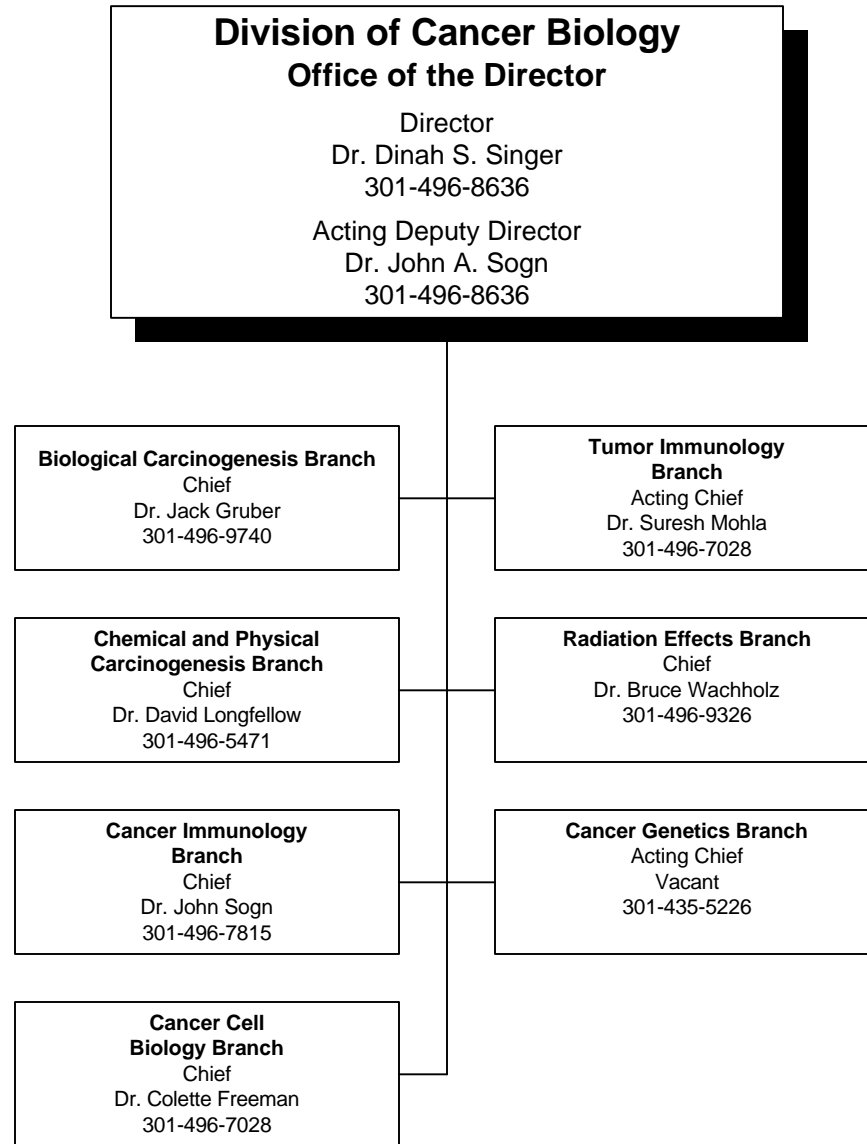


**Division of Cancer Treatment and Diagnosis
Office of the Director**

Director
Dr. Robert Wittes
301-496-4291

Deputy Director
Dr. Ellen Feigal
301-496-4291





Division of Extramural Activities

Director
Marvin Kalt, Ph.D.
301-496-5147
Deputy Director,
Paulette Gray, Ph.D.
301-496-4218

Special Assistant
Cedric W. Long, Ph.D.
301-496-9138

Office of Extramural Applications

Associate Director
Paulette S. Gray, Ph.D.
301-496-4218

Office of Referral, Review and Program Coordination

Associate Director
Robert D. Hammond, Ph.D.
301-496-2378

Applied Information Systems Branch

Chief
James W. Seach
301-496-7047

Research Analysis and Evaluation Branch

Chief
Ms. Rosemary Cuddy
301-496-7391

Grants Review Branch Chief

Olivia T. Preble, Ph.D.
301-496-7929

Special Review, Referral, Review and Program Coordination

Chief
Kirt J. Vener, Ph.D.
301-496-7173

Office of Advisory Activities

Chief
Robert Hammond, Ph.D.
401-496-2378

Technical Operations Section

Chief
Diane Ostrow
301-496-7391

Research Documentation Section

Chief
Brenda Underwood
301-496-7391

Inquiry and Reporting Section

Chief
Marilyn Gaston
301-496-7391

Research Program Review Section

Acting Chief
Olivia T. Preble, Ph.D.
301-496-7929

Research Resources Review Section

Chief
David Maslow, Ph.D.
301-496-2330

Research Positions at the National Cancer Institute¹

The National Cancer Institute recognizes that one of the most valuable resources to be drawn upon in the fight against cancer is the wealth of scientific talent available in the U.S. and around the world. In an effort to attract and maintain the highest quality scientific staff, multiple personnel systems are used: the Civil Service, the PHS Commissioned Corps, and Title 42 including the Staff Fellowship Program and the NIH Visiting Program. Other special programs are available for those who qualify.

I. **Position:** **Civil Service**

Annual Salary: Minimum starting: Ph.D. - \$58,027² (GS-13/1)
Physicians - \$66,344³ (GS-13/1)

Eligibility: Appropriate advanced education, experience and knowledge needed by NCI to conduct its programs.

Mechanism of Entry: NCI Delegated Examining Unit, Contact Division Director or Laboratory/Branch Chief in area of interest or the Administrative Resource Center (ARC).

II. **Position:** **PHS Commissioned Corps**

Annual Salary: Starting with special pay plus bonus based on individual's qualifications.

Eligibility: Must be a U.S. citizen under age 44 who meets Commissioned Corps medical requirements and passes initial suitability investigation.

Mechanism of Entry: Contact: Recruitment/ODB
5600 Fishers Lane, Room 4A-18
Rockville, MD 20857-0001
(301) 594-3360
e-mail RECRUIT@PSC.GOV

III. **Position:** **Title 42 (SBRs)**

Positions: **Senior Investigator** (position that is approved for tenured status and therefore controls independent resources and research).
Investigator (position that is approved for tenure track status; individual is on a time-limited appointment).

Annual Salary: Set between the rate for grade 15, Step 1 of the General Schedule and Level I of the Executive Schedule.

Eligibility: Earned doctorate degree in biomedicine or in a related field and be involved in the full range of investigation on the basic life processes including behavioral science and epidemiology/biostatistics.

Mechanism of Entry: NIH SBRs Policy Board Review and NIH Director approval.

Position: **Staff Scientist** (provides senior-level research support to a Principal

¹ Does not necessarily indicate that positions are currently available at the National Cancer Institute.

² Includes a 1999 locality payment for the Washington Metropolitan and Baltimore areas.

³ Medical Officer (Research), GS-602 Special Rate Scale for 1999.

Investigator or research team).

Annual Salary: Position is at or equivalent to at least the GS-13 level.

Eligibility: Physician or other doctoral degree equivalent and position has been approved for Staff Scientist status.

Mechanism of Entry: Contact Division Director or Laboratory/Branch Chief in area of interest or ARC.

Position: **Staff Clinician** (provides clinical and medical care and service to Division/Branch clinical protocols and activities)

Annual Salary: Position is at or equivalent to at least the GS-13 level.

Eligibility: Physician and position has been approved for Staff Clinical status.

Mechanism of Entry: Contact Division Director or Laboratory/Branch Chief in area of interest or ARC.

IV. Position Title 42 B Research/Clinical Fellowships

This type of fellowship is appropriate for U.S. Citizens, resident aliens, or non-U.S. citizens who are on time-limited appointments and have 8 years or less of NIH nontenured service.

Position: **Staff Fellow** (time-limited appointment with initial appointments typically made for 2 years).

Annual Salary: Physicians: \$31,000 - \$59,000
Other Doctoral: \$31,000 - \$52,000

Eligibility: Physician or other doctoral degree equivalent and less than 3 years of relevant professional level postdoctoral research experience. U.S. citizen or resident alien.

Mechanism of Entry: Contact Division Director or Laboratory/Branch Chief in area of interest or ARC.

Position: **Visiting Associate** (time-limited appointment with 2 year initial appointment possible depending on visa restrictions).

Annual Salary: Physicians: \$31,000 - \$59,000

Eligibility: 3 years of relevant postdoctoral research experience or equivalent research or training. Non-U.S. citizen.

Mechanism of Entry: Contact Division Director or Laboratory/Branch Chief in area of interest or ARC.

Position: **Senior Staff Fellow** (time-limited appointment with initial appointment typically made for 2 years).

Annual Salary: Physicians: \$42,000 - \$83,000
Other Doctoral: \$38,000 - \$70,000

Eligibility: Physician or other doctoral degree equivalent and 3 to 7 years of relevant professional level postdoctoral research experience. U.S. citizen or resident alien.

Mechanism of Entry: Contact Division Director or Laboratory/Branch Chief in area of interest or ARC.

Position: **Visiting Scientist** (time-limited appointment with 2 year initial appointment possible depending on visa restrictions).

Annual Salary: \$45,000 - \$97,000

Eligibility: 6 years of relevant postdoctoral research experience. Non-U.S. citizen.

Mechanism of Entry: Contact Division Director or Laboratory/Branch Chief in area of interest or ARC.

V. Position: **Visiting Fellow** (time-limited fellowship award with program time limitation of 5 years depending on visa restrictions).

Annual Salary: First year stipends range from \$29,000 - \$35,000 based on years of postdoctoral experience.

Eligibility: 5 years or less of relevant postdoctoral experience or training. Non-U.S. citizen.

Mechanism of Entry: Contact Division Director or Laboratory/Branch Chief in area of interest.

VI. Clinical Associate Program

Position: **Clinical Associate** (time-limited appointment with initial appointment for 2 years with the possibility of 1-year extension).

Annual Salary: \$38,500 initial stipend with \$2,000 increase for each year the Associate remains in the Program. Clinical Associates also receive annual cost of living allowances.

Salaries for individuals appointed under the Commissioned Corps program are established on an individual basis.

Eligibility: Graduate of accredited medical or osteopathic school and completion of internship. Completion of 2 or 3 years of clinical training beyond the M.D. degree. Must be a U.S. citizen or a permanent U.S. resident. **NOTE:** Foreign M.D.s on the J-1 visa may apply and will be considered under the Visiting Associate program.

Mechanism of Entry: Contact Division Director or Laboratory/Branch Chief in area of interest or ARC.

VII. Pharmacology Research Associates Training Program (PRAT)

Position: **PRAT Fellow** (time-limited appointment for 2 years).

Annual Salary: Salary commensurate with other postdoctoral opportunities at the NIH.

Eligibility: Candidates must be U.S. citizens or permanent residents of the U.S. who have been awarded a doctoral degree. The degree must be in a biomedical or related science and must have been received within the 5 years preceding the date of application.

Mechanism of Entry: Apply to PRAT Program, NIGMS Natcher Building, Room 2AS43
A PRAT Fact sheet is available from the PRAT Program Assistant
(301) 594-3583 or fax (301) 480-2802

VIII. Position: **Special Expert** (time limited appointment not to exceed 4 years).
Annual Salary: Pay commensurate with expertise up to a potential salary of \$200,000.
Eligibility Applicants shall possess a high level of scientific or other and expertise in a field related to program needs.
Mechanism of Entry: Final approval rests with the Division Director or Director, NCI depending on the recommended action.

IX. Special Programs

Position: **Guest Researcher**

Annual Salary: Established by sponsoring organization.

Eligibility: A scientist, engineer, student, or other scientifically trained specialist who would benefit from the use of NCI facilities in furthering his or her research. A Guest Researcher cannot perform services for NCI and must be in a valid visa status.

Mechanism of Entry: Contact Division Director or Laboratory/Branch Chief in area of interest.

Position: **Research Scholars Program** (provides up to 4 years of intramural support for initiation of an independent research program in the NCI intramural environment, with an opportunity for 2 additional years of support to continue the research program at an extramural institution)

Annual Salary: Intramural Phase: Approximately \$200,000 per year including salaries and no more than 2 additional support positions and up to \$22,500 per year per person for research supplies and services. Support for equipment, animals, etc. are negotiated separately.

Eligibility: Must be U.S. citizen, (non-citizen national) or individual lawfully admitted for permanent residence. An individual with a research health professional degree at the time of award, but with no more than 5 years of post-doc experience at the time of application; a current intramural NCI post-doc fellow applying for placement in a laboratory/branch in which he/she has not previously trained.

Mechanism of Entry: Response to an annual RFA announcement, available in the NIH Guide for Grants and Contracts, or on the NCI Cancer Training Branch website: (<http://camp.nci.nih.gov/ctb/main/>) This announcement describes the specific research areas of interest to the NCI.

Inquiries on programmatic issues may be directed to:

Dr. Lester S. Gorelic
Executive Plaza North
Room 520
6130 Executive Blvd. MSC 7390
Bethesda, MD 20892-7390
Phone: (301) 496-8580
Fax: (301) 402-4472
E-mail: lg2h@nih.gov

Position: **Commissioned Officer Junior Student Training and Extern Program (COSTEP)** (operates year-round; maximum 120 days per 12-month period)

Annual Salary: Receive the basic pay quarters (if appropriate), and subsistence allowance of a Junior Assistant Health Service Officer (pay grade 0-1).

Eligibility: U.S. citizen. Must have completed one year of study in a medical, dental, or veterinary school or a minimum of two years of baccalaureate program in a health related field such as engineering, nursing, pharmacy, etc. May be enrolled in a master's or doctoral program in a health related field. Physical requirements of PHS Commissioned Corps. Plans to return to college.

Mechanism of Entry: Apply to Director, Division of Commissioned Personnel
Attention: Jr. COSTEP Coordinator
5600 Fishers Lane
Parklawn Building
Room 4-35
Rockville, MD 20857-0001

Position: **Commissioned Officer Senior Training and Extern Program (COSTEP)**
(competitive program to assist students during final year of professional school in return for an agreement to work for PHS after graduation for twice the time sponsored i.e., an 18-month employment commitment for 9 months of financial support)

Annual Salary: Receive basic pay, quarters, subsistence, and VHA allowance at rate of 0-1 for entire year in school.

Eligibility: U.S. citizen.

Mechanism of Entry: Apply to Director, Division of Commissioned Personnel
Attention: Senior COSTEP Coordinator
5600 Fishers Lane
Parklawn Building
Room 4A15
Rockville, MD 20857-0001

Position: **Fogarty International Center's Scholars Program**

Annual Salary: Receive position, salary, and necessary resources, including office space and support, from one or more ICs.

Eligibility: International reputation and productivity demonstrated ability in a biomedical field. Scholar must be in a valid visa status.

Mechanism of Entry : Nominations are submitted to Office of Intramural Research, Bldg. 1, Rm. 140, by Institute Director or Chairs of Special Interest Groups.

Position: **Student Temporary Employment Program**
Provides clerical and research support employment opportunities for individuals who are enrolled or accepted for enrollment as a degree seeking student who is taking at least a half-time academic/vocational or technical course load in an accredited high school, technical or vocational school, or 2 year or 4 year college or university or graduate or professional school.

Annual Salary: Salary is commensurate with duties assigned and student's education and /or experience.

Eligibility: The student must maintain a good academic standing and must be at least 16 years of age. Must be a U.S. citizen or a non-citizen from a treaty-allied country lawfully admitted to the U.S. as a permanent resident or otherwise authorized to be employed.

Mechanism of Entry: Contact NCI Human Resource Management and Consulting Branch
Delegated Examining and Staffing Team
EPS, Room 550
6120 Executive Blvd.
Rockville, MD 20892-7211 or
by phone at (301) 402-2812, for an application package. No deadline required for applying. If applying for a research support position, a transcript copy or course listing is required. Applications are maintained for the school year for high school students, all other students for 90 days. Consideration beyond the specified time frames will require submission of an updated application package to the above address. Current STEP vacancies are located on the following website : <http://careerhere.nih.gov>

Position: **Special Volunteer Program** (volunteer service may be accepted for direct patient care, clerical assignments, technical assistance, or any other activities necessary to carry out the authorized functions of the NCI without compensation)

Annual Salary: N/A

Eligibility: Volunteer must be in a valid visa status.

Mechanism of Entry: Contact Division Director or Laboratory/Branch Chief in area of interest or ARC.

Position: **Student Career Experience Program**
Provides experience that is directly related to the student-s educational program and career goals.

Annual Salary: Salary is commensurate with duties assigned and student-s education and /or experience.

Eligibility: Must be at least 16 years of age. Must be enrolled or accepted for enrollment as a degree seeking student in an accredited high school, technical or vocational school, or 2 year or 4 year college or university, graduate, or professional school. The student must maintain a good academic standing. The student must be recommended for the assignment by the student-s education program coordinator and be enrolled in the program. Must be enrolled in a field of study directly related to the assigned work with at least half-time academic/vocational or technical course load. Must be a U.S. citizen or a non-citizen from a treaty-allied country lawfully admitted to the U.S. as a permanent resident or otherwise authorized to be employed. Students who have met all the requirements of the Program may be noncompetitively converted to term, career, or career-conditional appointments within 120 days after completion of their degree. U.S. citizenship is required for conversion to permanent employment.

Mechanism of Entry: Contact NCI Human Resource Management and Consulting Branch
Delegated Examining and Staffing Team
6120 Executive Blvd
EPS, Room 550
Rockville, MD 20892-7211 or
by phone at (301)402-2812, for additional information. As positions become
available, vacancies will be posted at local area schools, in addition to being
posted on the following website: <http://careerhere.nih.gov>

X. Other Training Programs

Position: **Cancer Research Training Award (CRTA** the NCI universal, umbrella
fellowship program for domestic fellows.)

Annual Salary: A set stipend amount is provided for each category described below.

Eligibility: Applicant must be available for fellowship training on a full-time basis for a
minimum of 2 months, be at least 16 years of age, and be a U.S. citizen or
resident alien.

Mechanism of Entry: Contact Division Director of Laboratory/Branch Chief in area of interest.

Position: **CRTA Category 1 Prebaccalaureate**

Annual Salary: A set stipend, based on years of education at time of award, ranges from
\$11,400 for 10th grade in high school to \$16,200 for 3rd year undergraduate
student.

Eligibility: For selected high school and undergraduate students in good academic
standing, engaged in at least half-time academic work.

Mechanism of Entry: Contact Division Director of Laboratory/Branch Chief in area of interest.

Position: **CRTA Category 2 Bachelor's Degree**

Annual Salary: Annual set stipend, for relevant post-bachelor's experience start at \$17,600 to
\$25,300. A \$2,200 increment is provided for those with superior academic
achievement (cumulative 3.5 GPA).

Eligibility: Individuals in this category must possess a baccalaureate degree. Graduate,
law, or medical school students must be in good academic standing and
engaged in at least half-time academic work.

Mechanism of Entry: Contact Division Director of Laboratory/Branch Chief in area of interest.

Position: **CRTA Category 3 Master's Degree**

Annual Salary: Starting set stipend amounts between \$22,000 - \$26,400 are determined by
relevant experience.

Eligibility: Fellows who have a Master's degree and for individuals who have a Master's
degree and are working toward a more advanced degree.

Mechanism of Entry: Contact Division Director of Laboratory/Branch Chief in area of interest.

Position: **CRTA Category 4 Doctoral Degree**

Annual Salary: First year stipend is \$20,900.

Eligibility: For individuals who have completed their course requirements, passed qualifiers, and are formally recognized by the university as a doctoral degree candidate. These individuals will be engaged in a research project for the purpose of developing and writing a thesis.

Mechanism of Entry: Contact Division Director of Laboratory/Branch Chief in area of interest.

Position: CRTA Category 5 Postdoctoral Degree

Annual Salary: Set stipends for first year range from \$29,000 - \$39,500.

Eligibility: Must be a Ph.D., D.V.M., J.D., or M.D. without direct patient contact. Typically, these fellows will have less than 5 years of postdoctoral experience.

Mechanism of Entry: Contact Division Director of Laboratory/Branch Chief in area of interest.

Position: CRTA Category 6 Medical Degree

Annual Salary: First year stipend amount is based on postgraduate years (PGY) of clinical training leading to an appropriate board eligibility or certification.

Eligibility: For M.D.s engaged in patient care and/or continuing patient contact who have been trained in U.S.-recognized residency programs.

Mechanism of Entry: Contact Division Director of Laboratory/Branch Chief in area of interest.

Position: CRTA Specialized Recruitment Training Programs

Eligibility: Fellows selected from these specialized recruitments are awarded CRTA fellowships.

Mechanism of Entry: Contact Division Director of Laboratory/Branch Chief in area of interest.

Position: Cancer Epidemiology and Biostatistics Training Program

Annual Salary: See appropriate CRTA category.

Eligibility: M.D.s and Ph.D.s with an interest in and an aptitude for epidemiology and/or biostatistical research in cancer. Ph.D. candidates in approved doctoral programs in epidemiology or biostatistics whose research would be the source of their dissertation. Master's level scientists whose degree is in a discipline related to epidemiology or biostatistics. Must be a U.S. citizen or resident alien who will be eligible for U.S. citizenship within four years.

Mechanism of Entry: Contact the Division of Cancer Epidemiology and Genetics= Program Coordinator.
Executive Plaza North, Room 418
6130 Executive Blvd.
Rockville, MD 20892

Position: Cancer Genetics and Epidemiology Training Program

Annual Salary: See appropriate CRTA category.

Eligibility: M.D.s, D.D.S., or D.O. or an accredited doctoral degree in a discipline related to cancer etiology and prevention research (e.g. epidemiology, human or molecular genetics, biostatistics, or the biomedical, public health or behavioral sciences). Foreign medical graduates must have current USMLE or ECFMG certification and appropriate experience.

Mechanism of Entry: Contact the Division of Cancer Epidemiology and Genetics, Human Genetics Program Coordinator.
Executive Plaza North, Room 400
6130 Executive Blvd.
Rockville, MD 20892

Position: **Cancer Prevention Fellowship Program**

Annual Salary: See appropriate CRTA category.

Eligibility: Must be an M.D., D.D.S., or Ph.D., or other doctoral degree in a related discipline (epidemiology, biostatistics, and the biomedical, nutritional, public health, or behavioral sciences).

Mechanism of Entry: Apply to Program Director, CPFPP
Executive Plaza South, Room T41
6120 Executive Blvd.
Rockville, MD 20892

Position: **Health Communications Internship Program**

Annual Salary: See appropriate CRTA category.

Eligibility: Six month internship period with option of a possible 6 month renewal for students currently enrolled in a graduate school program who wish to pursue an internship prior to completing the requirements for a Master's Degree or Ph.D.

Mechanism of Entry: Applications are due April 1 (for July & December terms) and October 1 (for January & June terms).
HCIP Program Coordinator
OCC/OD/NCI
31 Center Drive, Room 10A28
Bethesda, MD 20892

Position: **Technology Transfer Fellowship Program**

Annual Salary: See appropriate CRTA category.

Eligibility: Physicians, Ph.D.s, J.D.s, individuals with a Master's Degree in Health Communications, Biomedical Science, Behavioral Science, Computer Science, Informatics, Library Science, Health Education, Marketing, Journalism, English, a graduate degree in Law, or a graduate degree in another discipline with legal/paralegal expertise, with little or no experience or training in technology transfer or communications research but with an interest in these areas.

Mechanism of Entry: Contact following the program in area of interest: Office of Cancer Information, Communication and Education; the Office of Cancer Communications; the Division of Cancer Prevention; the Division of Cancer Treatment and Diagnosis; the Office of Science Policy; or the Technology, Development, and Commercialization Branch.

Number of Deaths for the Five Leading Cancer Sites by Age Group and Sex

All Ages		Under 15		15-34		35-54		55-74		75+	
Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Lung & Bronchus 91554	Lung & Bronchus 60348	Leukemia 302	Leukemia 230	Leukemia 601	Breast 557	Lung & Bronchus 8810	Breast 9512	Lung & Bronchus 52480	Lung & Bronchus 32367	Lung 30106	Lung 22085
Prostate 34122	Breast 43090	Brain & ONS 265	Brain & ONS 206	NHL 430	Leukemia 401	Colon & Rectum 2585	Lung & Bronchus 5772	Colon & Rectum 13276	Breast 17795	Prostate 22618	Colon & Rectum 16466
Colon & Rectum 27989	Colon & Rectum 28765	Endocrine 104	Endocrine 62	Brain & ONS 393	Cervix 320	NHL 1930	Colon & Rectum 2117	Prostate 11086	Colon & Rectum 10034	Colon & Rectum 11934	Breast 15224
Pancreas 13024	Pancreas 14232	NHL 48	Soft Tissue 37	Soft Tissue 193	Brain & ONS 278	Brain & ONS 1686	Ovary 1825	Pancreas 6575	Ovary 6064	Pancreas 4907	Pancreas 7470
NHL 11904	Ovary 13161	Soft Tissue 40	Bone & Joints 28	Colon & Rectum 192	NHL 231	Pancreas 1508	Cervix 1675	NHL 5149	Pancreas 5818	Leukemia 4534	NHL 5558

Source: Mortality tape (1996) from National Center for Health Statistics.
NHL = Non Hodgkin's Lymphoma

Relationship of Cancer to the Leading Causes of Death in the United States

Rank	Cause	Number of Deaths	Age Adjusted Rate*	Percent of Total Deaths
	All Causes	2,314,167	667.2	100.0%
1	Heart Disease	733,280	200.4	31.7%
2	CANCER	539,508	166.9	23.3%
3	Cerebrovascular Diseases	159,931	41.6	6.9%
4	Emphysema, Bronchitis & Asthma	106,014	30.3	4.6%
5	Accidents	94,828	31.7	4.1%
6	Pneumonia & Influenza	83,717	21.0	3.6%
7	Diabetes Mellitus	61,766	18.4	2.7%
8	Human Immunodeficiency Virus Infection	31,123	9.4	1.3%
9	Suicide and Self-Inflicted Injury	30,879	10.4	1.3%
10	Cirrhosis of the Liver	25,037	8.3	1.1%
11	Nephritis & Nephrosis	24,302	6.5	1.1%
12	Septicemia	21,422	5.9	0.9%
13	Homicide	20,908	7.8	0.9%
14	Atherosclerosis	16,739	4.0	0.7%
15	Aortic Aneurysm	16,386	4.7	0.7%
	Other and Ill-Defined	348,327	99.8	15.1%

Source: Mortality Tape (1996) from National Center for Health Statistics.
* Age adjusted rate per 100,000 Population

Estimated New Cancer Cases and Deaths by Sex for All Sites 1999

Primary Site	Estimated New Cases			Estimated Deaths		
	Total	Male	Female	Total	Male	Female
All Sites *	1,221,800	623,800	598,000	563,100	291,100	272,000
Oral Cavity and Pharynx	29,800	20,000	9,800	8,100	5,400	2,700
Tongue	6,600	4,300	2,300	1,800	1,200	600
Mouth	10,800	6,400	4,400	2,300	1,300	1,000
Pharynx	8,300	6,100	2,200	2,100	1,500	600
Other Oral Cavity	4,100	3,200	900	1,900	1,400	500
Digestive System	226,300	117,200	109,100	131,000	69,900	61,100
Esophagus	12,500	9,400	3,100	12,200	9,400	2,800
Stomach	21,900	13,700	8,200	13,500	7,900	5,600
Small Intestine	4,800	2,500	2,300	1,200	600	600
Colon	94,700	43,000	51,700	47,900	23,000	24,900
Rectum	34,700	19,400	15,300	8,700	4,800	3,900
Anus, Anal Canal, & Anorectum	3,300	1,400	1,900	500	200	300
Liver and Intrahepatic Bile Duct	14,500	9,600	4,900	13,600	8,400	5,200
Gallbladder & Other Biliary	7,200	3,000	4,200	3,600	1,300	2,300
Pancreas	28,600	14,000	14,600	28,600	13,900	14,700
Other Digestive	4,100	1,200	2,900	1,200	400	800
Respiratory System	187,600	106,800	80,800	164,200	94,900	69,300
Larynx	10,600	8,600	2,000	4,200	3,300	900
Lung and Bronchus	171,600	94,000	77,600	158,900	90,900	68,000
Other Respiratory	5,400	4,200	1,200	1,100	700	400
Bones and Joints	2,600	1,400	1,200	1,400	800	600
Soft Tissues	7,800	4,200	3,600	4,400	2,100	2,300
Skin (excl. basal & squamous)	54,000	33,400	20,600	9,200	5,800	3,400
Melanomas Of Skin	44,200	25,800	18,400	7,300	4,600	2,700
Other non-epithelial skin	9,800	7,600	2,200	1,900	1,200	700
Breast	176,300	1,300	175,000	43,700	400	43,300
Genital Organs	269,100	188,100	81,000	64,700	37,500	27,200
Cervix Uteri	12,800		12,800	4,800		4,800
Endometrium (uterus)	37,400		37,400	6,400		6,400
Ovary	25,200		25,200	14,500		14,500
Vulva	3,300		3,300	900		900
Vagina and other genital organs, female	2,300		2,300	600		600
Prostate	179,300	179,300		37,000	37,000	
Testis	7,400	7,400		300	300	
Penis and other genital organs, male	1,400	1,400		200	200	
Urinary System	86,500	58,400	28,100	24,500	15,600	8,900
Urinary Bladder	54,200	39,100	15,100	12,100	8,100	4,000
Kidney and Renal Pelvis	30,000	17,800	12,200	11,900	7,200	4,700
Ureter and other urinary organs	2,300	1,500	800	500	300	200
Eye and Orbit	2,200	1,200	1,000	200	100	100
Brain and Other Nervous System	16,800	9,500	7,300	13,100	7,200	5,900
Endocrine Glands	19,800	5,400	14,400	2,000	900	1,100
Thyroid	18,100	4,600	13,500	1,200	500	700
Other Endocrine	1,700	800	900	800	400	400
Lymphomas and Myelomas	64,000	36,400	27,600	27,000	14,100	12,900
Hodgkin's Disease	7,200	3,800	3,400	1,300	700	600
Non-Hodgkin's Lymphoma	56,800	32,600	24,200	25,700	13,400	12,300
Multiple Myeloma	13,700	7,300	6,400	11,400	5,800	5,600
Leukemias	30,200	16,800	13,400	22,100	12,400	9,700
Lymphocytic Leukemias	10,900	6,300	4,600	6,500	3,800	2,700
Myeloid Leukemias	14,600	7,600	7,000	9,200	5,000	4,200
Other Leukemias	4,700	2,900	1,800	6,400	3,600	2,800
All Other Sites	35,100	16,400	18,700	36,100	18,200	17,900

Source: Cancer Facts & Figures-1999, American Cancer Society, Atlanta, Georgia 1999.
Excludes basal and squamous cell skin and in situ carcinomas except urinary bladder.
Incidence projections are based on rates from the NCI SEER Program 1979-95.

The Cost of Cancer

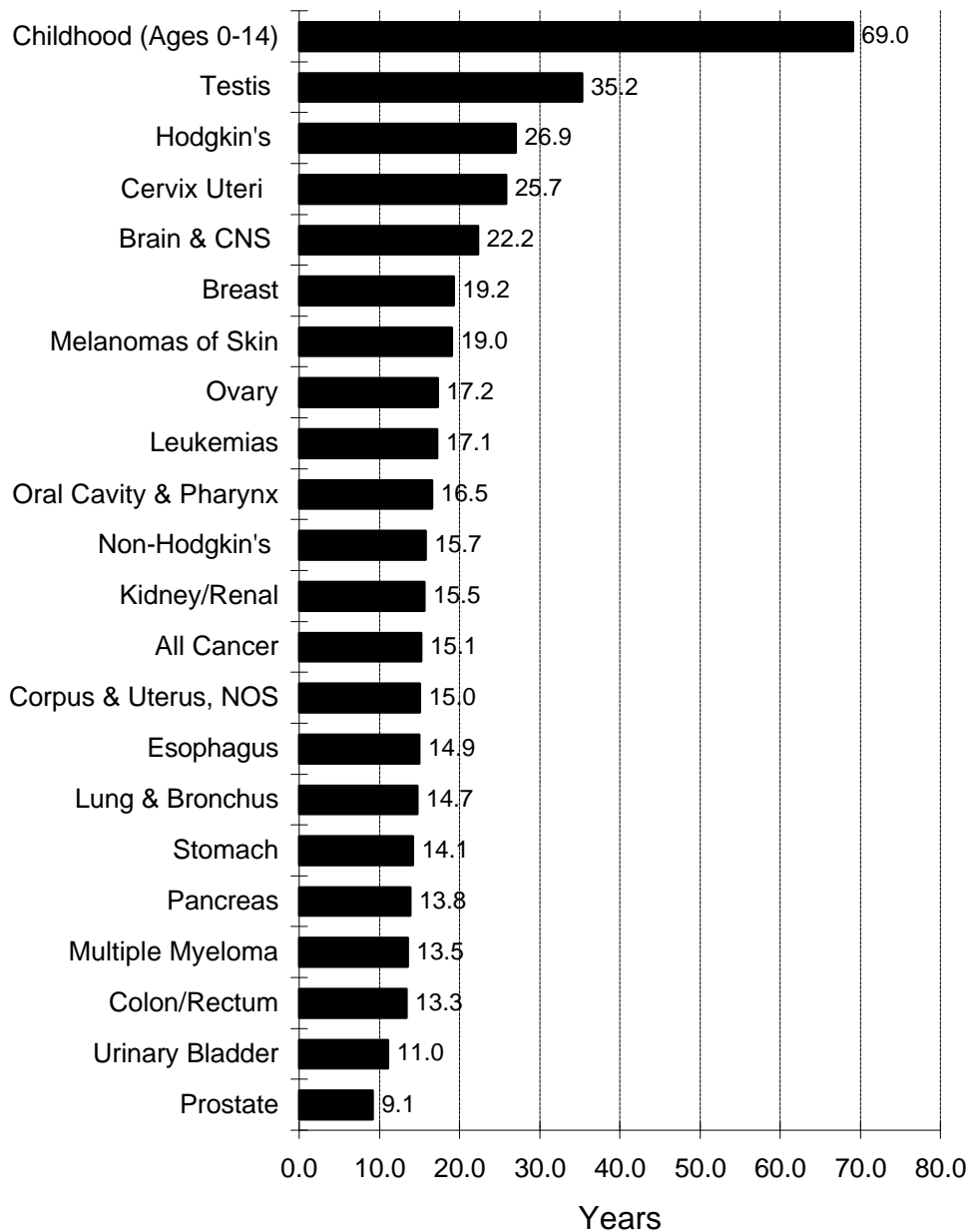
The direct medical cost of cancer is derived from the national data on costs per treatment episode. This estimate does not include the cost of the productivity lost while individuals are away from work due to treatment or disability or the value of lost productivity due to premature death. Figures for the direct medical cost of cancer and expenditures for all personal health care for 1994 are as follows:

(in Millions)	
All Costs	Direct Cost
All Cancers ¹	\$ 41,400
All Health Care ²	\$833,959
Percent Relationship of Cancer to All Health	5%

¹Brown ML, Hodgson TA, Rice DR. Economic impact of cancer in the United States. In D. Schottenfeld and J.F. Fraumeni Jr., eds. Cancer Epidemiology and Prevention, Second Edition, New York: Oxford University Press, 1996, pages 255-266.

²Office of the Actuary, Health Care Finance Administration, DHHS

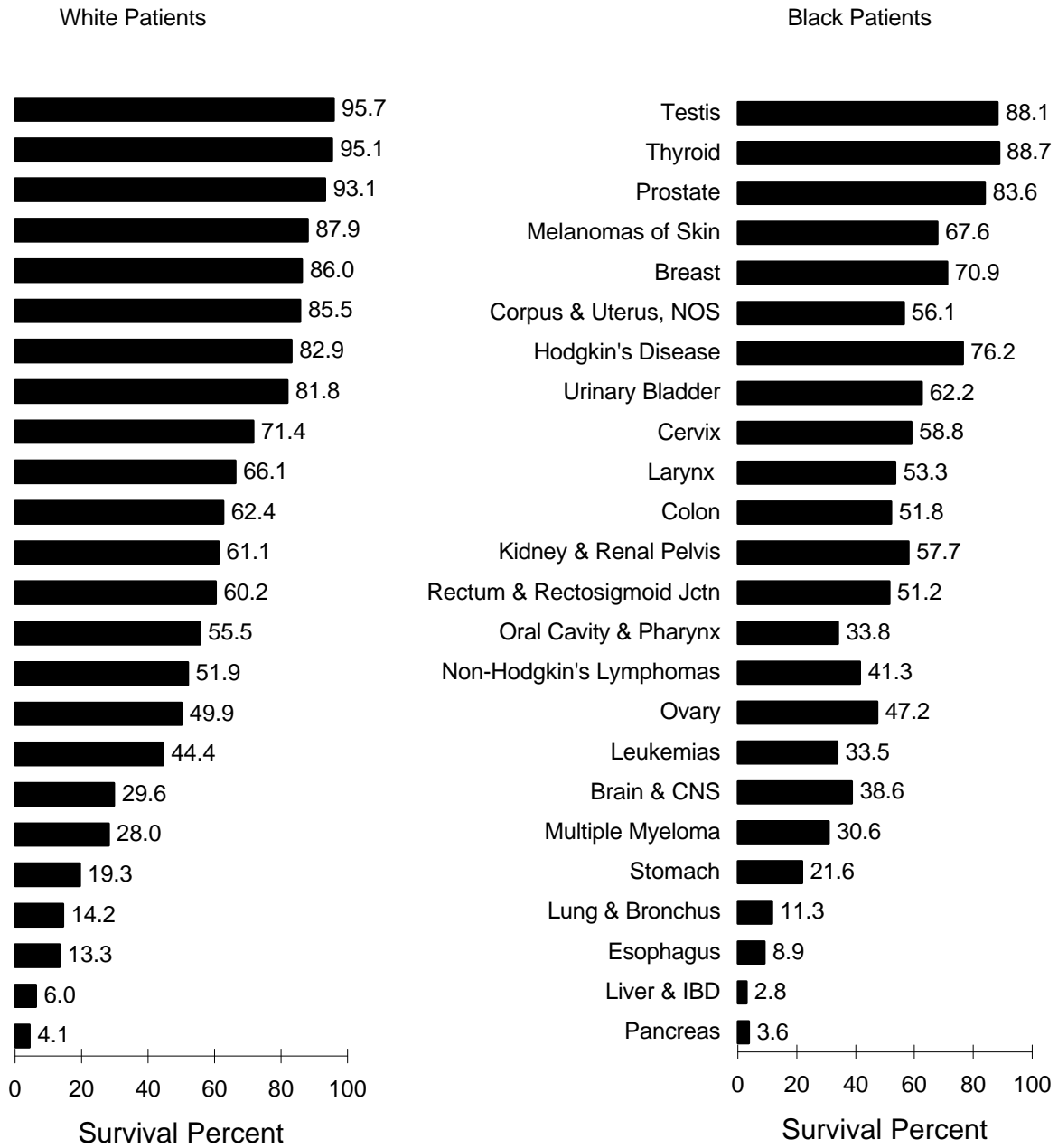
Average Years of Life Lost
Per Person Dying of Cancer
All Races, Both Sexes, 1996



5 Year Relative Survival Rates by Site

White and Black Patients, Males and Females

1989 to 1995



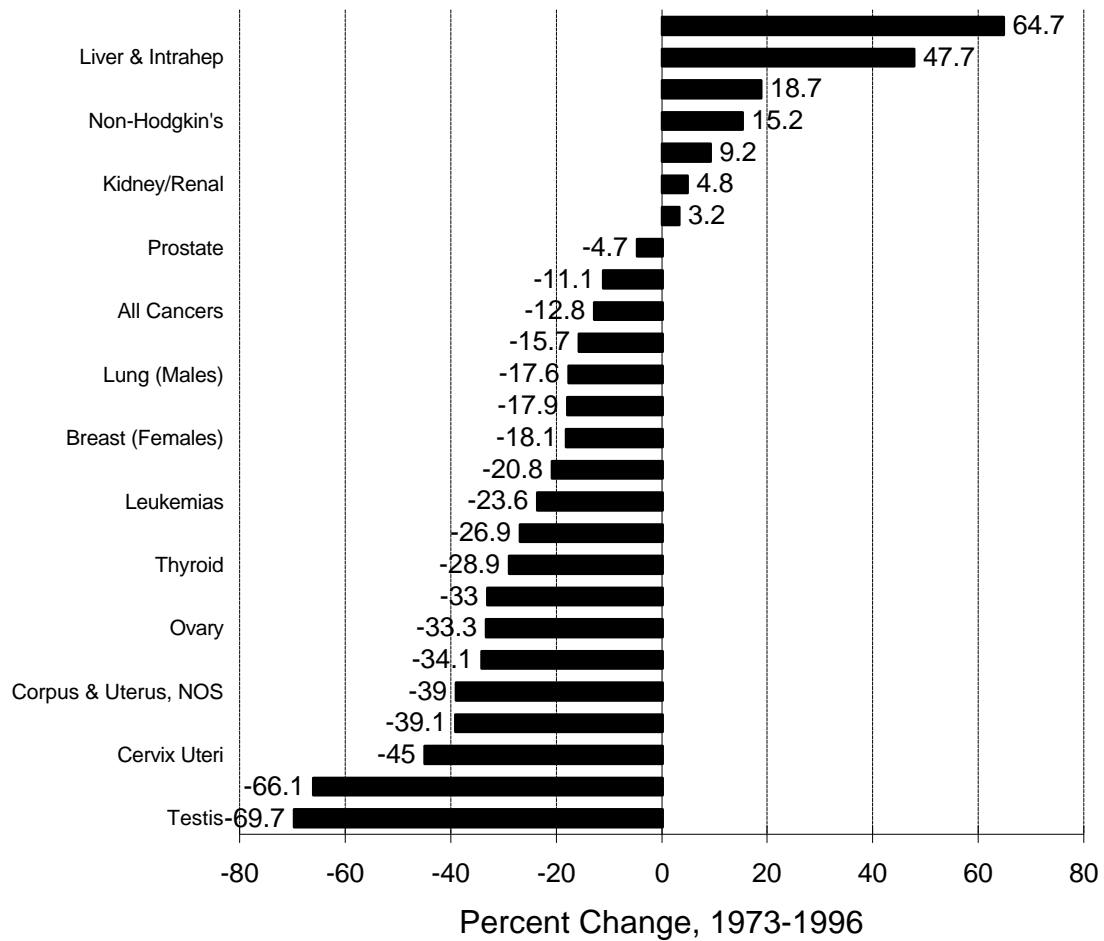
Data From SEER Program
<http://www-seer.ims.nci.nih.gov/>

Cancer Mortality Rates

Changes from 1973 to 1996

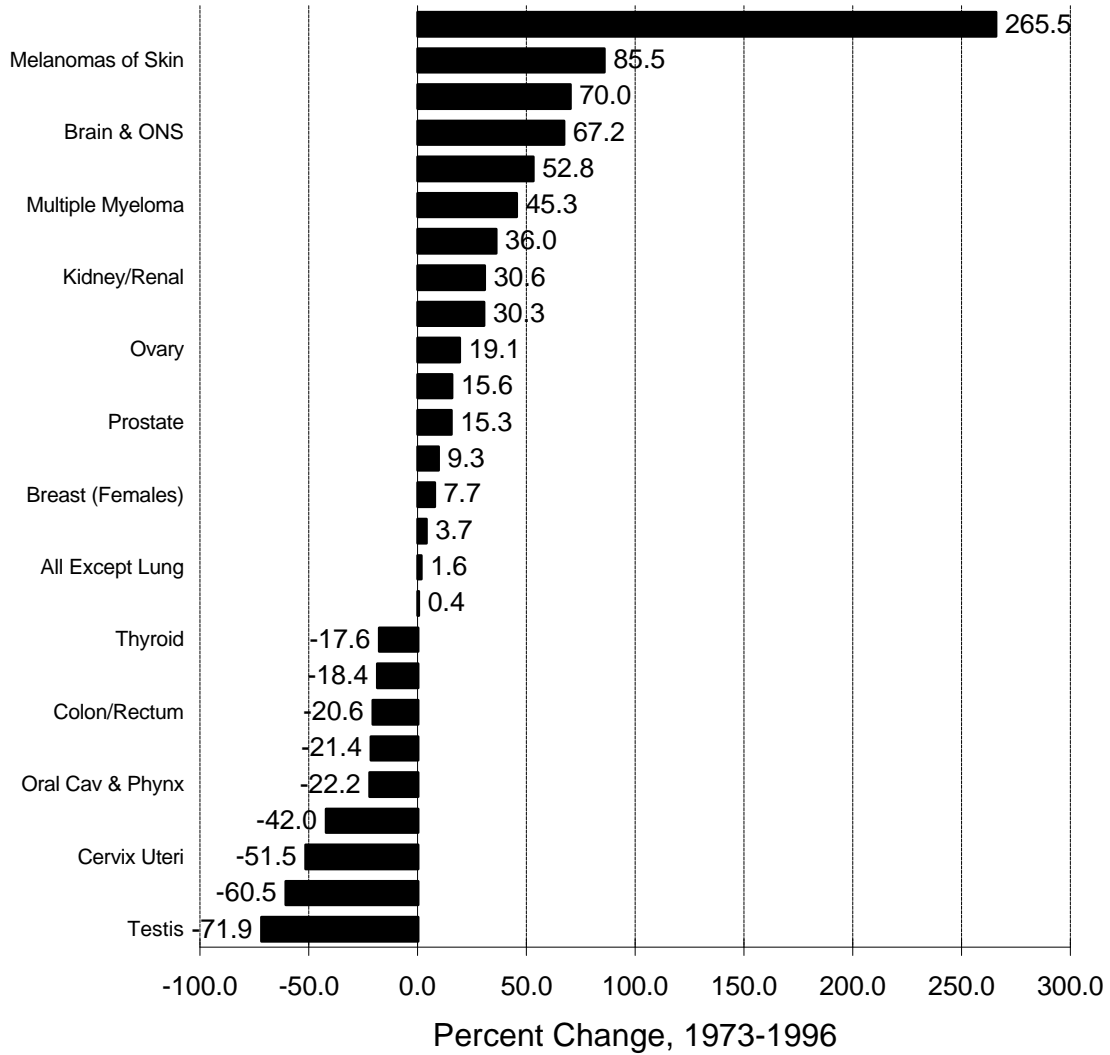
(Ages Under 65)

Ages Under 65



Cancer Mortality Rates Changes from 1973 to 1996 (Ages Over 65)

Ages Over 65



Cancer Mortality Rates By Race

United States, 1992-1996

Cancer Site	Mortality Rate per 100,000		Ratio
	Blacks	Whites	Blacks/Whites
All Sites	221.6	166.7	1.3
Males	304.9	207.0	1.5
Females	167.7	139.5	1.2
Cervix Uteri	5.9	2.4	2.5
Esophagus	7.4	3.2	2.3
Larynx	2.8	1.2	2.3
Prostate	54.8	23.4	2.3
Multiple Myeloma	6.2	2.8	2.2
Stomach	8.1	3.7	2.2
Oral Cavity & Pharynx	4.7	2.5	1.9
Corpus & Uterus, NOS	5.8	3.1	1.9
Liver & Intrahepatic Bile Duct	4.6	3.1	1.5
Pancreas	11.8	8.1	1.5
Colon & Rectum	22.9	17.1	1.3
Breast (females)	31.3	25.1	1.2
<50 years	8.7	5.1	1.7
>50 years	100.9	86.8	1.2
Lung & Bronchus	60.0	49.2	1.2
Males	99.0	69.1	1.4
Females	33.2	34.4	1.0
Thyroid	0.3	0.3	1.0
Hodgkin's Disease	0.5	0.5	1.0
Kidney & Renal Pelvis	3.5	3.6	1.0
Urinary Bladder	3.1	3.3	0.9
Leukemias	5.9	6.4	0.9
Ovary	6.3	7.9	0.8
Non-Hodgkin's Lymphoma	4.7	7.0	0.7
Brain & Other Nervous	2.4	4.5	0.5
Testis	0.1	0.3	0.3
Melanomas of Skin	0.4	2.5	0.2
All Sites Except Lung & Bronchus	161.7	117.6	1.4
Males	206.0	137.9	1.5
Females	134.6	105.2	1.3

NOTE: The annual number of cancer deaths per 100,000 persons is derived from estimates of the National Center for Health Statistics, adjusted to the 1970 US population age distribution.

Cancer Incidence Rates By Race

United States, 1992-1996

Cancer Site	Incidence Rates per 100,000		Ratio
	Blacks	Whites	Blacks/Whites
All Sites	455.8	405.6	1.1
Males	621.9	483.0	1.3
Females	338.7	352.5	1.0
Esophagus	8.4	3.5	2.4
Multiple Myeloma	9.5	4.1	2.3
Stomach	11.3	6.0	1.9
Larynx	6.6	3.9	1.7
Liver & Intrahepatic Bile Duct	5.0	3.0	1.7
Pancreas	13.8	8.5	1.6
Prostate	240.4	150.2	1.6
Cervix Uteri	11.2	7.3	1.5
Oral Cavity & Pharynx	13.5	10.0	1.4
Lung & Bronchus	75.0	56.9	1.3
Males	114.2	74.3	1.5
Females	46.6	44.1	1.1
Kidney & Renal Pelvis	11.0	9.4	1.2
Colon & Rectum	49.9	43.9	1.1
Colon excluding Rectum	38.5	31.5	1.2
Rectum and Rectosigmoid Junction	11.4	12.4	0.9
Breast (females)	101.5	113.9	0.9
<50 years	33.2	31.5	1.1
>50 years	312.3	368.0	0.8
Hodgkin's Disease	2.4	2.9	0.8
Leukemias	8.3	10.6	0.8
Non-Hodgkin's Lymphomas	12.1	16.3	0.7
Corpus & Uterus, NOS	15.3	22.4	0.7
Ovary	10.5	15.4	0.7
Thyroid	3.1	5.3	0.6
Brain & Other Nervous System	3.7	6.5	0.6
Urinary bladder	9.8	18.1	0.5
Testis	0.9	5.3	0.2
Melanomas of the Skin	0.8	14.9	0.1
All Sites Except Lung & Bronchus	380.8	348.7	1.1
Males	507.7	408.8	1.2
Females	292.1	308.3	0.9

NOTE: The annual number of new cancer cases per 100,000 persons is derived from NCI's SEER Program, adjusted to the 1970 US population age distribution.

**The Prevalence of Cancer:
Estimated Number of Persons
Diagnosed With Cancer
United States, 1999**

	1999 Estimated Prevalence		
	Total	Males	Females
ALL SITES	8368000	3465000	4903000
All Sites (Age 0-14)	154,000	78,000	76,000
Bladder	601,000	443,000	158,000
Brain and Other Nervous System	91,000	49,000	42,000
Buccal	214,000	134,000	80,000
Colon	877,000	408,000	469,000
Hodgkin's Disease	158,000	84,000	74,000
Kidney and Renal Pelvis	204,000	123,000	81,000
Larynx	132,000	106,000	26,000
Leukemias	144,000	80,000	64,000
Lung and Bronchus	397,000	212,000	185,000
Melanoma of Skin	484,000	234,000	250,000
Non Hodgkin's Lymphoma	300,000	150,000	150,000
Pancreas	25,000	12,000	13,000
Rectum	379,000	202,000	177,000
Stomach	77,000	42,000	35,000
Thyroid	214,000	53,000	161,000
Prostate	1,017,000	1,017,000	
Testis	130,000	130,000	
Breast	2,057,000	13,000	2,044,000
Cervix Uteri	211,000		211,000
Corpus Uteri	550,000		550,000
Ovary	191,000		191,000

Source: 1999 prevalence rates are based on 1994 prevalence rates from the Connecticut registry of the SEER program and 1999 population estimates from the U.S. Bureau of the Census. Connecticut prevalence rates are based on 1940-1993 cancer incidence and survival rates.

Fiscal Year 1999 Budget

(Dollars in Thousands)

A. Actual Obligations Resulting From Appropriated Funds:

FY 1999 Appropriation	\$2,927,187
Real transfer from other NIH Institutes through the NIH Director's one percent transfer authority	-6,259
Real transfer to other HHS Agencies through Secretary's one percent transfer authority	-931
Rescission	-1,940
Lapse	-7
Actual Obligations Subtotal	2,918,050

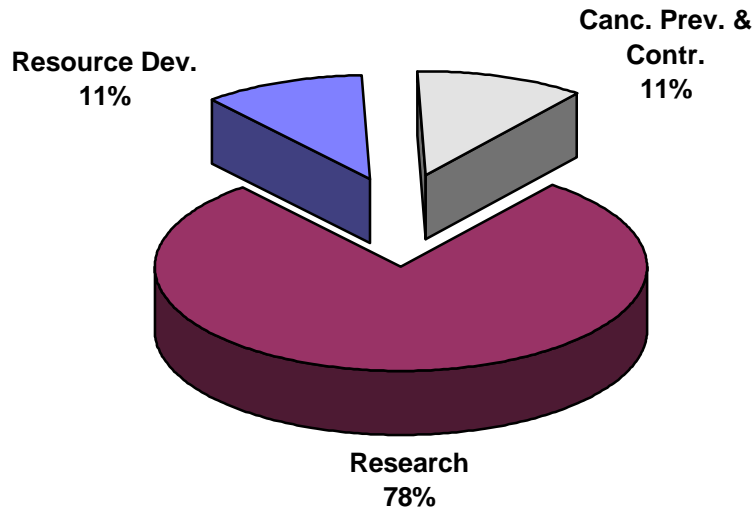
B. Reimbursable Obligations:

AIDS Reimbursement from Office of the Director, NIH	4,851
Other Reimbursements	14,537
Reimbursements	19,388

C. Total NCI Obligations: \$2,937,438

Program Structure Fiscal Year 1999

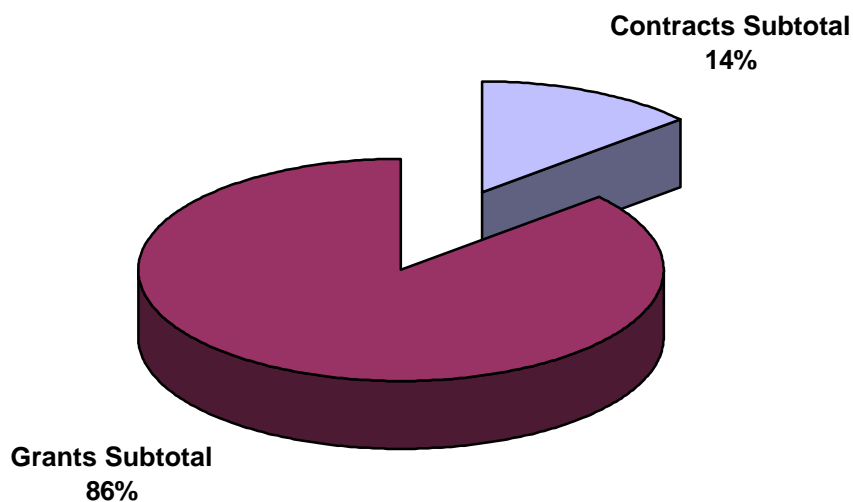
(Dollars in Thousands)



Budget Activity	Amount	Percent
Research:		
Cancer Causation	\$784,970	26.9%
Detection and Diagnosis Research	199,178	6.8%
Treatment Research	818,952	28.1%
Cancer Biology	483,641	16.6%
Subtotal Research	2,286,741	78.4%
Resource Development:		
Cancer Centers Support	197,480	6.8%
Research Manpower Development	109,498	3.8%
Construction	3,143	0.1%
Subtotal Resource Development	310,121	10.6%
Cancer Prevention and Control	321,188	11.0%
Total NCI	2,918,050	100.0%

Extramural Funds Fiscal Year 1999

(Dollars in Thousands)



Mechanism	Amount	Percent
Contracts:		
SBIR Contracts	\$1,269	0.1%
Research and Development Contracts	200,221	8.9%
Cancer Control Contracts	103,174	4.6%
Construction Contracts	2,042	0.1%
Subtotal Contracts	306,706	13.7%
Interagency Agreements	12,643	0.6%
Grants:		
Research Project Grants	1,361,773	60.6%
Cancer Centers/SPORES	195,721	8.7%
Training Activities	57,168	2.5%
Other Research Grants	199,607	8.9%
Cancer Control Grants	110,866	4.9%
Construction Grants	958	0.0%
Subtotal Grants	1,926,093	85.7%
Total Extramural Funds	2,245,442	100.0%
Total Intramural/RMS/Control Inhouse	672,608	
Total NCI	\$2,918,050	

NCI Obligations by Mechanism, Fiscal Year 1999

(Dollars in Thousands)

		Number	Amount	% of Total
Research Project Grants	Non-Competing	2,816	\$936,030	32.1%
	Administrative Supplements		22,831	0.8%
	Competing	1,244	344,995	11.8%
	Subtotal, Without SBIR/STTR Grants	4,060	1,303,856	44.7%
	SBIR/STTR Grants-R41-44	291	57,917	2.0%
	Subtotal, Research Project Grants	4,351	1,361,773	46.7%
Centers & Spores	Cancer Centers Grants-P30	59	153,156	5.2%
	SPOREs-P20/P50	18	42,565	1.5%
	Subtotal, Centers	77	195,721	6.7%
Other Research	Career Program			
	RCDA-K04	6	414	0.0%
	Mentor Patient Oriented RCDA-K23	10	1,310	0.0%
	Clinical Oncology-K12	20	6,833	0.2%
	Physician Investigator-K11	9	823	0.0%
	Preventive Oncology-K07	38	3,618	0.1%
	Clinical Investigator-K08	121	11,460	0.4%
	Temin Awards-K01	41	4,954	0.2%
	Mid-Career Invest. & Patient Orient. Res-K24	13	1,390	0.2%
	Subtotal, Career Program	258	30,802	1.1%
	Cancer Education Program-R25	94	16,761	0.6%
	Clinical Cooperative Groups-U10	155	120,175	4.1%
	Minority Biomedical Support-S06		3,018	0.1%
	Scientific Evaluation-U09/T09	1	5,471	0.2%
	Continuing Education		92	0.0%
	Resource GrantsR24/U24	35	22,270	0.8%
	Conference Grants-R13	62	1,018	0.0%
	Subtotal, Other Research Grants	605	199,607	6.8%
Subtotal, Research Grants		5,033	1,757,101	60.2%
NRSA Fellowships	<i>Trainees:</i>	1,675	57,168	2.0%
R&D Contracts	R&D Contracts	141	212,864	7.3%
	SBIR Contracts	5	1,269	0.0%
	Subtotal, Contracts	146	214,133	7.3%
Intramural Research:	Program		341,570	11.7%
	NIH Management Fund		129,411	4.4%
	Subtotal, Intramural Research	<i>FTEs:</i>	1,440	470,981
RMS	Research Mgmt and Support		93,312	3.2%
	NIH Management Fund		15,621	0.5%
	Subtotal, RMS	<i>FTEs:</i>	695	108,933
Cancer Prevention and Control:	Cancer Control Grants	194	110,866	3.8%
	Cancer Control Contracts	153	103,174	3.5%
	Inhouse		81,016	2.8%
	NIH Management Fund		4,107	0.1%
	General Account		7,571	
	Subtotal, Prevention and Control	<i>FTEs:</i>	258	306,734
Construction		1	3,000	0.1%
Total NCI	<i>FTEs:</i>	2393	2,918,050	100.0%

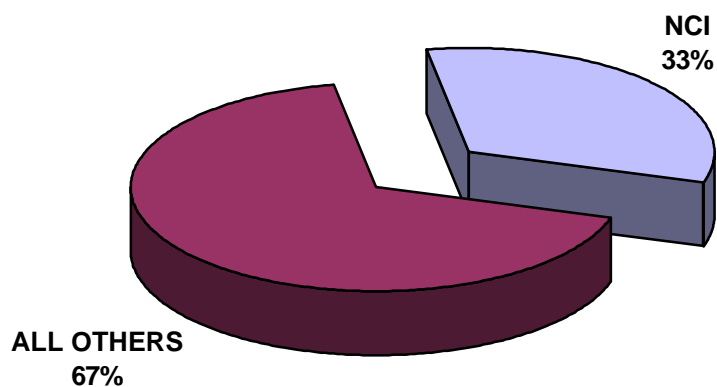
Division Obligations by Mechanisms, Fiscal Year 1999

(Dollars in Thousands)

DBS	DCS	DCEG	DCTD	DCB	DCCPS	DCP	DEA	OD	Research Grants	Program Support
									\$936,030	
									22,831	
									344,995	
									1,303,856	
									57,917	
									1,361,773	
								\$153,156		
								42,565		
								195,721		
								414		
								1,310		
								6,833		
								823		
								3,618		
								11,460		
								4,954		
								1,390		
								30,802		
								16,761		
			\$120,175							
								3,018		
							\$5,471			
									92	
									22,270	
									1,018	
			120,175				5,471	50,581	23,380	
			120,175				5,471	246,302	1,385,153	
								57,168		
		\$8,619	64,603	\$3,903	\$18,662			88,601		\$28,476
			1,269							
		8,619	65,872	3,903	18,662			88,601		28,476
\$143,107	\$108,884	47,058	4,856				1	30,079		7,585
										129,411
143,107	108,884	47,058	4,856				1	30,079		136,996
			18,612	5,738			11,680	43,813		13,469
										15,621
			18,612	5,738			11,680	43,813		29,090
					33,747	\$74,945		2,174		
		1,243	178		24,351	54,816		22,586		
	4,432	5,736	3,002		13,411	11,001	118	43,316		
										4,107
										7,571
	4,432	6,979	3,180		71,509	140,762	118	68,076		11,678
								3,000		
143,107	113,316	62,656	212,695	9,641	90,171	140,762	17,270	537,039	1,385,153	206,240

NIH Management Fund Reimbursement Fiscal Year 1999

(Dollars in Thousands)



DISTRIBUTION OF NCI PAYMENT	Amount	Share of NCI
Clinical Center	\$88,758	59.5%
Center for Scientific Review	4,499	3.0%
Center for Information Technology	7,641	5.1%
GSA Rental Payments for Space	10,390	7.0%
Other Research Services	33,771	22.6%
Other OD	4,080	2.7%
Total, NCI Payment	149,139	100.0%
Other NIH Institutes Management Fund	308,791	
NIH Management Fund	\$457,930	

The Management Fund provides for the financing of certain common research and administrative support activities which are required in the operations of NIH:

Clinical Center: Admissions and followup, anesthesiology, diagnostic x-ray, nuclear medicine, clinical pathology, blood bank, rehabilitation medicine, pharmacy, medical records, nursing services, patient nutrition service, housekeeping services, laundry, and social work

Center for Scientific Review: Initial scientific review of applications, assignment of research grant applications to institutes

Center for Information Technology: Research and development program in which concepts and methods of computer science are applied to biomedical problems

GSA Rental Payments for Space: Building rental including utilities and guard services

Other Research Services: Procurement, safety, engineering, biomedical engineering, veterinary resources, and library

Special Sources of Funds

(Dollars in Thousands)

CRADAs

As a result of the Federal Technology Transfer Act of 1986, government laboratories are authorized to enter into Cooperative Research and Development Agreements (CRADAs) with private sector entities. Licensing agreements are usually incorporated into the CRADA document which addresses patent rights attributable to research supported under the CRADA.

Fiscal Year	Carryover from Prior Year	Collections	Obligations
1992	\$101	\$1,627	\$466
1993	1,262	2,509	1,582
1994	2,189	2,248	1,917
1995	2,570	2,653	1,478
1996	3,745	2,229	1,394
1997	4,580	13,434	6,631
1998	11,383	5,351	7,266
1999	9,468	3,646	4,707
2000	8,407		

Royalty Income

NCI retains a portion of the royalty income generated by the patents related to NCI-funded research. A major portion of this royalty income is used to reward employees of the laboratory, further scientific exchange and for education and training in accordance with the terms of the Act. Receipts are also used to support costs associated with processing and collecting royalty income and for technology transfer efforts in NCI and NIH.

Years	Collections*	Inventor Payments	Other
1991/1992	\$2,084	\$431	\$1,653
1992/1993	2,105	451	1,654
1993/1994	5,700	983	4,717
1994/1995	11,244	1,235	10,009
1995/1996	9,031	953	8,078
1996/1997	13,598	2,175	11,423
1997/1998	9,814	2,321	7,493
1998/1999	22,716	5,084	17,632
1999/2000	21,160	4,695	16,465

* Does not include assessments by NIH.

Breast Cancer Emergency Supplement – Flood Money

The Emergency Supplement Appropriations Act (PL 105-18) of June 1997, appropriated \$15,000,000 to the Department of Health and Human Services to support high priority health research in the area of environmental influences on breast cancer. \$12,000,000 of the funds were transferred to NCI to support breast cancer research. In FY 1999, NCI obligated \$9,748,403 with the remaining \$2,251,597 to be used in FY 2000.

Stamp Out Breast Cancer

The Stamp Out Breast Cancer Act was established in August 1997 to allow postal customers to contribute to funding for breast cancer research through their voluntary purchases of special rate postage stamps from U.S. Postal Service. The Act required the USPS to transfer 70% to NIH and 30% to the DOD of the funds collected above the postage costs and administrative costs. As of March 2000, NCI has received \$6,006,000. NCI will use the funds to fund research projects directed towards breast cancer, specifically, those grants in response to the NCI RFA for "Insight Awards to Stamp Out Breast Cancer."

Research Funding for Various Research Areas

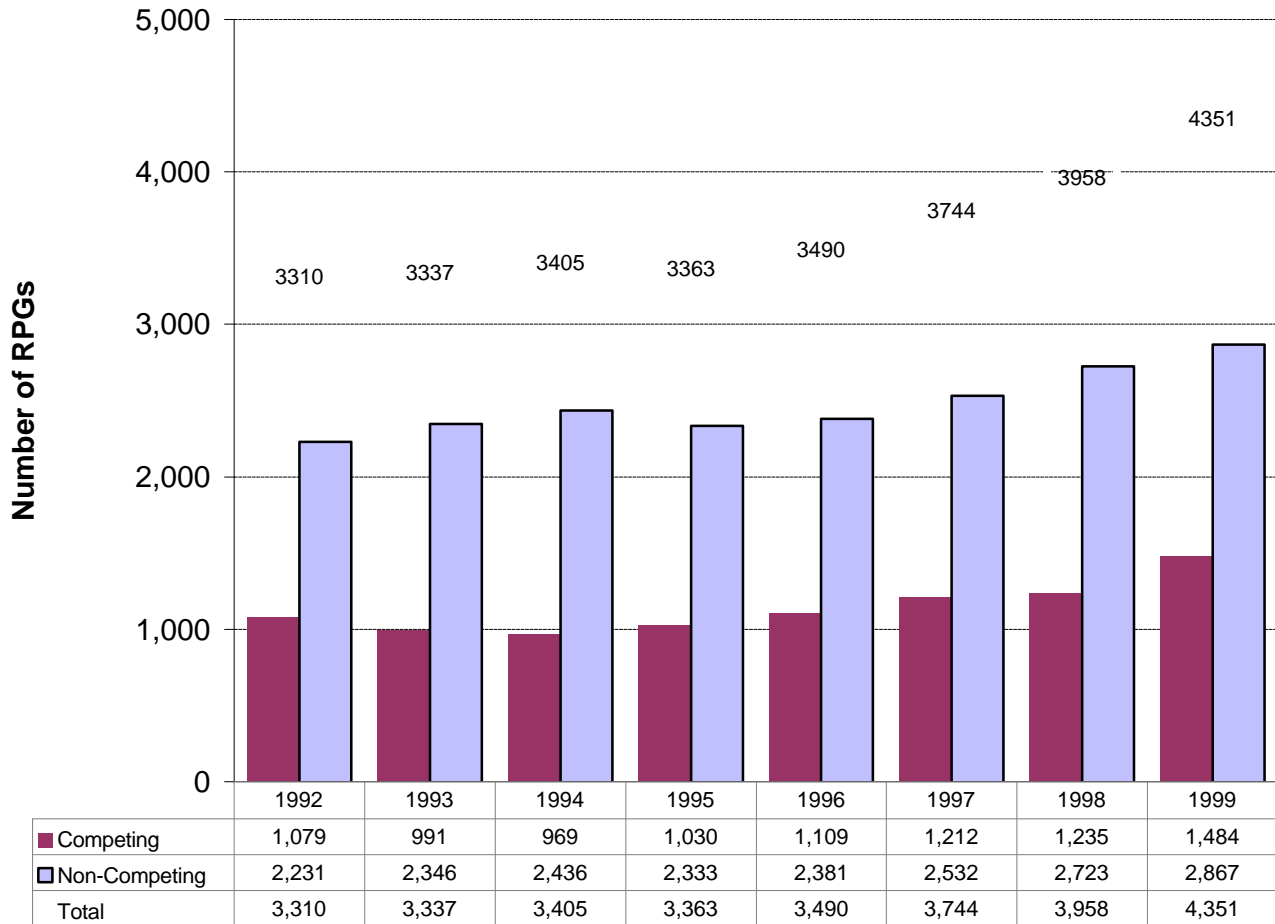
(Dollars in Millions)

The National Cancer Institute reports how appropriated funds are spent in a number of different categories or classifications including specific cancer sites, cancer types, diseases related to cancer, as well as types of research mechanisms. The table below represents funding levels for frequently requested research areas. These research areas do not represent the entire NCI research portfolio. Funding for these areas can overlap and do not add to the total NCI budget. For example, dollars for a clinical trial on breast cancer research would be included in both the Breast Cancer and the Clinical Trials lines in the table below. Similarly, a basic cancer research project may be relevant to cervical, uterine and ovarian cancers and relevant funding would be included in the figures for all three sites.

	1992	1993	1994	1995	1996	1997	1998	1999
AIDS	\$165.7	\$173.0	\$213.0	\$217.4	\$225.4	\$224.7	\$225.9	\$239.2
Brain & ONS	32.5	40.5	41.7	43.0	41.6	46.1	54.3	63.5
Breast Cancer	145.0	211.5	267.6	308.7	317.5	332.0	348.6	387.2
Cancer Prev & Control	114.9	112.6	153.9	205.0	226.0	231.9	254.7	306.7
Cervical	30.7	42.2	42.3	45.5	51.6	55.8	58.0	66.3
Clinical Trials	314.5	326.8	339.0	384.8	393.8	417.6	478.1	529.0
Colorectal	69.2	74.2	83.1	96.5	98.0	103.2	121.0	152.9
Hodgkins	6.7	6.8	6.7	7.8	8.0	8.1	8.3	8.2
Leukemia	64.6	74.2	77.7	77.5	79.3	91.2	103.4	122.2
Liver Cancer	30.7	37.5	37.9	38.0	31.4	35.3	38.1	39.8
Lung Cancer	76.3	92.9	106.4	113.9	119.4	132.4	139.8	151.0
Melanoma	24.8	29.8	33.4	31.8	36.0	43.3	50.3	60.2
Non Hodgkin's	33.4	40.1	38.7	39.7	49.9	52.7	57.1	66.2
Ovarian	20.7	32.5	33.5	33.9	36.5	41.7	40.8	56.5
Prostate	31.4	51.1	56.1	64.3	71.7	82.3	86.9	135.7
Uterine	7.8	6.3	7.2	7.7	8.1	8.1	12.2	13.8

Research Project Grants Number of Awards Fiscal Years 1992-1999

Includes Small Business Innovation Research Awards



RPGs Requested and Awarded Fiscal Years 1992-1999

(Dollars in Thousands)

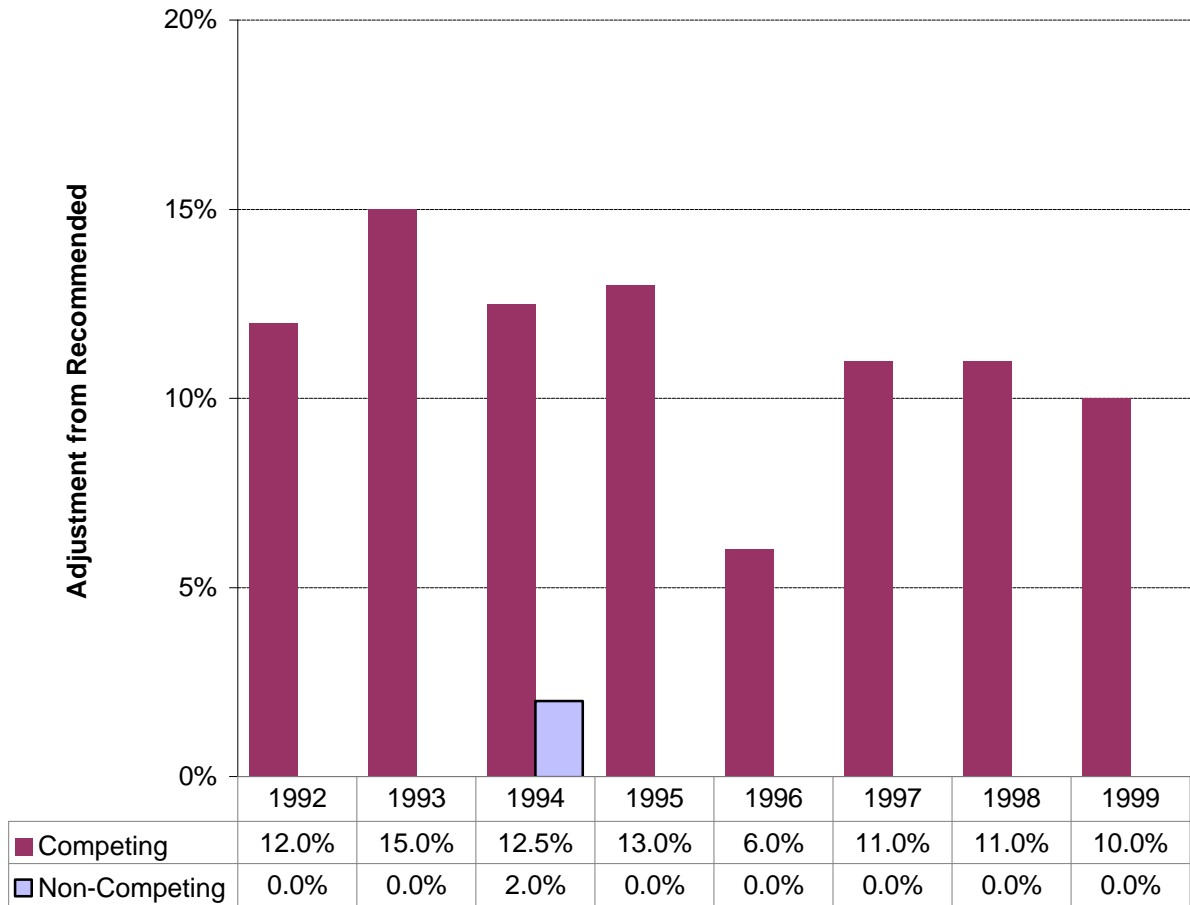
Fiscal Year	Type	Requested		Awarded		Success Rate	
		No.	Amt.	No.	Amt.		
1992	Competing	New	2,508	\$612,369	664	\$119,091	32.2%
		Renewal	815	332,428	398	133,413	
		Supplement	23	3,704	17	1,347	
	Subtotal	3,346	948,501	1,079	253,851		
	Non-Competing				2,231	620,006	
	Total				3,310	873,857	
1993	Competing	New	3,173	\$746,912	644	\$114,227	23.9%
		Renewal	891	328,657	340	107,949	
		Supplement	75	8,554	7	1,698	
	Subtotal	4,139	1,084,123	991	223,874		
	Non-Competing				2,346	692,436	
	Total				3,337	916,310	
1994	Competing	New	3,643	\$787,824	657	\$118,403	21.1%
		Renewal	935	342,068	308	110,723	
		Supplement	20	3,311	4	733	
	Subtotal	4,598	1,133,203	969	229,859		
	Non-Competing				2,436	704,665	
	Total				3,405	934,524	
1995	Competing	New	3,345	\$789,560	645	\$119,760	23.3%
		Renewal	1,048	403,577	375	127,065	
		Supplement	21	7,502	10	1,537	
	Subtotal	4,414	1,200,639	1,030	248,362		
	Non-Competing				2,333	704,374	
	Total				3,363	952,736	
1996	Competing	New	3,071	\$733,313	682	142,249	27.5%
		Renewal	947	367,270	422	139,995	
		Supplement	10	1,921	5	694	
	Subtotal	4,028	1,102,504	1,109	282,938		
	Non-Competing				2,381	751,592	
	Total				3,490	1,034,530	
1997	Competing	New	3,328	\$828,653	815	160,763	29.2%
		Renewal	815	354,054	392	146,912	
		Supplement	14	3,136	5	755	
	Subtotal	4,157	1,185,843	1,212	308,430		
	Non-Competing				2,532	814,885	
	Total				3,744	1,123,315	
1998	Competing	New	3,054	\$797,477	847	189,746	32.8%
		Renewal	697	283,562	382	137,764	
		Supplement	18	4,299	6	1,421	
	Subtotal	3,769	1,085,338	1,235	328,931		
	Non-Competing				2,723	901,845	
	Total				3,958	1,230,776	
1999	Competing	New	3,905	\$1,091,110	1,088	237,187	31.8%
		Renewal	757	340,075	390	145,623	
		Supplement	12	3,882	6	2,353	
	Subtotal	4,674	1,435,067	1,484	385,163		
	Non-Competing				2,867	976,610	
	Total				4,351	1,361,773	

Includes Small Business Innovation Awards.

Success rate is the number of awarded grants divided by the number of awards requested.

The requested data excludes applications not recommended for further review.

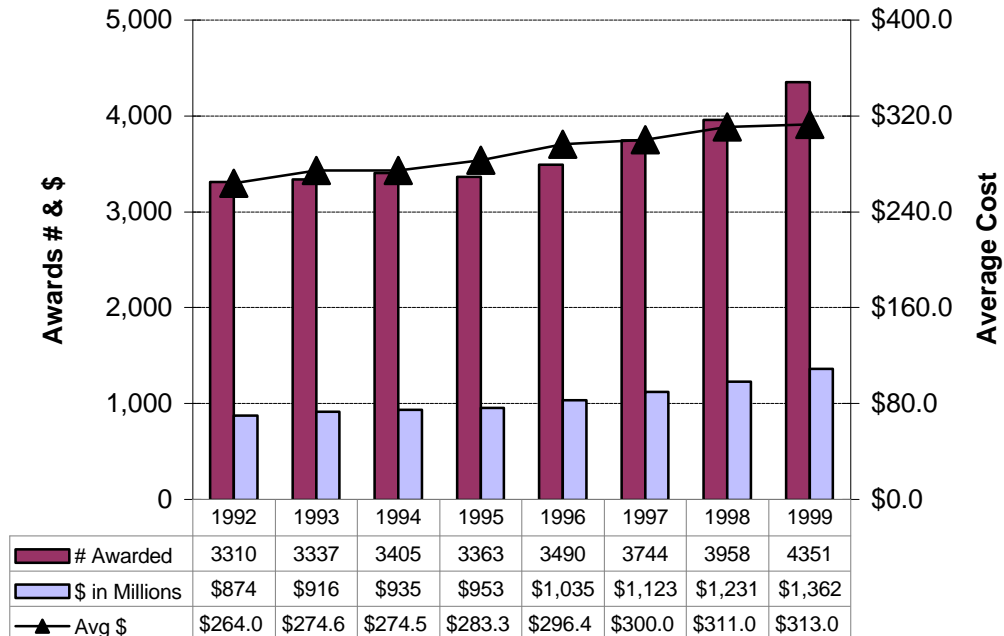
RPG Adjustments from Recommended Levels Fiscal Years 1992-1999



RPG Awards by Activity Code Fiscal Years 1992-1999

(Dollars in Thousands; activity code descriptions on next page)

		R01	P01	R35	R37	R29	RFA	U01	R03	R21	R33	R15	R55	R41/42 /43/44	TOTAL
1992	#	2,050	183	76	162	309	208	123						199	3,310
	\$	424,954	205,330	59,878	47,414	29,726	45,107	44,171						17,277	873,857
1993	#	1,955	176	75	166	291	282	171					6	215	3,337
	\$	430,203	202,852	61,337	51,633	29,053	63,267	56,199					1,365	20,401	916,310
1994	#	1,914	163	72	154	312	319	232	46	5			9	179	3,405
	\$	434,612	184,852	61,369	48,699	32,610	70,879	75,444	2,393	353			540	22,773	934,524
1995	#	1,808	149	67	142	342	314	253	44	34			19	191	3,363
	\$	439,122	171,524	63,032	45,125	36,014	72,409	81,771	2,488	7,640			1,126	32,485	952,736
1996	#	1,964	144	65	110	388	268	226	85	46			14	180	3,490
	\$	504,398	182,609	62,550	37,070	41,170	66,102	88,962	5,443	9,599			984	35,643	1,034,530
1997	#	2,194	149	63	90	446	195	169	101	63			21	253	3,744
	\$	583,116	202,317	62,892	30,950	47,413	48,148	81,193	6,411	12,269			1,450	47,156	1,123,315
1998	#	2,454	160	57	75	485	132	157	97	76		2	14	249	3,958
	\$	672,873	228,854	57,712	27,212	52,136	42,750	79,370	6,069	11,782		127	684	51,207	1,230,776
1999	#	2,796	169	38	71	413	261	31	108	159	6	2	6	291	4,351
	\$	775,961	249,583	38,585	27,377	45,361	112,868	21,319	7,355	22,548	2,079	200	620	57,917	1,361,773



Activity Code Descriptions

R01	Research Project (Traditional) discrete, specified, circumscribed project to be performed by the named investigator(s) in an area representing his/her specified interest and competencies.
P01	Research Program Projects broadly based, multidisciplinary, often long-term, research program which has a specific major objective or a basic theme. A program project is directed toward a range of problems having a central research focus in contrast to the usually narrower thrust of the traditional research project.
R35	Outstanding Investigator Grants long-term support to an experienced investigator with an outstanding record of research productivity. This support is intended to encourage investigators to embark on long-term projects of unusual potential in a categorical program area.
R37	Method to Extend Research in Time (MERIT) Award long-term grant support to investigators whose research competence and productivity are distinctly superior and who are highly likely to continue to perform in an outstanding manner. Investigators may not apply for a MERIT award. Program staff and/or members of the cognizant National Advisory Council/Board will identify candidates for the MERIT award during the course of review of competing research grant applications prepared and submitted in accordance with regular PHS requirements.
R29	First Independent Research Support and Transition (FIRST) Award sufficient initial period of research support for newly independent biomedical investigators to develop their research capabilities and demonstrate the merit of their research ideas.
RFA	Request for Applications A formal statement inviting grant or cooperative agreement applications in a well-defined scientific area to accomplish specific program purposes and indicates the amount of funds set aside for the competition and/or the estimated number of awards to be made.
U01	Research Project (Cooperative Agreement) discrete, specified, circumscribed project to be performed by the named investigator(s) in an area representing his/her specific interest and competencies.
R03	Small Grants research support specifically limited in time and amount for studies in categorical program areas. Small grants provide flexibility for initiating studies, which are generally for preliminary short-term projects and are non-renewable.
R21	Exploratory/Developmental Grants Phase I development of new research activities in categorical program areas. Support generally is restricted in level of support and in time.
R33	Exploratory/Developmental Grants Phase II development of new research activities in categorical program areas. Support generally is restricted in level of support and in time.
R15	Academic Research Enhancement Award (AREA) to domestic health professional schools and other institutions offering baccalaureate or advanced degrees in health sciences, except those that have received NIH research grants and/or cooperative agreements. Supports feasibility studies and other small-scale research projects.
R55	Shannon Awards limited support to scientists whose research applications fall short of the cutoff for funding yet are at the "margin of excellence" whereby the perceived quality of the grant is statistically indistinguishable from grants that are funded.
R41	Small Business Technology Transfer (STTR) Grants - Phase I establish the technical merit and feasibility of R&D ideas which may ultimately lead to a commercial product(s) or service(s).
R42	Small Business Technology Transfer (STTR) Grants - Phase II establish the technical merit and feasibility of R&D ideas which may ultimately lead to a commercial product(s) or service(s).
R43	Small Business Innovation Research (SBIR) Grants - Phase I projects limited in time and amount, to establish the technical merit and feasibility of R&D ideas which may ultimately lead to a commercial product(s) or service(s).
R44	Small Business Innovation Research (SBIR) Grants - Phase II in-depth development of R&D ideas whose feasibility has been established in Phase I and which are likely to result in commercial products or services.

Cancer Centers by State (P30 Core Grants)

(Dollars in thousands)

State	Grantee Institution	Type	Amount
Alabama	Univ of Alabama at Birmingham	Comprehensive	\$4,681
Arizona	Univ of Arizona	Comprehensive	2,551
California	Beckman Research Institute/City of Hope	Comprehensive	2,095
	Burnham Institute	Lab/Basic	2,731
	Salk Institute for Biological Sciences	Lab/Basic	2,381
	Univ of California at Los Angeles	Comprehensive	3,093
	Univ of California at San Diego	Clinical	1,060
	Univ of California, Irvine	Comprehensive	1,997
	Univ of Southern California Norris	Comprehensive	4,133
	Univ of California San Francisco	Comprehensive	1,257
Colorado	Univ of Colorado Health Sciences Center	Comprehensive	2,792
Connecticut	Yale Univ	Comprehensive	2,220
District of Columbia	Georgetown Univ	Comprehensive	2,803
Florida	Univ of South Florida	Clinical	1,451
Hawaii	Univ of Hawaii at Manoa	Clinical	762
Illinois	Northwestern Univ-Robert H. Lurie Cancer Center	Comprehensive	1,683
	Univ of Chicago	Comprehensive	2,573
Indiana	Indiana Univ-Purdue Univ at Indianapolis	Clinical	1,199
	Purdue Univ West Lafayette	Lab/Basic	1,055
Maine	Jackson Laboratory	Lab/Basic	1,856
Maryland	Johns Hopkins Univ	Comprehensive	4,155
Massachusetts	Dana-Farber Cancer Institute	Comprehensive	3,661
	Massachusetts Institute of Technology	Lab/Basic	2,000
Michigan	Univ of Michigan at Ann Arbor	Comprehensive	3,001
	Karmanos Cancer Institute/Wayne State Univ	Comprehensive	702
Minnesota	Mayo Foundation	Clinical	3,068
	Univ of Minnesota Twin Cities	Comprehensive	1,429
Nebraska	Univ of Nebraska Medical Center	Lab/Basic	1,054
New Hampshire	Dartmouth College	Comprehensive	1,764
New Jersey	Robert Wood Johnson Medical School	Clinical	1,146
New York	Cold Spring Harbor Laboratory	Lab/Basic	2,864
	Columbia Univ New York	Comprehensive	3,669
	Kaplan Cancer Center/NYU	Comprehensive	1,477
	Roswell Park Memorial Institute	Comprehensive	2,219
	Memorial Sloan-Kettering Institute	Comprehensive	5,818
	American Health Foundation	Lab/Basic	2,329
	Albert Einstein College of Medicine/Yeshiva Univ	Comprehensive	4,031
North Carolina	Duke Univ	Comprehensive	5,399
	Univ of North Carolina Chapel Hill	Comprehensive	2,057
	Wake Forest Univ/Bowman Gray Sch. of Medicine	Comprehensive	854
Ohio	Case Western Reserve Univ	Comprehensive	1,979
	Ohio State Univ	Comprehensive	1,134
Oregon	Oregon Health Sciences Univ	Clinical	1,136
Pennsylvania	Fox Chase Cancer Center	Comprehensive	7,315
	Thomas Jefferson University	Clinical	604
	Univ of Pennsylvania	Comprehensive	3,195
	Univ of Pittsburgh	Comprehensive	3,862
	Wistar Institute of Anatomy and Biology	Lab/Basic	2,087
Tennessee	St. Jude Children's Research Hospital	Clinical	3,863
	Vanderbilt Univ	Clinical	3,042
Texas	San Antonio Cancer Institute	Comprehensive	2,059
	M.D. Anderson Cancer Center/Univ. of Texas	Comprehensive	5,568
Utah	Huntsman Cancer Institute/Univ of Utah	Clinical	1,270
Vermont	Univ of Vermont	Comprehensive	781
Virginia	Univ of Virginia/Health Sciences Center	Clinical	1,895
	Medical College of Virginia/VCU/Massey Cancer Center	Clinical	550
Washington	Fred Hutchinson Cancer Research Center	Comprehensive	6,757
Wisconsin	Univ of Wisconsin Madison	Comprehensive	3,017
	McArdle Laboratory for Cancer Research/Univ. of Wisconsin	Lab/Basic	2,380
	Total P30s	59	149,566
	Planning Grants		774
	NCI Co-funded Awards with other NIH Institutes		2,816

Total Cancer Centers

153,156

Specialized Programs of Research Excellence

(Dollars in thousands)

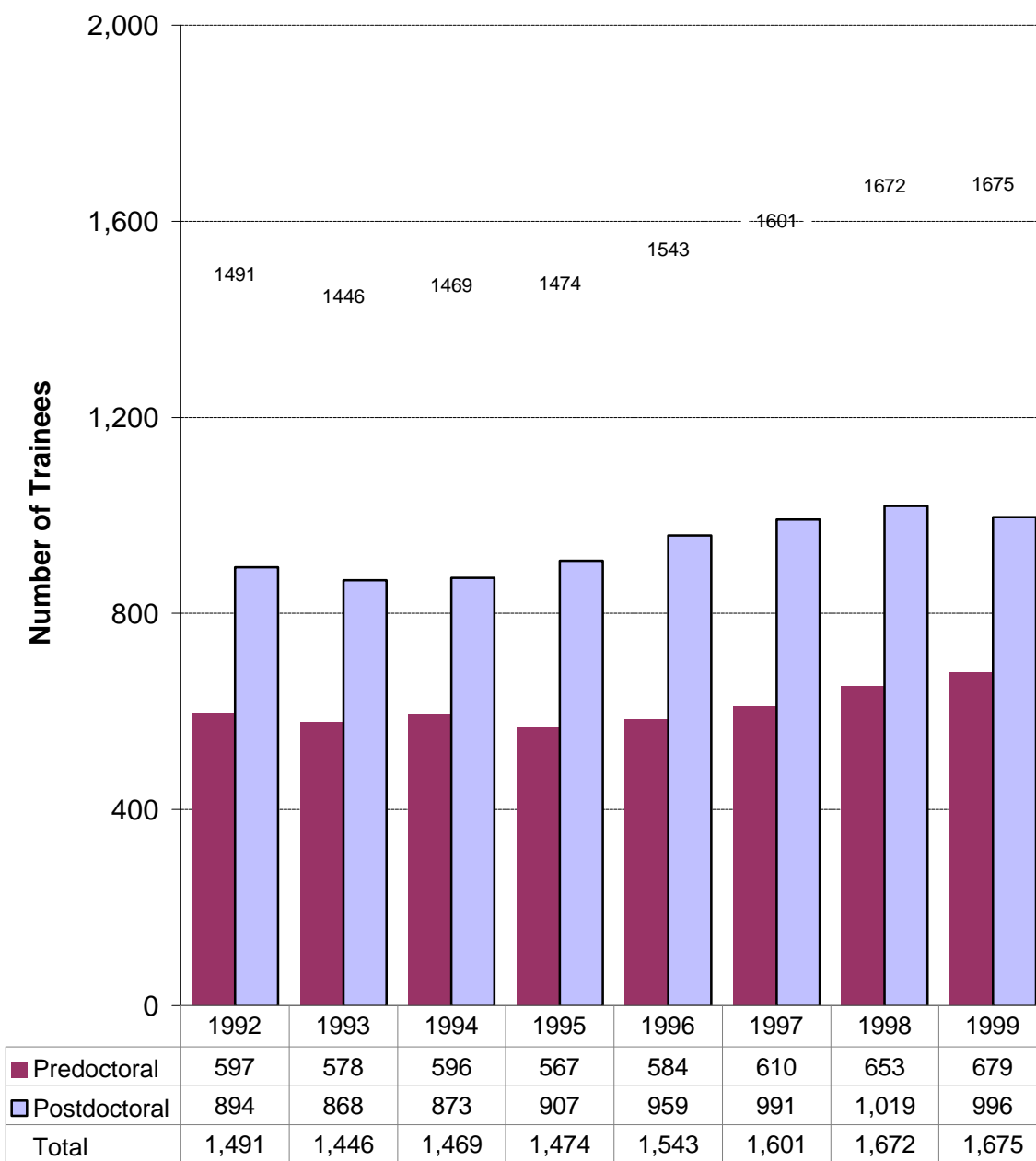
In 1992, the NCI established the Specialized Programs of Research Excellence (SPOREs). This program promotes interdisciplinary research and speeds the bidirectional exchange between basic and clinical science to move basic research findings from the laboratory to applied settings involving patients and populations. The goal of the SPORE program is to bring to clinical care settings novel ideas that have the potential to reduce cancer incidence and mortality, and to improve survival, and the quality of life.

Laboratory and clinical scientists work collaboratively to plan, design and implement research programs that impact on cancer prevention, detection, diagnosis, treatment and control. To facilitate this research, each SPORE develops and maintains specialized resources that benefit all scientist working on the specific cancer site, as well as SPORE scientists. An additional SPORE element is a career development program that recruits scientists both within and outside the SPORE institution to enlarge the cadre of laboratory and clinical scientists dedicated to translational research on human cancer. SPOREs meet annually to share data, assess research progress, identify new research opportunities and establish research priorities.

<u>Mechanism</u>	<u>Site</u>	<u>No.</u>	<u>Amount</u>
SPOREs	Breast	6	\$12,885
	Gastrointestinal	2	4,225
	Lung	3	7,074
	Prostate	3	8,351
	Ovarian	4	5,939
	<u>Total P50</u>	18	38,474
Planning	Total P20	2	617
			0
Supplement	DNA Array		1,243
	Minority Biomedical		215
	<u>Total Supplement</u>		1,458
			0
Co-funded	Urology with NIDDK	3	514
	Oral with NIDCR	3	1,100
	Genome with NHGRI	1	400
	<u>Total Cofunded</u>	7	2,014
<u>Total</u>			42,564

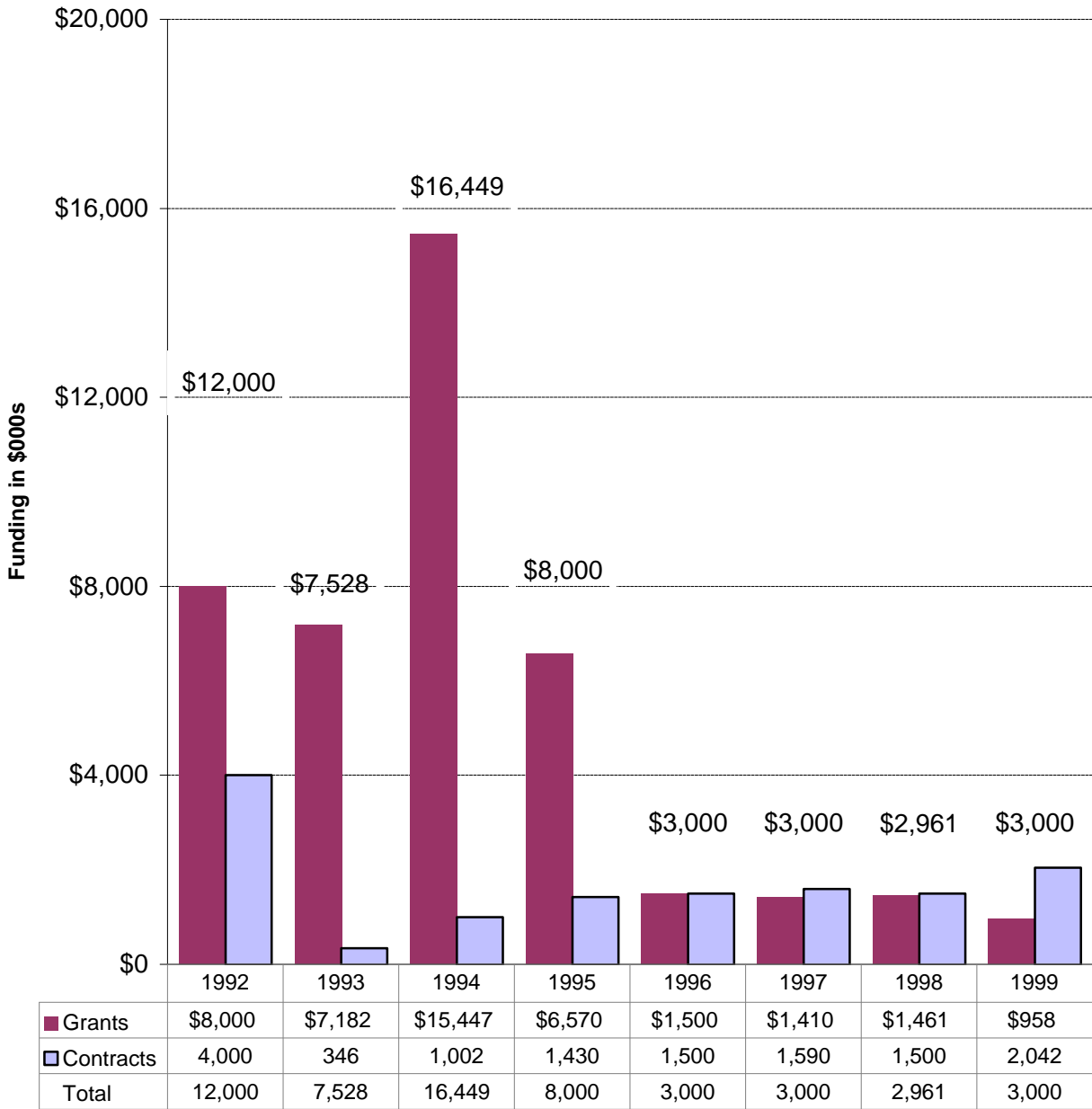
NRSA Predoctoral and Postdoctoral Trainees Fiscal Years 1992-1999

(Full Time Trainee Positions)



Construction/Renovation Funding Fiscal Years 1992-1999

(Dollars in Thousands)



Grant and Contract Awards by State Fiscal Year 1999

(Dollars in thousands)

State	Grants		Contracts		Total NCI		State
	No	Amount	No	Amount	No	Amount	
Alabama	63	\$23,705	12	\$6,380	75	\$30,085	Alabama
Alaska							Alaska
Arizona	49	23,252	2	237	51	23,489	Arizona
Arkansas	11	4,271			11	4,271	Arkansas
California	649	274,633	24	98,101	673	372,734	California
Colorado	80	23,600	3	2,632	83	26,232	Colorado
Connecticut	72	23,677	2	2,912	74	26,589	Connecticut
Delaware	3	928			3	928	Delaware
District of Columbia	69	30,033	7	3,687	76	33,720	District of Columbia
Florida	78	19,765	1	1,088	79	20,853	Florida
Georgia	39	10,682	2	1,788	41	12,470	Georgia
Hawaii	17	7,317	3	2,964	20	10,282	Hawaii
Idaho							Idaho
Illinois	165	66,359	17	4,579	182	70,938	Illinois
Indiana	43	11,776			43	11,776	Indiana
Iowa	31	6,750	1	4,951	32	11,700	Iowa
Kansas	15	3,675	4	2,425	19	6,100	Kansas
Kentucky	31	5,692	2	1,253	33	6,945	Kentucky
Louisiana	31	6,208			31	6,208	Louisiana
Maine	6	3,079			6	3,079	Maine
Maryland	146	67,478	88	115,203	234	182,681	Maryland
Massachusetts	459	183,948	5	1,365	464	185,313	Massachusetts
Michigan	171	51,829	8	9,756	179	61,586	Michigan
Minnesota	120	46,344	5	3,529	125	49,873	Minnesota
Mississippi	3	289			3	289	Mississippi
Missouri	82	23,992	5	2,921	87	26,913	Missouri
Montana	5	1,025			5	1,025	Montana
Nebraska	28	9,871			28	9,871	Nebraska
Nevada	3	713			3	713	Nevada
New Hampshire	33	13,271			33	13,271	New Hampshire
New Jersey	85	22,886	3	2,214	88	25,100	New Jersey
New Mexico	19	5,032	2	2,659	21	7,690	New Mexico
New York	485	180,949	15	7,869	500	188,818	New York
North Carolina	171	68,898	8	4,918	179	73,816	North Carolina
North Dakota	4	665			4	665	North Dakota
Ohio	153	44,119	8	4,224	161	48,343	Ohio
Oklahoma	11	2,066		519	11	2,585	Oklahoma
Oregon	46	11,641	1	409	47	12,050	Oregon
Pennsylvania	368	153,992	7	7,325	375	161,318	Pennsylvania
Rhode Island	34	10,053			34	10,053	Rhode Island
South Carolina	35	7,512			35	7,512	South Carolina
South Dakota	1	403			1	403	South Dakota
Tennessee	123	40,783			123	40,783	Tennessee
Texas	356	138,763	7	3,344	363	142,107	Texas
Utah	33	12,491	3	2,996	36	15,487	Utah
Vermont	15	4,452	1	109	16	4,561	Vermont
Virginia	72	30,384	1	813	73	31,197	Virginia
Washington	199	98,030	4	6,718	203	104,747	Washington
West Virginia	3	611	1	894	4	1,504	West Virginia
Wisconsin	87	30,758	5	3,924	92	34,682	Wisconsin
Wyoming							Wyoming
Total	4,802	1,808,649	257	314,709	5,059	2,123,358	Total
Guam		72				72	Guam
Puerto Rico	1	386			1	386	Puerto Rico
Total	4,803	1,809,107	257	314,709	5,060	2,123,816	Total

Excludes Manpower Development and foreign grants

Grant and Contract Awards by Country Fiscal Year 1999

(Dollars in Thousands)

Country	Grant		Contract		Total NCI		Country
	No	Amount	No	Amount	No	Amount	
Australia	8	\$2,052			8	\$2,052	Australia
Belgium	1	402			1	402	Belgium
Canada	28	5,202	4	\$183	32	5,385	Canada
China			8	766	8	766	China
Costa Rica			1	972	1	972	Costa Rica
Denmark	1	852	2	133	3	985	Denmark
Finland			2	500	2	500	Finland
France	4	937			4	937	France
Germany	1	85			1	85	Germany
India	1	58			1	58	India
Israel	4	448			4	448	Israel
Italy	2	537	4	527	6	1,064	Italy
Jamaica			1	795	1	795	Jamaica
Japan	1	300	1	136	2	436	Japan
Mexico	1	65	1		2	65	Mexico
Netherlands	1	70	1	61	2	131	Netherlands
Poland			1	411	1	411	Poland
Russia			1	100	1	100	Russia
South Africa	1	181			1	181	South Africa
Sweden	3	394			3	394	Sweden
Switzerland			2	75	2	75	Switzerland
Trinidad/Tobago				426		426	Trinidad/Tobago
United Kingdom	6	647			6	647	United Kingdom
Total Foreign	63	12,230	29	5,085	92	17,315	

Institutions Receiving More than \$15 Million in NCI Support

(Dollars in thousands)

State	Institution	Grants	Contracts	Construction	Total NCI
Alabama	Univ of Alabama System	\$21,713	\$3,863		\$25,576
Arizona	Univ of Arizona	22,193	237		22,429
California	Science Applications International Corporation		77,033		77,033
	Scripps Research Institute	15,495			15,495
	Stanford Univ	33,355			33,355
	Univ of California	119,312	4,807		124,119
	Univ of Southern California	24,778	4,793		29,571
Colorado	Univ of Colorado System	13,473	1,804		15,277
Connecticut	Yale Univ	22,787	1,123		23,910
Dist of Columbia	Georgetown Univ	18,194	2,213		20,406
Florida	State Univ System of Florida	13,506			13,506
Illinois	Northwestern Univ	19,251	422		19,673
	Univ of Chicago	23,888			23,888
Maryland	Johns Hopkins Univ	46,467	4,723		51,190
Massachusetts	Brigham & Women's Hospital	22,761			22,761
	Dana- Faber Cancer Institute	36,233			36,233
	Harvard Univ	35,063			35,063
	Mass General Hospital	22,829			22,829
Michigan	Univ of Michigan	32,588	1,764		34,352
	Wayne State Univ	11,060	4,268		15,327
Minnesota	Mayo Foundation	23,742	210		23,952
	Univ of Minnesota	22,524	3,319		25,844
Missouri	Washington Univ	18,343	1,715		20,057
New York	Columbia Univ	22,364			22,364
	Memorial Sloan-Kettering Cancer Center	42,015	1,329		43,344
	New York Univ	16,352	187		16,539
	Roswell Park Cancer Institute	17,574	1,198		18,771
	Yeshiva Univ	17,082			17,082
	Duke Univ	35,678	942		36,620
North Carolina	Univ of North Carolina System	28,552			28,552
Ohio	Case Western Reserve Univ	18,408	2,375		20,783
Pennsylvania	Fox Chase Cancer Center	27,410	2,733		30,143
	Thomas Jefferson Univ	17,257			17,257
	Univ of Pennsylvania	35,451	875		36,327
	Univ of Pittsburgh	30,983	2,454	\$958	34,395
Tennessee	St. Jude Children's Res. Hosp	18,418			18,418
	Vanderbilt Univ	20,350			20,350
Texas	Baylor College of Medicine	27,942			27,942
	CTRC Research Foundation	20,103			20,103
	Univ of Texas System	90,440	3,256		93,696
Utah	Utah State Higher Ed. System	12,701	2,996		15,697
Washington	Fred Hutchinson Cancer Research Center	64,939	5,644		70,583
	Univ of Washington	19,257	1,074		20,331
Wisconsin	Univ of Wisconsin System	26,665	1,838		28,502
	Total	1,229,496	139,195	958	1,369,649

Appropriations of the NCI 1938-2000

(In Whole Dollars)

1938 - 1969	\$1,875,699,720	
1970 - 1979	6,073,870,500	
1980.....	1,000,000,000	authorized under a Continuing Resolution.
1981.....	989,355,000	reflects rescission of \$11,975,000.
1982.....	986,617,000	Continuing resolution. Includes \$47,988,000 transferred to Natl Inst of Environmental Health Sciences for the Natl Toxicology Program.
1983.....	987,642,000	Continuing Resolution and Supplemental Appropriation Bill.
1984.....	1,081,581,000	Includes \$23,861,000 for training funds provided by a Continuing Resolution and \$4,278,000 in a Supplemental Appropriation Bill.
1985.....	1,183,806,000	
1986.....	1,264,159,000	Includes \$6,000,000 from a Supplemental Appropriation Bill.
1987.....	1,402,837,000	Omnibus Continuing Resolution.
1988.....	1,469,327,000	Omnibus Continuing Resolution.
1989.....	1,593,536,000	prior to reductions in GP 517 (-\$19,122,000) and GP 215 (-\$2,535,000) and PL 100-436, Section 213, (-\$1,013,000).
1980 - 1989	11,958,860,000	
1990.....	1,664,000,000	prior to reductions in PL 101-166 (-\$6,839,000) and PL101-239 (-\$22,829,000).
1991.....	1,766,324,000	prior to reductions in PL 101-517 (-\$8,972,000 for salary and expense reduction; -\$42,568,000 for across-the-board reduction).
1992.....	1,989,278,000	prior to reductions in PL 102-170 (-\$21,475,000 for salary and expense reduction; -\$1,262,000 for travel reduction; \$15,000,000 transferred to other institutes for cancer research).
1993.....	2,007,483,000	prior to reductions in PL 102-294 (-\$16,060,000 for .8% reduction to all line items, -\$9,933,000 for S&E reduction, -\$139,000 for consultant services reduction).
1994.....	2,082,267,000	prior to reduction in PL103-211 (-\$5,885,000 administration reduction).
1995.....	2,135,119,000	prior to reductions in PL 103-211 (-\$1,883,000 for Procurement reduction; -\$116,000 for SLUC reduction; -\$1,052,000 for Bonus Pay reduction). Includes \$218,199,000 of AIDS funding.
1996.....	2,251,084,000	Includes \$225,790,000 of AIDS funding.
1997.....	2,382,532,000	Includes \$224,983,000 of AIDS funding.
1998.....	2,547,314,000	prior to reductions in PL 105-119 (-\$4,755,000 via the Secretary's 1% transfer authority). Includes \$8,699,000 transferred via the NIH Director's 1% transfer authority, \$41,000 transfer from U.S. Dept of State in PL 105-119, and \$226,414,000 of AIDS funding.
1999.....	2,927,187,000	prior to reductions in PL 106-51 (-\$1,940,000 for travel and admin expenses). Includes -\$931,000 transferred via the Secretary 1% transfer authority, and -\$6,259,000 transferred via the NIH Director's 1% transfer authority, and \$239,190,000 of AIDS funding.
1990 - 1999	21,752,588,000	
2000.....	3,332,317,000	Appropriation prior to reductions in PL 106-113 (-\$17,763,000 for across the board reduction). Includes \$245,804,000 of AIDS funding.
1938-2000	\$44,993,335,220	

By-Pass Budget Requests

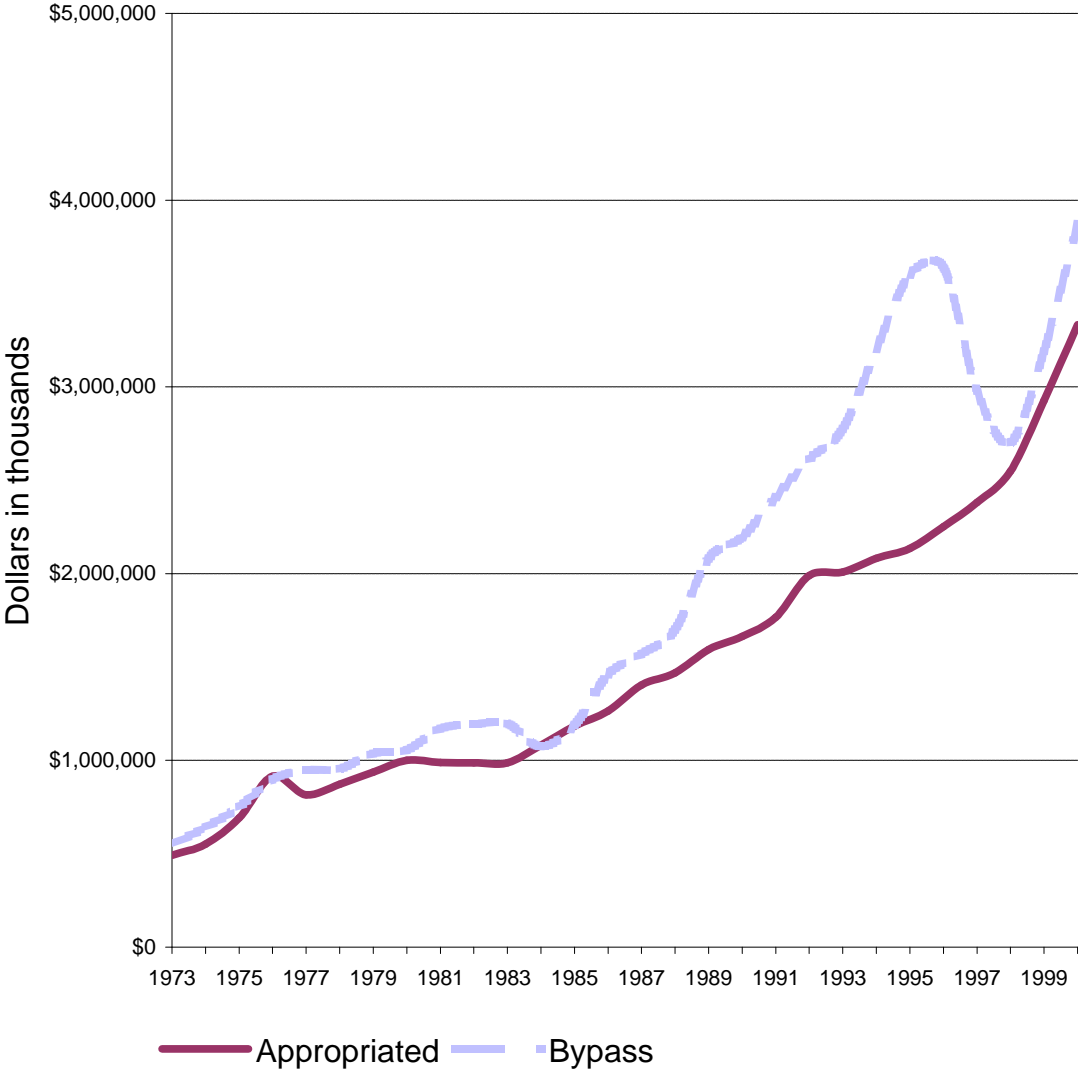
Fiscal Years 1973-2001

(In Whole Dollars)

Fiscal Year	Request
1973.....	\$550,790,000
1974.....	640,031,000
1975.....	750,000,000
1976.....	898,500,000
1977.....	948,000,000
1978.....	955,000,000
1979.....	1,036,000,000
1980.....	1,055,000,000
1981.....	1,170,000,000
1982.....	1,192,000,000
1983.....	1,197,000,000
1984.....	1,074,000,000
1985.....	1,189,000,000
1986.....	1,460,000,000
1987.....	1,570,000,000
1988.....	1,700,000,000
1989.....	2,080,000,000
1990.....	2,195,000,000
1991.....	2,410,000,000
1992.....	2,612,000,000
1993.....	2,775,000,000
1994.....	3,200,000,000
1995.....	3,600,000,000
1996.....	3,640,000,000
1997.....	2,977,000,000
1998.....	2,702,500,000
1999.....	3,191,000,000
2000.....	3,873,000,000
2001.....	4,135,000,000

The National Cancer Act in December 1971, included a provision for the Director, NCI to submit an annual budget request directly to the President, with comment only by NIH and DHHS. This Bypass Budget was first submitted for 1973.

Bypass Requests and Appropriations of the NCI 1973-2000

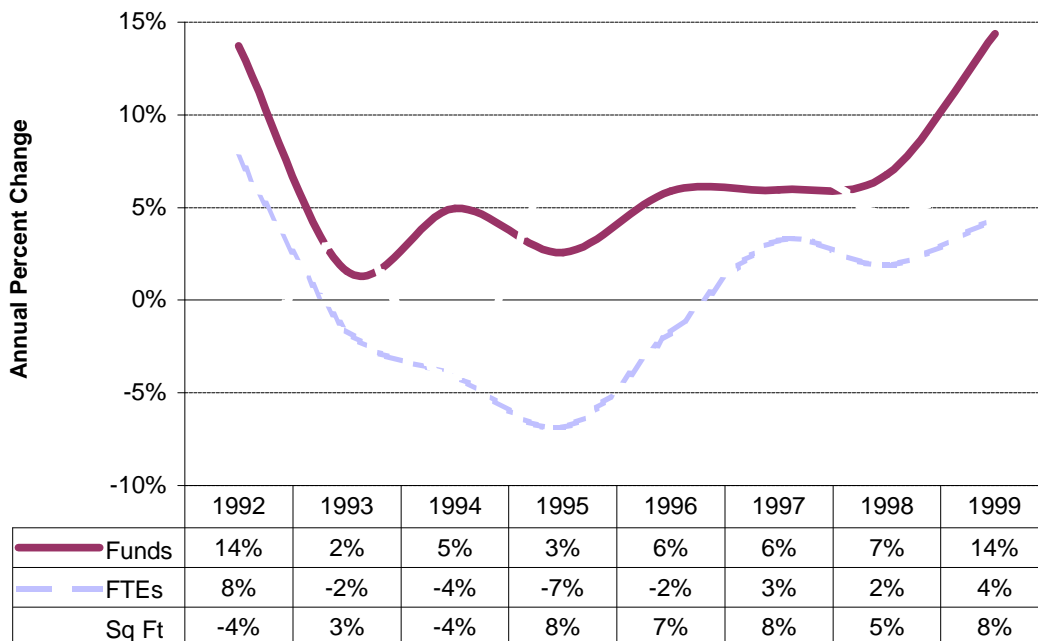
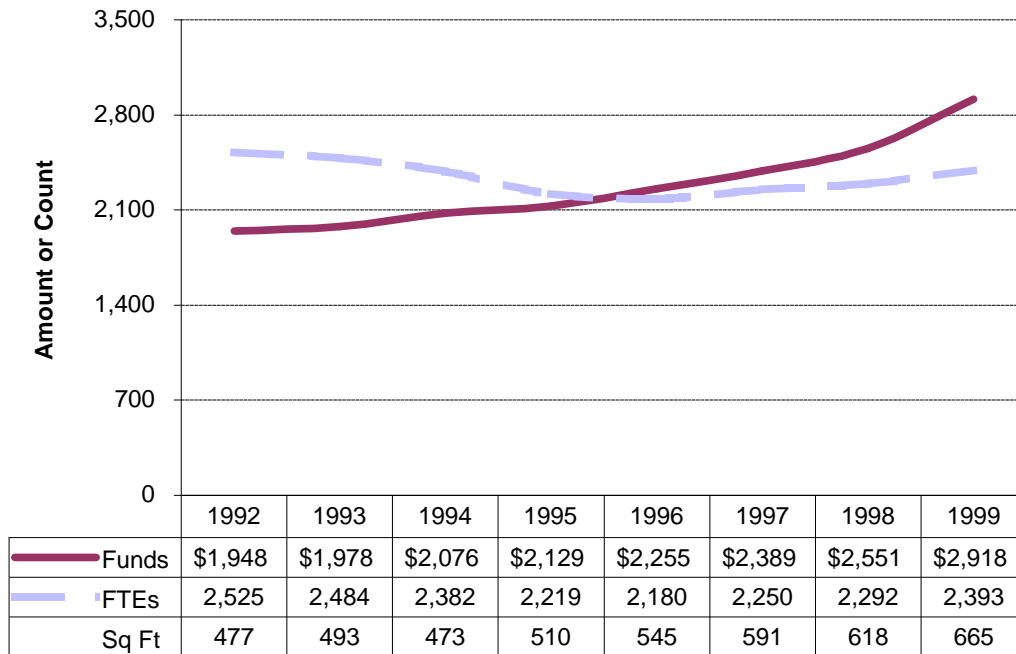


Comparison of Dollars, Positions and Space Fiscal Years 1992-1999

Funds are obligations against the annual appropriation in millions of dollars

FTEs are the number of workyears for appointed employees of the NCI. A workyear equal 2080 hours.

Space is thousands of sq feet excluding the Frederick Cancer Research and Development Center.



Personnel Resources
Fiscal Years 1992-1999

Fiscal Year	--Full Time Equivalents--			Full Time Permanent	Total Employees
	Cancer	AIDS	Total		
1992	2219	306	2525	2042	2604
1993	2184	300	2484	1951	2425
1994	2081	301	2382	1840	2307
1995	1936	283	2219	1767	2250
1996	1949	231	2180	1841	2301
1997	2040	210	2250	1915	2337
1998	2094	198	2292	1921	2387
1999	2195	198	2393	1941	2569

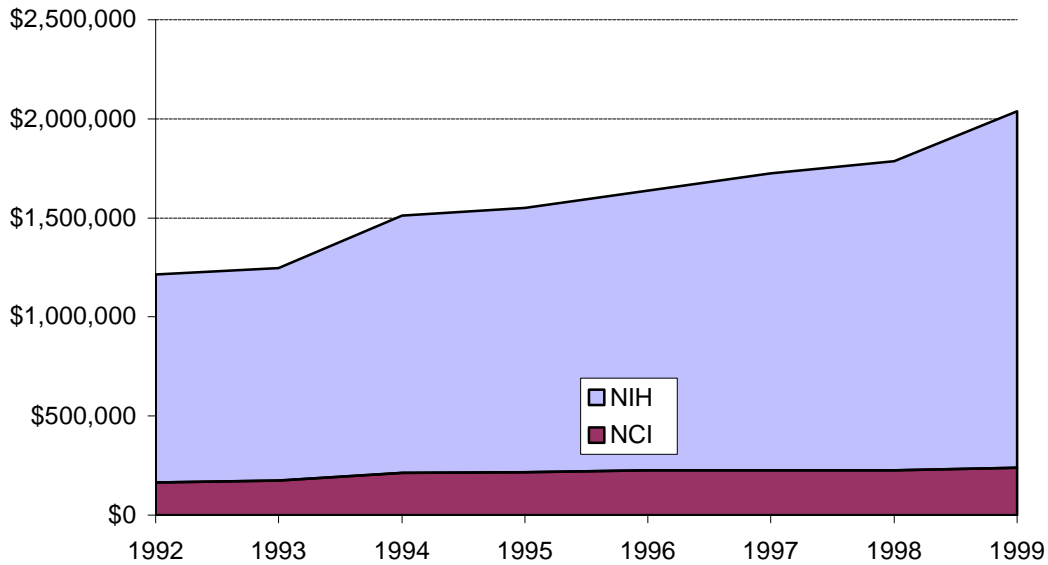
Full time equivalents represent 2,080 hours per person employed.
 Full time permanent employees from NIH Employment Report 062M.
 Total Employees includes full time and part time permanent tours.

AIDS Funding History

Fiscal Years 1992-1999

(Dollars in Thousands)

Fiscal Year	NCI	NIH	% NCI of NIH
1992	\$165,668	\$1,047,294	16%
1993	173,029	1,073,957	16%
1994	212,868	1,298,996	16%
1995	217,430	1,333,600	16%
1996	225,360	1,411,860	16%
1997	224,733	1,501,073	15%
1998	225,991	1,559,071	14%
1999	239,190	1,797,422	13%



AIDS Funding by Activity Fiscal Year 1999

(Dollars in Thousands)

By Mechanism:

Research Project Grants	\$108,930
Cancer Center Grants	9,228
Career Grants	2,171
Cancer Education Grants	137
Cooperative Clinical Groups	716
Other Grants	20
Training Grants	1,656
R&D Contracts	36,191
Intramural Research	68,591
Research Management and Support	11,550
Total, NCI	\$239,190

By Research Thrust:

Cancer Causation	\$120,602
Detection and Diagnosis Research	2,146
Treatment Research	65,772
Cancer Biology	37,478
Subtotal Research	225,998
Cancer Center Support	9,228
Research Manpower Development	3,964
Total, NCI	\$239,190

By Division:

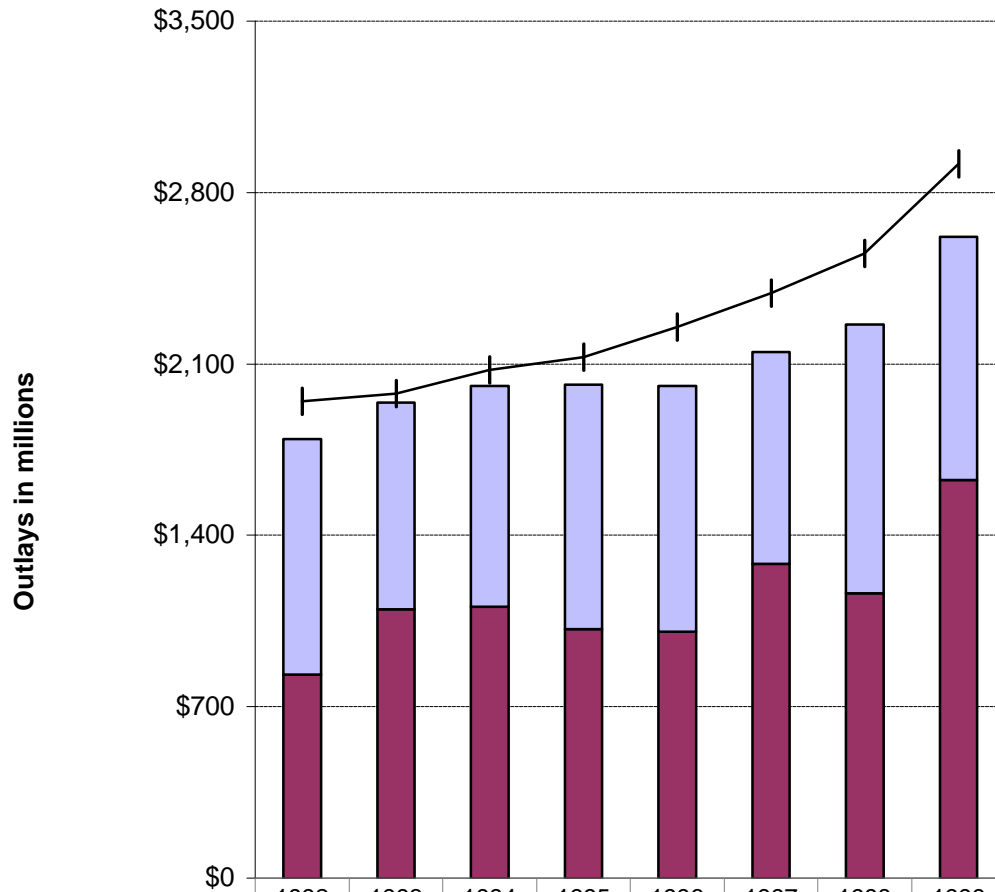
Division of Basic Science	\$27,023
Division of Clinical Science	11,939
Division of Cancer Epidemiology & Genetics	14,342
Division of Cancer Treatment and Diagnosis	9,932
Division of Extramural Activities	3,180
Frederick Cancer Research and Development Center	21,776
Office of the Director	23,890
Research Project Grants	108,930
Conference Grants	20
NIH Management Fund*	18,158
Total, NCI	\$239,190

*Supports common services shared within the NIH; in AIDS the Management Fund is used principally for support costs associated with NCI's activities at the NIH Clinical Center.

Obligations and Outlays

Fiscal Year 1992-1999

(Dollars in Millions)



	1992	1993	1994	1995	1996	1997	1998	1999
Current Yr Outlays	\$961	\$843	\$901	\$1,000	\$1,003	\$865	\$1,098	\$993
Prior Yr Outlays	831	1,099	1,108	1,016	1,007	1,283	1,164	1,626
Obligations	1,948	1,978	2,076	2,129	2,251	2,389	2,551	2,918

Outlays:

Payments made from appropriations. In 1997 the methodology applied by the Department of Health and Human Services, to distinguish between current year and prior year outlays was reviewed with a subsequent modification to the distribution.

Obligations:

Orders placed, grants awarded, contract increments funded, salaries earned and similar financial transactions which legally utilize or reserve an appropriation for expenditure.