SUMMARY MINUTES

NATIONAL CANCER ADVISORY BOARD SUBCOMMITTEE ON ORGAN SITE PROGRAMS

Conference Room 9, C-Wing NIH Building 31, Bethesda, Maryland

October 3, 1982

The NCAB Subcommittee on the Organ Site Program was convened at 7:30 p.m. on October 3, 1982, in open session, in Conference Room 9, C-Wing, Building 31, NIH campus, in Bethesda, Maryland. The following Subcommittee members were present: Dr. William Powers, Chairman, Dr. Harold Amos, Dr. Ed L. Calhoon, Dr. Robert C. Hickey, Dr. Geza J. Jako, and F. Kash Mostofi. Dr. William Longmire, President's Cancer Panel, was also present. In addition, NCI staff and members of the public were present.

Dr. Powers reviewed the the history of the Organ Systems Program for the new NCAB Subcommittee members. Dr. Chiarodo then presented an administrative report covering FY 1982 activities. He indicated that 14.7 million dollars had been obligated among the four organ site projects. The priority score cut-off had been 165 for new applications and 180 for competing renewal applications. In accordance with the NCAB recommendations, responsibility for review of grant applications had been transferred from the Organ Site Headquarters to the Division of Research Grants and all applications are now coming in as RO1 applications. Responsibility for administration of the Bladder and Prostate Clinical Cooperative Groups is being transferred to the Division of Cancer Treatment. The Breast Cancer Program formerly located in DCBD, has been transferred to the DRCCA Organ Systems Branch.

There was considerable discussion on the implementation of the new Organ Systems Program. There were expressions of concern regarding the interface between Divisional Boards of Scientific Counselors and the Program. It was felt that there is a need to study the role and operation of an Organ Systems Coordinating Center, what the programmatic responsibilities will be and the NCI staff-liaison role. There was also discussion of how grant application review will be conducted under the new system.

Dr. Chiarodo addressed some of these issues by presenting a description of how the new Organ Systems Program would be structured and how it would operate. He described a proposed organization and operation of an Organ Systems Coordinating Center, how new initiatives would be generated through the Working Groups and how these initiatives would be brought to NCI Divisional Boards of Scientific Counselors for concept approval, and other roles of the Working Groups. There was considerable discussion on the various ways in which concept reviews might be handled. The issue was not brought to closure. The question was also raised and discussed as to whether grant applications should go to DRG study sections or should be reviewed by NCI established review committees.

There was discussion of how an Organ Systems project would be identified, that is, will there be a discrete program or would the project be diffused across the Divisions of the Institute. There were expressions of concern as to how the integrity of each area selected for special emphasis would be maintained. There was agreement that there is a need to discuss these issues further.

The Subcommittee agreed that a recommendation should be made to the NCAB that the Organ Site Program be retained with the following modifications: that the existing Headquarters be replaced by a single coordinating body charged with the mission to focus on the four current sites; that this coordinating body be charged with continually appraising progress in other sites with a view toward identifying new sites for future emphasis. It was agreed that at the outset there would be two divisions, genetal urinary and gastrointestinal. Laboratory and epidemiologic research should be reviewed and funded as RO1's and PO1's. Clinical research should be funded by a mechanism to be devised by the Director and staff of NCI. The Subcommittee agreed that there should be an expression of concern for a smooth transition into the new program.

The meeting was adjourned at 8:15 p.m.