

NIH GUIDE

for GRANTS and CONTRACTS

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Vol.3, No.14, September 4, 1974

A N N O U N C E M E N T

GRANT ACTIVITIES OF THE NATIONAL CANCER INSTITUTE'S CANCER CONTROL PROGRAM

Under the National Cancer Plan the Cancer Control Program (CCP) is to identify, field test, evaluate, demonstrate, and promote the widespread application of the available and new methods and techniques for reducing the incidence, morbidity, and mortality from cancer. To accomplish this purpose, program activities are arranged according to the following intervention areas: (1) PREVENTION, (2) DETECTION, DIAGNOSIS, and PRETREATMENT EVALUATION, (3) TREATMENT, REHABILITATION, and CONTINUING CARE. Except for research in rehabilitation, CCP does not support the usual basic and clinical research to develop new techniques or procedures.

The grant-supported portion of this national program, encompassing all three intervention areas, is intended to provide new concepts for a more effective utilization of existing procedures and for techniques and information on refinement of established procedures and/or techniques for a more vigorous prosecution of Cancer Control. It is in this context, therefore, that grant applications directed to the subject matter indicated below will be accepted and considered by the Cancer Control Program:

PREVENTION. Grant applications in this cancer control intervention area are to be concerned with projects designed to make people (health professionals and the public) more responsive to cancer prevention efforts especially methods and techniques in preventive medicine relative to reducing exposure to carcinogens among industrial and agricultural workers, and other high risk people (i.e., worker attitudes, thinking, concepts, fears, and actions regarding preventive measures).

DETECTION/DIAGNOSIS/PRETREATMENT EVALUATION. CCP will support investigator-initiated work in this intervention area relative to the biometric design and assessment of screening-detection systems with special emphasis on procedures/techniques for determining cost benefit ratios of various screening/detecting systems; studies designed to make people more responsive to detection/diagnosis/pretreatment evaluation procedures and to take advantage of the availability of such procedures; with studies designed to develop a better understanding of the factors which inhibit certain physicians and dentists from dealing more appropriately with early detection, diagnosis and pretreatment

evaluation; and with studies designed to improve the techniques and procedures for the effective utilization, in appropriate settings, of professional assistants in the detection/diagnosis of cancer.

TREATMENT/REHABILITATION/CONTINUING CARE. Investigator-initiated projects in this broad cancer control intervention area should be confined to rehabilitation and continuing care (rehabilitation research). CCP will support (1) basic and clinical research on the mechanism(s) and management of pain in cancer patients; (2) research studies on the psychosocial aspects of cancer emphasizing the patient, the patient's family, social contacts including health professionals; (3) the development of new procedures and techniques for counseling cancer patients and families and for assessing the effects of such counseling; (4) research studies on the nutritional and alimentation management of cancer patients, especially those patients not cured of their disease; (5) studies for new approaches to the rehabilitation of patients with head and/or neck cancer, with special emphasis on new prosthetic materials, wound healing after surgery and radiation, and new methods of speech; (6) studies for the development of new physical techniques/procedures to rehabilitate cancer patients with paraplegia, stomas, etc.; and (7) studies for the development of new concepts and procedures for the continuing care of cancer patients with the disease in varying states of control.

SPECIAL COMMUNITY RESEARCH DEVELOPMENT. Under this general area of cancer control, applications are to be concerned with the development of community outreach programs through the National Cancer Institute's designated comprehensive cancer centers and multi-protocol clinical cooperative groups.

Applications should be submitted on PHS Grant Application form NIH 398 which should be mailed to:

Division of Research Grants
National Institutes of Health
Bethesda, Maryland 20014

Applicants should type "CANCER CONTROL" in the top margin of the application's face page. Please note that this Announcement will be effective through June 1975. Applications must be received by November 1, 1974; February 1, 1975; and June 1, 1975 in order to be reviewed at the succeeding NCI Advisory Board Meeting (i.e. March, June and November respectively).

Any inquiries should be directed to Dr. Diane Fink, Associate Director for Cancer Control, Room 732, Blair Building, 8300 Colesville Road, Silver Spring, Maryland 20910; telephone (301) 427-7996.