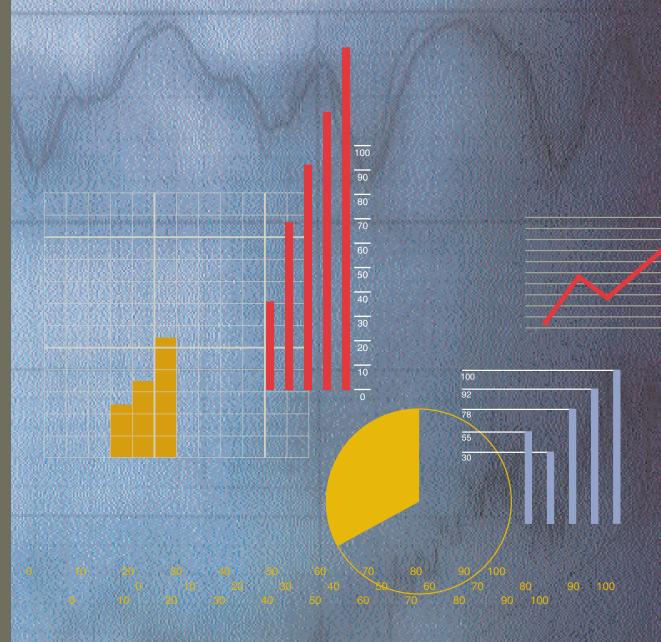
National Cancer Institute



2005 Fact Book

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES National Institutes of Health National Cancer Institute

2005 Fact Book

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES National Institutes of Health 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: <u>www.nci.nih.gov</u> or <u>www.cancer.gov</u>.

Fiscal Year 2005 Annual Report

BUDGET IN REVIEW

This report provides a summary of the distribution of the Fiscal Year 2005 budget among the various National Cancer Institute (NCI) research programs and funding mechanisms, funding policies influencing grant awards, and comparisons with prior year allocations. Additional information on the NCI budget is accessible from the NCI Home Page (<u>http://www.cancer.gov</u>).

Summary

Funds available to the NCI in FY 2005 totaled over \$4.795 billion, reflecting an increase of 1.5% and \$71 million over the previous fiscal year.

Fiscal highlights from FY 2005 include:

- Of the total NCI budget, 46% of the funds were allocated for Research Project Grants.
- The total number of Research Project Grants (RPGs) funded was 5,412.
- One-fifth of the RPGs awarded were new (Type 1) or competing renewal (Type 2) awards.
- 1,292 competing RPG's were funded.
- Approximately 32% of the total NCI budget supported ongoing non-competing (Type 5) RPGs.
- R01 grants were funded to the 16th percentile.
- 265 grants totaling nearly \$98 million were funded as Small Business Innovation Research (SBIR) and Small Business Technology Transfer (STTR) awards.
- Intramural Research was just under 15% of the total NCI budget in FY 2005.
- \$532 million over 11% of the total NCI budget was allocated for Cancer Prevention & Control.

Distribution of the Budget by Funding Mechanism for FY 2004 and FY 2005

Summary Points

Of the \$71 million increase:

- Nearly all of the increase or \$67 million was allocated for the Research Grants budget mechanisms.
- \$29 million or 39% of the increase was provided to the Research Project Grant (RPG) category.
- Within the RPG category, competing grants and administrative supplemental grants decreased by \$58 million and the non-competing grants increased by \$87 million.
- Funds for training and career development of current and future research scientists through Research Career Awards grew by 3%; Career Education funding increased by 7%.
- The total budget for Cancer Centers, Specialized Centers (U54) and SPOREs increased by 11%.
- Specialized cancer centers include two new programs for FY2005. The Transdisciplinary Research on Energetics and Cancer (TREC) and the Nanotechnology Alliance.
- Clinical Cooperative Groups and R&D contracts decreased by 8% and 3%, respectively.
- During FY 2005, NIH and DHHS Assessments increased a total of \$19 million, including a \$11 million increase for Program Evaluation, a \$10 million increase for the Management Fund, a \$3 million reduction in other assessments including ORS Security, and a \$1 million increase for IT Assessments.

NCI Dollars by Mechanism for FY 2004 and 2005 (in thousands)

	,	,	Change '0	4-05
	2004	2005	Am't	%
- Research Project Grants:				
Noncompeting	\$1,513,234	\$1,600,585	\$87,351	5.8%
Admin Supplements	54,543	50,655	-3,888	-7.1%
Competing	494,003	439,870	-54,133	-11.0%
Subtotal, RPG	2,061,780	2,091,110	29,330	1.4%
SBIR/STTR	99,579	97,775	-1,804	-1.8%
Total, RPG	2,161,359	2,188,885	27,526	1.3%
Cancer Centers	245,761	255,263	9,502	3.9%
Specialized Cancer Centers (U54)	28,640	65,964	37,324	130.3%
SPOREs	134,887	133,025	-1,862	-1.4%
Total: Centers, Spec Ctrs, U54s & SPOREs	409,288	454,252	44,964	11.0%
Research Career Program	74,207	76,652	2,445	3.3%
Cancer Education	32,214	34,581	2,367	7.3%
Clinical Cooperative Groups	154,357	142,847	-11,510	-7.5%
Other Grants	54,138	54,891	753	1.4%
Subtotal, Other	314,916	308,971	-5,945	-1.9%
Total, Research Grants	2,885,563	2,952,108	66,545	2.3%
National Research Service Awards	66,264	67,299	1,035	1.6%
R&D Contracts	361,569	351,056	-10,513	-2.9%
Intramural Research	708,939	711,009	2,070	0.3%
Research Management & Support	171,578	173,702	2,124	1.2%
Cancer Prevention & Control	529,980	531,634	1,654	0.3%
Construction	0	0	0	0.0%
Buildings and Facilities	0	7,936	7,936	
Total, NCI	4,723,893 *	4,794,744 *	70,851	1.5%
AIDS research included above	[\$263,442]	[\$265,907]	[\$2,465]	0.9%

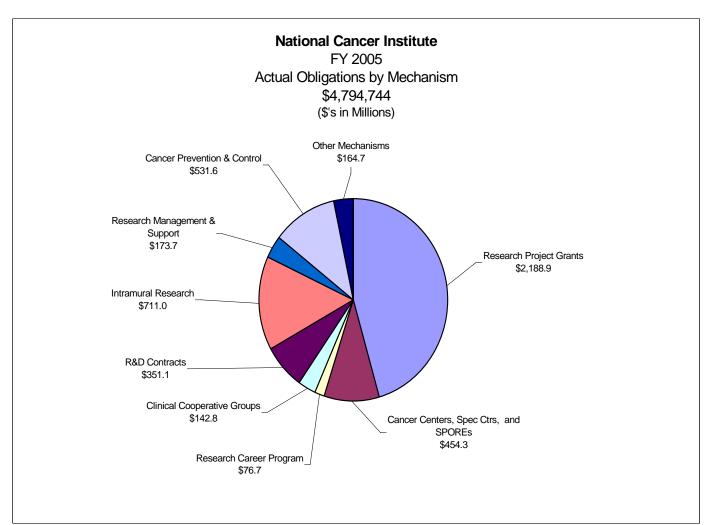
* Does not include \$3.5 million in FY2004 and \$2.9 million in FY2005 obligated by the NCI from funds collected thru the sale of the Breast Stamp by the U.S. Postal Service.

Percent Share of Total NCI Dollars

Summary Points

- The mechanism shares of the total budget have remained relatively stable from FY 2001 to FY 2005.
- Intramural Research has dropped to under 15% of total NCI dollars.

Percent Share of Total NCI Dollars						
	2001	2002	2003	2004	2005	
Research Project Grants	45.2%	45.3%	44.8%	45.8%	45.6%	
Cancer Centers	5.1%	5.0%	5.1%	5.2%	5.3%	
Specialized Centers	0.3%	0.4%	0.4%	0.6%	1.4%	
SPOREs	2.0%	2.3%	2.7%	2.9%	2.8%	
Clinical Cooperative Groups	4.1%	3.9%	3.5%	3.3%	3.0%	
Intramural Research	15.1%	15.3%	15.1%	15.0%	14.8%	
R&D Contracts	7.6%	7.1%	8.1%	7.7%	7.3%	
Cancer Prevention & Control	12.2%	12.0%	11.6%	11.2%	11.1%	
Other Mechanisms	8.4%	8.7%	8.6%	8.3%	8.7%	



Funding Trends

Summary Points

• The NCI budget has increased by \$1.04 billion – or 28% – since FY 2001. All mechanisms, except for Research Project Grants, Intramural Research, Clinical Cooperative Groups, and Cancer Prevention & Control have experienced percentage increases greater than the total NCI growth since FY 2001.

Historical Funding Trends								
(Dollars in Millions)								
2001 2002 2003 2004 2005								
Total NCI	\$3,753.7	\$4,176.7	\$4,592.3	\$4,723.9	\$4,794.8			
Research Project Grants	1,696.6	1,893.2	2,058.7	2,161.4	2,188.9			
Intramural Research	567.3	637.6	693.1	708.9	711.0			
Cancer Centers	192.1	208.0	235.8	245.7	255.3			
Specialized Centers	10.7	16.8	19.2	14.2	66.0			
SPOREs	76.8	94.9	123.1	149.4	133.0			
Clinical Cooperative Groups	154.3	163.8	158.7	154.3	142.8			
Cancer Prevention & Control	459.5	501.2	533.2	530.0	531.6			
R&D Contracts	284.0	298.2	370.8	361.6	351.1			
Other Mechanisms	312.3	363.0	399.7	398.4	415.1			

Listerial Funding Trands

% Growth by Mechanism

	2001 to 2002	2002 to 2003	2003 to 2004	2004 to 2005	2001 to 2005
Total NCI	11.3%	10.0%	2.9%	1.5%	27.7%
Research Project Grants	11.6%	8.7%	5.0%	1.4%	29.0%
Intramural Research	12.4%	8.7%	2.3%	0.3%	25.3%
Cancer Centers	8.3%	13.4%	4.2%	3.9%	32.9%
Specialized Centers	57.0%	13.7%	-26.0%	365.0%	516.8%
SPOREs	23.4%	29.9%	9.5%	-1.4%	73.2%
Clinical Cooperative Groups	6.2%	-3.1%	-2.7%	-7.5%	-7.5%
Cancer Prevention & Control	9.1%	6.4%	-0.6%	0.3%	15.7%
R&D Contracts	5.0%	24.3%	-2.5%	-2.9%	23.6%
Other Mechanisms	16.2%	10.1%	-0.4%	2.2%	32.9%

Research Project Grants

Summary Points

- 89% of competing dollars supported grants awarded within the established payline; 11% supported grants as an exception to the payline.
- RFA funds, which increased from the FY 2004 dollar level, accounted for 10% of FY 2005 competing dollars.
- Research Project Grant applications submitted to NCI increased by approximately 3%.
- 1,292 competing RPG's were funded.

Research Project Grants

(Dollars in Thousands)

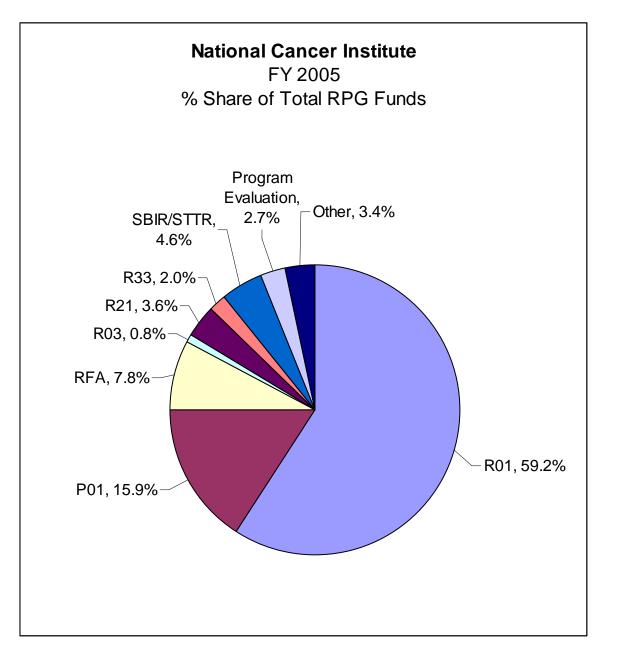
	2004*		2	005**
	No.	Amount	No.	Amount
Total funding for RPGs	5,467	\$2,161,359	5,412	\$2,188,885
SBIR/STTR	397	\$99,579	265	\$97,775
Funding for RPGs without SBIR/STTR Program	5,070	\$2,061,780	5,147	\$2,091,110
Continuation or noncompeting grants funded	3,578	\$1,454,513	3,855	\$1,651,239
Competing grants funded	1,492	\$494,003	1,292	\$439,871
Administrative Supplements		\$54,543	292	\$50,655
Partial assessment for DHHS Program Evaluation		\$58,721		\$58,721
Funds set aside within competing dollars for:				
Grants within Paylines:	1,375	\$448,654	1,154	\$392,692
Traditional R01	886	\$290,361	704	\$226,797
Program Projects (P01)	33	\$52,049	38	\$65,273
RFA Grants	67	\$41,848	92	\$44,568
Share of competing grant funds		8.47%		10.13%
Exception Grants	118	\$45,349	138	\$47,179
Share of competing grant funds		9.18%		10.73%
Competing Application Requests	6,148	\$2,279,782	6,325	\$2,489,515
Funding Success Rate	24.30%		20.40%	
Percentile funding for R01 grants	20th		16th	
Average Cost-Competing		\$331		\$340
Average Reduction from recommended/requested lev	vels	-15%		-22%

*Does not include \$3.5 million received by the NCI from the US Postal Service's sale of the Breast Cancer Stamp. **Does not include \$2.9 million received by the NCI from the US Postal Service's sale of the Breast Cancer Stamp.

Grant Funding Paylines

RPG Mechanisms:	2004	2005	
R01 Traditional Grants	20th	16th	percentile
P01 Program Projects	N/A*	N/A*	priority score
R03 Small Grants	225	210	priority score
R21 Exploratory Phase I	166	175	priority score
R33 Exploratory Phase II	155	160	priority score
R41/R42 STTR	232	185	priority score
R43/R44 SBIR	220/210	190	priority score

* Formal paylines for P01 grants are determined by the Executive Committee



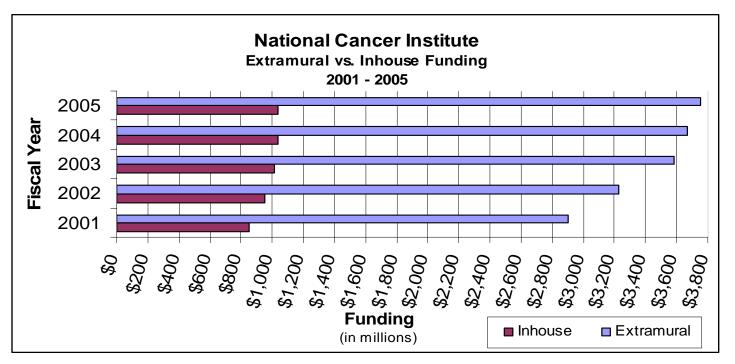
National Cancer Institute Extramural vs. Inhouse Funding

(\$'s in millions)

Extramural

Mechanism	2001	2002	2003	2004	2005	01-05% chg.
Research Project Grants	\$1,696.60	\$1,893.20	\$2,058.70	\$2,161.40	\$2,188.90	29.0%
Cancer Centers	192.1	208	235.8	245.7	255.3	32.9%
Specialized Centers	10.7	16.8	19.1	14.1	66	516.8%
SPOREs	76.8	94.8	123.1	134.8	133	73.2%
Other Research Grants	269.2	304.1	320.3	314.9	309	14.8%
NRSA	57.9	63.7	65.9	66.2	67.3	16.2%
R&D Contracts	284	298.2	370.8	361.6	351.1	23.6%
Cancer Control Grants	183.7	208.2	221.6	220	232	26.3%
Cancer Control Contracts	126.1	135.9	160	153	145.8	15.6%
Construction	3	5	5	0	0	-100.0%
Buildings & Facilities	0	0	0	0	7.9	0%
Total Extramural Funds	2,900.10	3,227.90	3,580.30	3,671.70	3,756.30	590.9%

Inhouse								
Mechanism	2001	2002	2003	2004	2005	01-05% chg.		
Intramural Research	\$567.30	\$637.60	\$693.10	\$708.90	\$711.00	25.3%		
RMS	136.5	154	167.3	171.6	173.7	27.3%		
Control Inhouse	149.7	157.1	151.5	157	154	2.9%		
Total Inhouse Funds	853.5	948.7	1,011.90	1,037.50	1,038.70	21.7%		
Total NCI	3,753.60	4,176.60	4,592.20	4,709.20	4,795.00	27.7%		



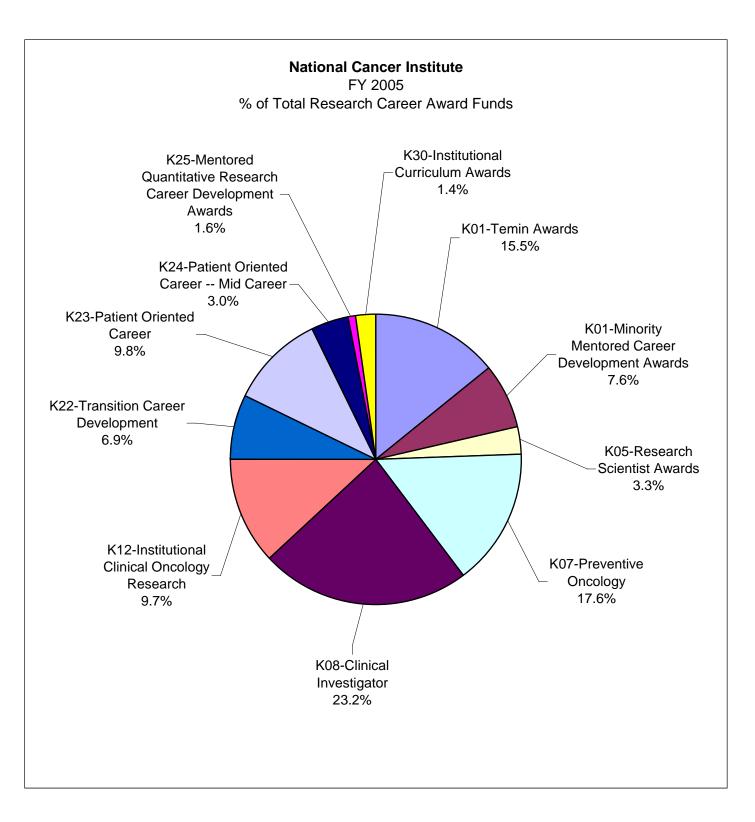
Research Career Awards – "K" Program

Summary Points

- The Research Career Award mechanism grew by 3% in FY 2005.
- The number of Research Career Awards increased by 37 in FY 2005 from FY 2004.
- NCI's funding in FY 2005 for the K30 Institutional Curriculum Awards, which are administered by the National Heart, Lung, and Blood Institute, was \$1.1 million.

(Dollars in Thousands)

		2004		20	05
		No.	Amount	No.	Amount
K01	Temin Awards	72	\$10,485	82	\$11,897
K01	Minority Mentored Career Development Award	41	5,285	45	5,837
	Subtotal, K01s	113	15,770	127	17,734
K05	Research Scientist Award	19	2,396	20	2,554
K07	Preventive Oncology	88	11,393	110	13,529
K08	Clinical Investigator	131	17,243	141	17,841
K12	Institutional Clinical Oncology Research	17	8,791	13	7,436
K22	Transition Career Development	35	5,333	35	5,344
K23	Patient-Oriented Career	61	7,911	60	7,533
K24	Patient-Oriented Career Mid Career	25	3,061	16	2,306
	Mentored Quantitative Research Career Development				
K25	Award	5	712	9	1,227
		494	72,610	531	75,505
K30	Institutional Curriculum Awards Administered by NHLBI	0	1,597	0	1,147
	Total Research Career Program	494	74,207	531	76,652



Research Dollars by Various Cancers

Summary Points

- Funding for various cancers listed below may overlap
- Funding for cancers listed below do not represent the entire NCI budget

	2001	2002	2003	2004	2005
Total NCI	\$3,753.70	\$4,176.70	\$4,592.30	\$4,723.90	\$4,794.70
AIDS	237.8	254.4	263.4	267	265.9
Brain & Central Nervous System	80.7	95.2	111.5	132.3	124.9
Breast Cancer	475.2	522.6	548.7	566.2	560.1
Cervical Cancer	72.6	67.6	79	79	81.7
Clinical Trials	648.6	702.1	799.5	800	781.8
Colorectal Cancer	207.4	245	261.6	262	253.1
Head and Neck	50	58.9	77.7	88.2	89.5
Hodgkin's Disease	10.2	11.8	16.5	17.4	17.2
Leukemia	154	177.2	200.9	214.7	220.6
Liver Cancer	54.5	62.5	63.7	63	60.5
Lung Cancer	206.5	237.5	273.5	276.5	266.1
Melanoma	71.8	82.3	90.7	94.9	102.9
Multiple Myeloma	19.7	20.8	26.3	23.9	28.2
Non Hodgkin's Lymphoma	79.5	85.6	95.2	99.6	107
Ovarian Cancer	76.9	93.5	99.4	99.5	97.7
Pancreatic Cancer	21.8	33.1	42.3	52.7	66.7
Prostate Cancer	258	278.4	305.2	308.5	309
Stomach Cancer	9	11.4	13.4	11.6	11
Uterine Cancer	18.8	23.1	25.5	27	31.1

Research Dollars by Various Cancers (Dollars in Millions)

Director's Biography Andrew C. von Eschenbach, M.D.

Andrew C. von Eschenbach, M.D. became the 12th Director of the National Cancer Institute in January 2002. In September 2005, he was also appointed as the Acting Commissioner of the Food and Drug Administration and currently holds both positions. He is a nationally recognized urologic surgeon who formerly directed the Genitourinary Cancer Center and the Prostate Cancer Research Program at The University of Texas M.D. Anderson Cancer Center in Houston, Texas. He also served as special assistant for external affairs to M.D. Anderson's president and held the Roy M. and Phyllis Gough Huffington Clinical Research Distinguished Chair in Urologic Oncology.

A native of Philadelphia, Dr. von Eschenbach received his medical degree from Georgetown University Medical School in 1967. He completed residencies in general surgery and urology at Pennsylvania Hospital in Philadelphia, then was an instructor in urology at the University of Pennsylvania School of Medicine. He served as a Lieutenant Commander in the U.S. Navy Medical Corps.

In 1976, Dr. von Eschenbach went to M.D. Anderson Cancer Center for a fellowship in urologic oncology and was invited to join the faculty the following year. From 1983 to 1996, he was Chairman of the Department of Urology and, since 1985, has also been a Consulting Professor in the Department of Cancer Biology.

In 1996, Dr. von Eschenbach was named the founding director of M.D. Anderson's Prostate Cancer Research Program, comprised of over 60 scientists and clinicians collaborating on integrated translational research in the biology, treatment, epidemiology and prevention of the disease. From 1997 to 1999, he also served as Vice President for Academic Affairs and then as Executive Vice President and Chief Academic Officer, leading a faculty of almost 1,000 cancer researchers and clinicians.

He was a founding member of C-Change and, prior to his accepting the position as NCI Director, he was President-elect of the American Cancer Society. Dr. von Eschenbach has contributed more than 200 articles, books and chapters to the scientific literature.

Richard D. Klausner, M.D. August 1995 – September 2001	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 is well known for his contributions to multiple aspects of cell and molecular biology. 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 tumor suppressor genes function.
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 of 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.

Membership and Term

- 2010 Acting Chairperson Daniel D. Von Hoff, M.D., F.A.C.P Translational Genomics Research Institute Phoenix, AZ 85004
- 2006 Samir Abu-Ghazaleh, M.D. Avera Cancer Institute Sioux Falls, SD 57105
- 2006 James O. Armitage, M.D. College of Medicine University of Nebraska Medical Center Omaha, NE 68198
- 2008 Moon Shao-Chuang Chen, Jr., Ph.D., M.P.H. University of California Davis Cancer Center Sacramento, CA 95817
- 2008 Kenneth H. Cowan, M.D., Ph.D. University of Nebraska Medical Center Eppley Institute for Cancer Research Omaha, NE 68198
- 2008 Jean B. deKernion, M.D. Department of Urology UCLA School of Medicine Los Angeles, CA 90095
- 2006 Ralph S. Freedman, M.B.B.Ch., Ph.D. Department of Gynecologic Oncology University of Texas Houston, TX 77030
- 2006 James H. French , M.D. The Center for Plastic Surgery Annandale, VA 22003
- 2010 Kathryn Giusti, M.B.A. Multiple Myeloma Research Foundation, Inc. New Canann, CT 06840
- 2010 David H. Koch Koch Industries New York , NY 10021

- 2006 Eric S. Lander, Ph.D. The Broad Institute of MIT and Harvard MIT and Harvard Medical School The Whitehead Institute for Biomedical Research Cambridge, MA 02141
- 2010 Diana M. Lopez, Ph.D. Department of Microbiology & Immunology University of Miami School of Medicine Miami, FL 33136
- 2006 Arthur W. Nienhuis, M.D. St. Jude Children's Research Hospital Memphis, TN 38101
- 2008 Ms. Marlys Popma IHS Consulting Colfax, IA 50054
- 2008 Franklyn G. Prendergast, M.D., Ph.D. Mayo Clinic Cancer Center Mayo Foundation Rochester, MN 55905
- 2010 Carolyn D. Runowicz, M.D. The Carol and Ray Neag Comprehensive Cancer Center University of Connecticut Health Center Farmington, CT 06030
- 2008 Lydia G. Ryan, M.S.N., P.N.P. Children's Healthcare of Atlanta AFLAC Cancer Center Atlanta, GA 30322

Executive Secretary Paulette S. Gray, Ph.D.

Committee Management Officer Ms. Claire L. Harris

National Cancer Advisory Board (Continued)

Ex Officio Members

The Honorable Elaine Chao, M.B.A. Secretary of Labor Washington, DC 20210

Andrew C. von Eschenbach, M.D. Acting Commissioner Food and Drug Administration Rockville, MD 20857

John Howard, M.D., M.P.H., J.D., LL.M. Director National Institute for Occupational Safety and Health (NIOSH) Washington, DC 20857

Mr. Stephen L. Johnson Administrator Environmental Protection Agency Washington, DC

The Honorable Michael O. Leavitt Secretary Department of Health and Human Services Washington, DC 20201

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Associate Director Office of Biological and Environmental Research U.S. Department of Energy Washington, DC 20585

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Under Secretary for Health Veterans Health Administration Department of Veterans Affairs Washington, DC 20420

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Mr. Hal Stratton

Chairman Consumer Product Safety Commission Bethesda, MD 20814

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Washington, DC 20301-1200

Elias A. Zerhouni, M.D. Director

National Institutes of Health Bethesda, MD 20892

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Donald J. Wright, M.D. MPH Director Office of Occupational Medicine Department of Labor, OSHA Washington, DC 20210 (The Honorable Elaine Chao - DOL)

NCAB Subcommittee Assignments

Subcommittee on Activities and Agenda

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Theodore Lawrence, M.D., Ph.D.	2009				
Susan Leigh, RN	2008				
Maria Martinez, Ph.D.	2010	Executive Secretary - Brian Wojcik, Ph.D.			

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Michael Karin, Ph.D.	2010	Cheryl Lyn Walker, Ph.D.	2006
Laimonis Laimins, Ph.D.	2009	Teresa Wang, Ph.D.	2008
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Guillermina Lozano, Ph.D.	2007		
Frank Rauscher, Ph.D.	2010		
Martine Roussel, Ph.D.	2008	Executive Secretary - Florence E. Farber, Ph.D.	

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Eric Hunter, Ph.D.	2007			

2007

Paula K. Kim

President's Cancer Panel

LaSalle D. Leffall, Jr. M.D., F.A.C.S. 2007

Chairman Charles R. Drew Professor of Surgery Howard University Hospital 2041 Georgia Avenue, NW Suite 4000 Washington, DC 20060

Lance E. Armstrong2008Founder, Lance Armstrong Foundation2901 Bee Caves RoadSuite LAustin, TX 78746

Margaret Kripke, Ph.D.2006Executive Vice President/Chief Academics OfficerUniversity of TexasM.D. Anderson Cancer CenterUnit 1131515 Holcombe BoulevardHouston, TX 77030

Abby B. Sandler, Ph.D. Executive Secretary

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Ken Buetow, Ph.D. Director, NCI Center for Bioinformatics

Nelvis Castro Acting Director, Office of Communications

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Robert Croyle, Ph.D. Director, Division of Cancer Control and Population Sciences

James Doroshow, M.D. Director, Division of Cancer Treatment and Diagnosis

Greg Downing, D.O., Ph.D. Director, Office of Technology and Industrial Relations

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Alan S. Rabson, M.D. Deputy Director

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

Robert Wiltrout, Ph.D. Director, Center for Cancer Research

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

NCI Director's Consumer Liaison Group

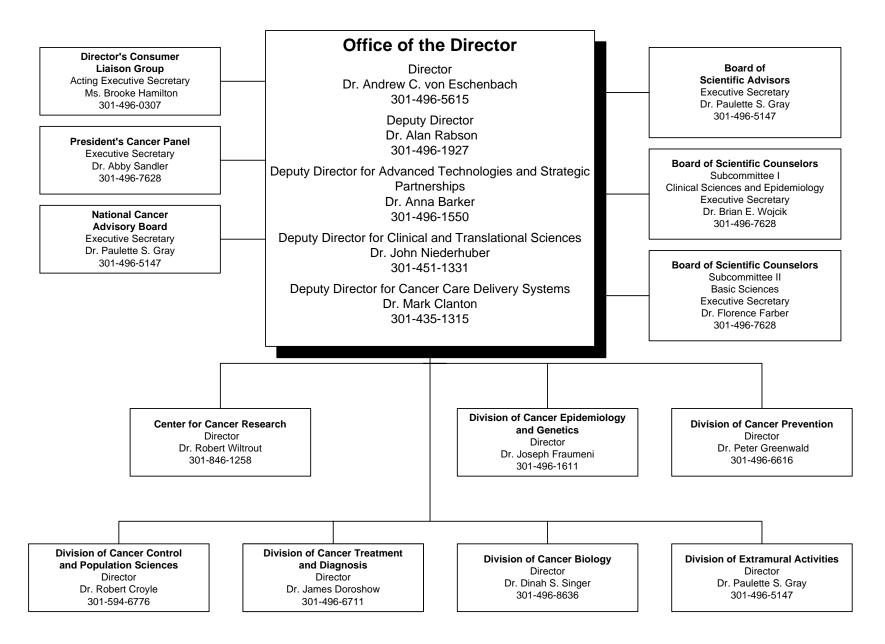
Mr. Doug Ulman, Chair Lance Armstrong Foundation	2008	Dr. Sylvia Ramos People Living Through Cancer/Intercultural Cancer Council	2006
Ms. Margaret L. Anthony Yul Brynner Head and Neck Foundation	2006	Mr. Eric Rosenthal EvocaTalk® Reports	2006
Ms. Vernal H. Branch Virginia Breast Cancer Foundation/ National Breast Cancer Coalition	2007	Ms. Mary Jackson Scroggins Ovarian Cancer National Alliance	2007
Mr. William Bro Kidney Cancer Association	2008	Ms. Sue Sumpter Leukemia & Lymphoma Society/Candlelighters Childhood Cancer Foundation	2007
Ms. Lourie Campos Community Health Partnership	2008	Dr. Marisa Weiss breastcancer.org	2007
Ms. Nancy Davenport-Ennis Patient Advocate Foundation	2008	Ms. Celeste Whitewolf Native People's Circle of Hope	2006
Ms. Bobbi de Córdova Hanks Bosom Buddies/Women's Center of Jackso	2006 nville	Col. (Ret.) James Williams Pennsylvania Prostate Cancer Coalition	2008

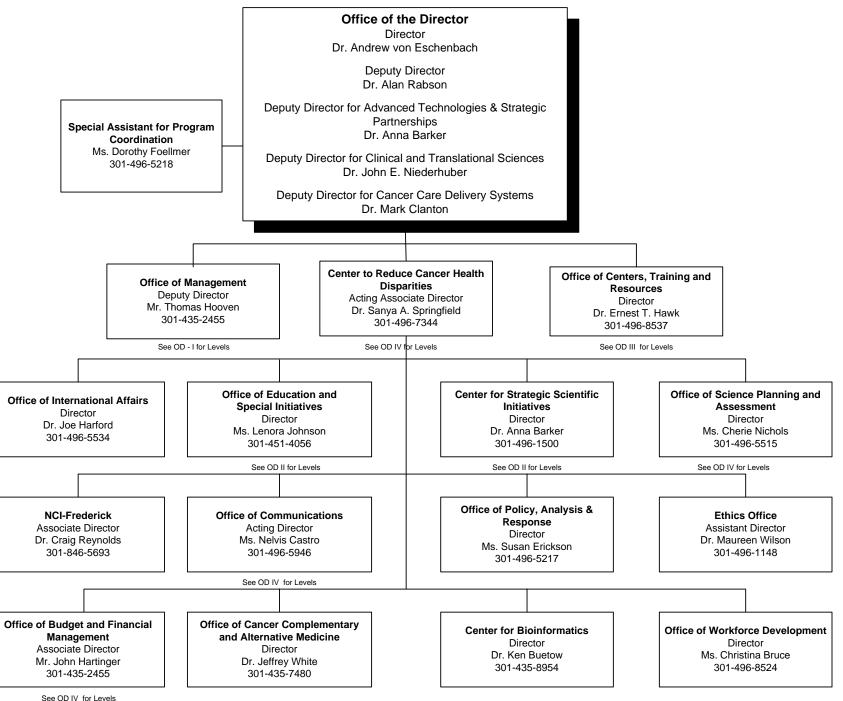
Dr. Beverly Laird 2007 American Cancer Society/Komen Breast Cancer Foundation

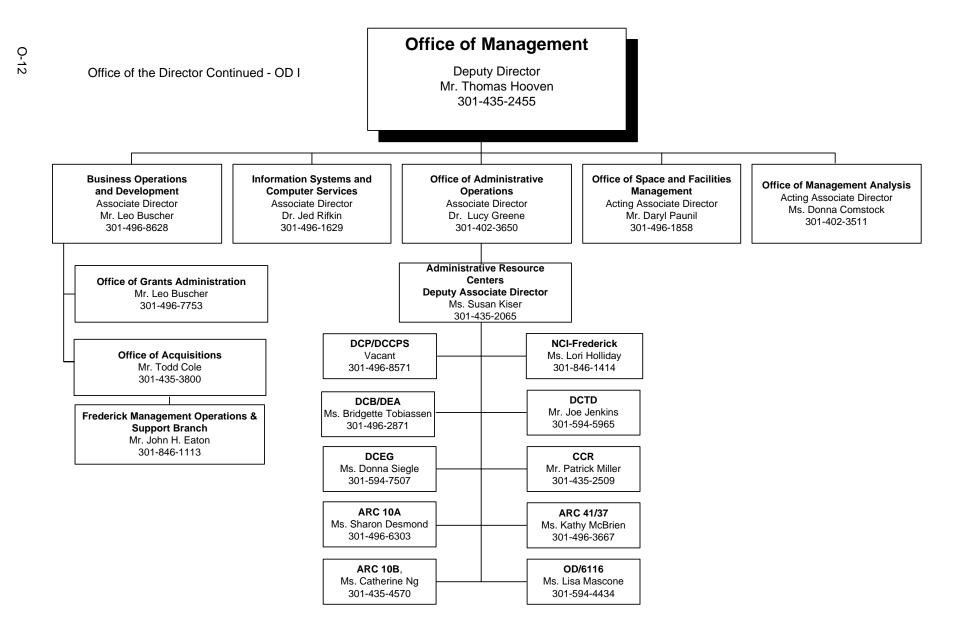
Ms. Brooke Hamilton, Acting Executive Secretary

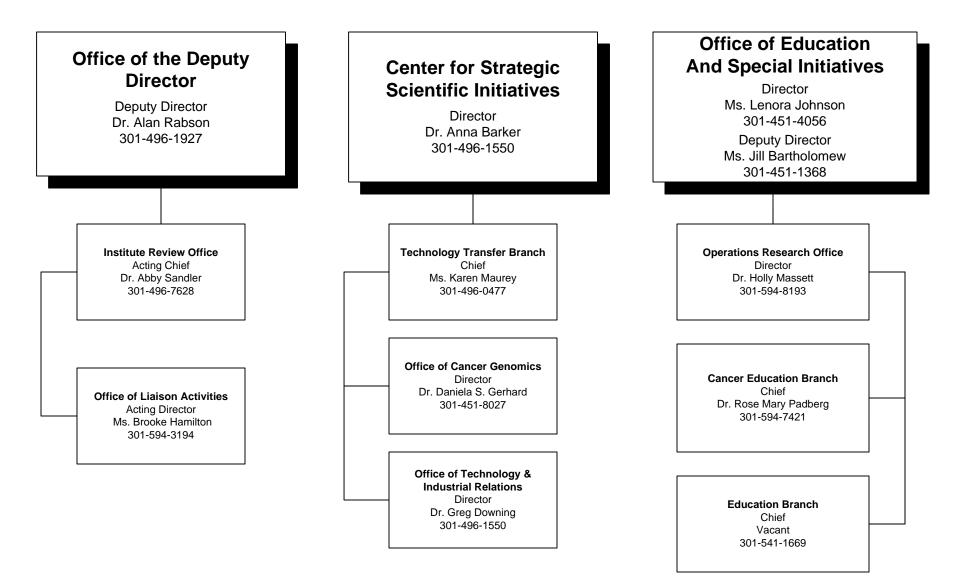
Director's Consumer Liaison Group Office of Liaison Activities National Cancer Institute 6116 Executive Boulevard, Suite 220 Bethesda, MD 20892

National Cancer Institute

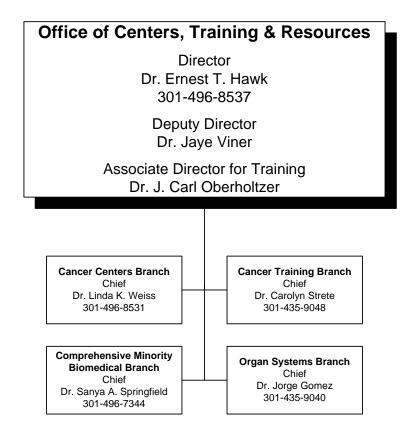






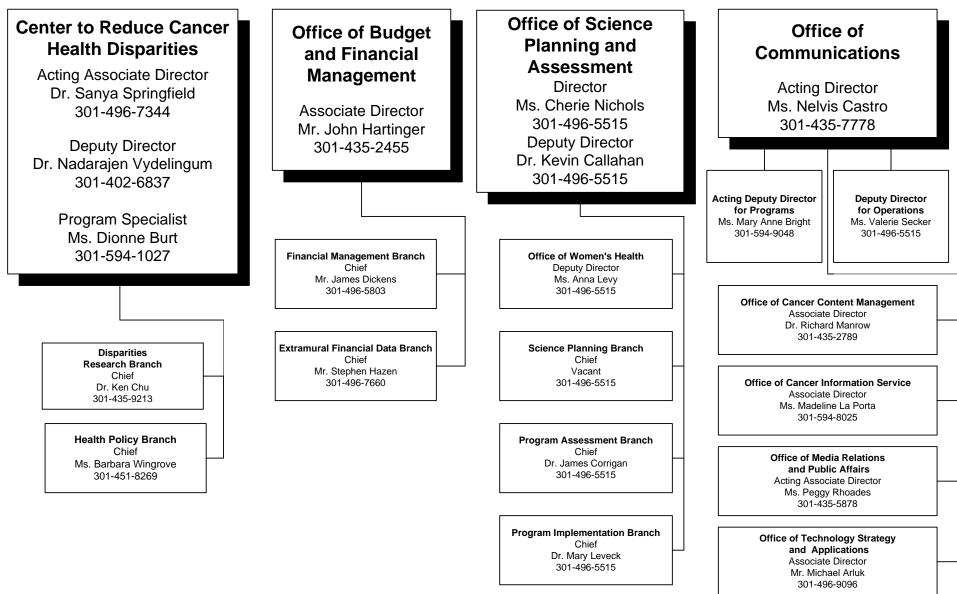


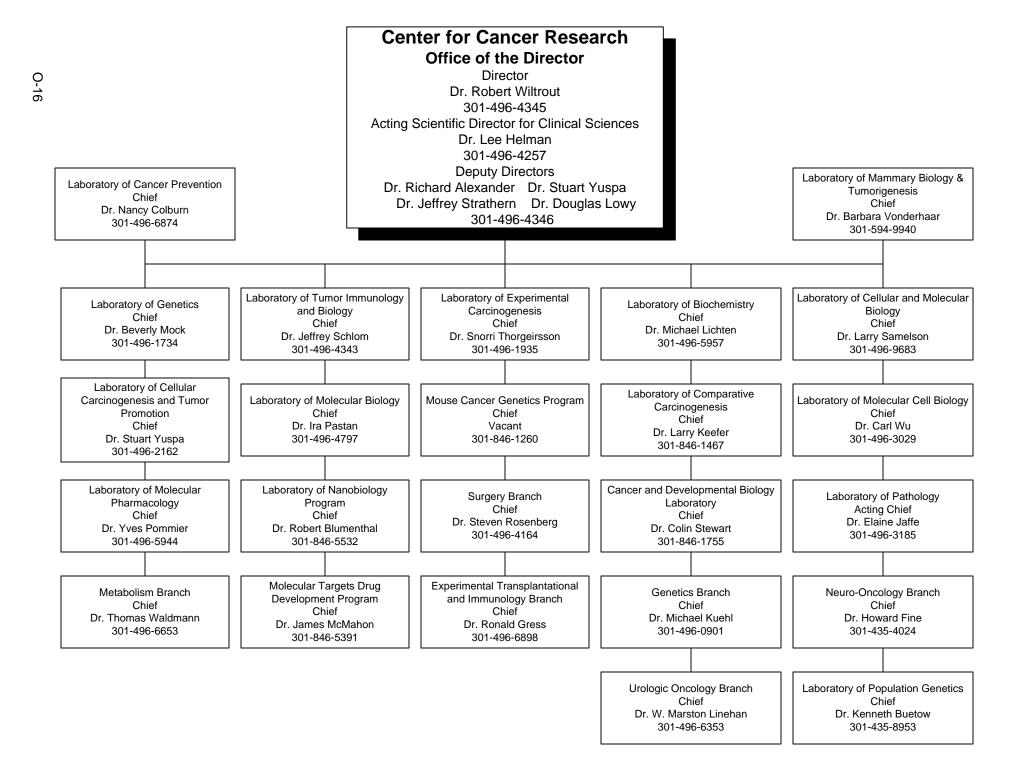
Office of the Director Continued - OD III

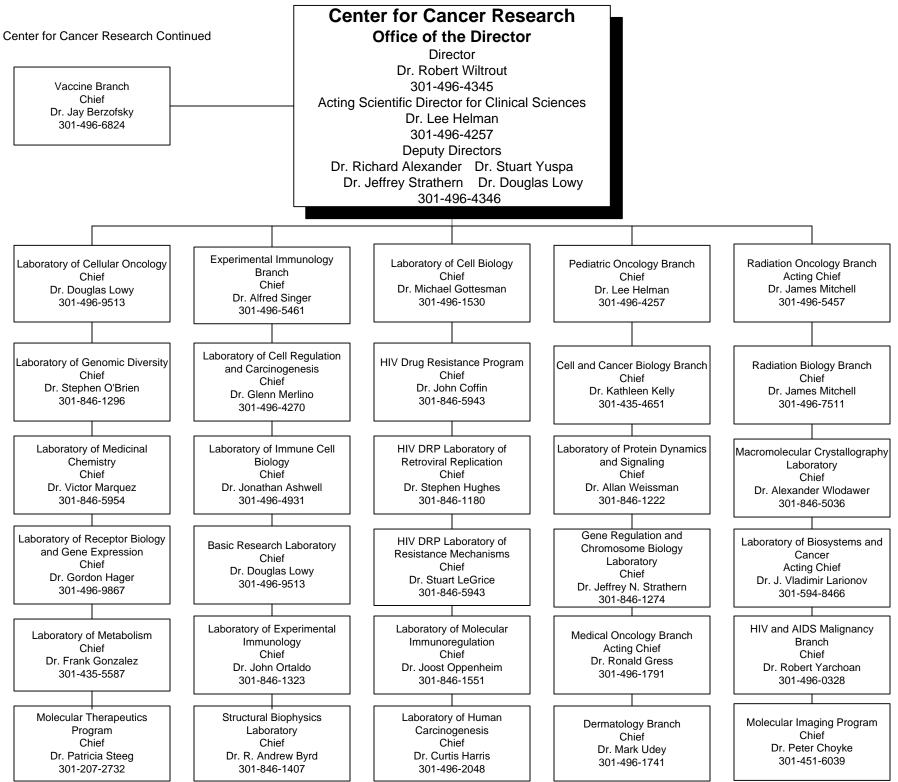


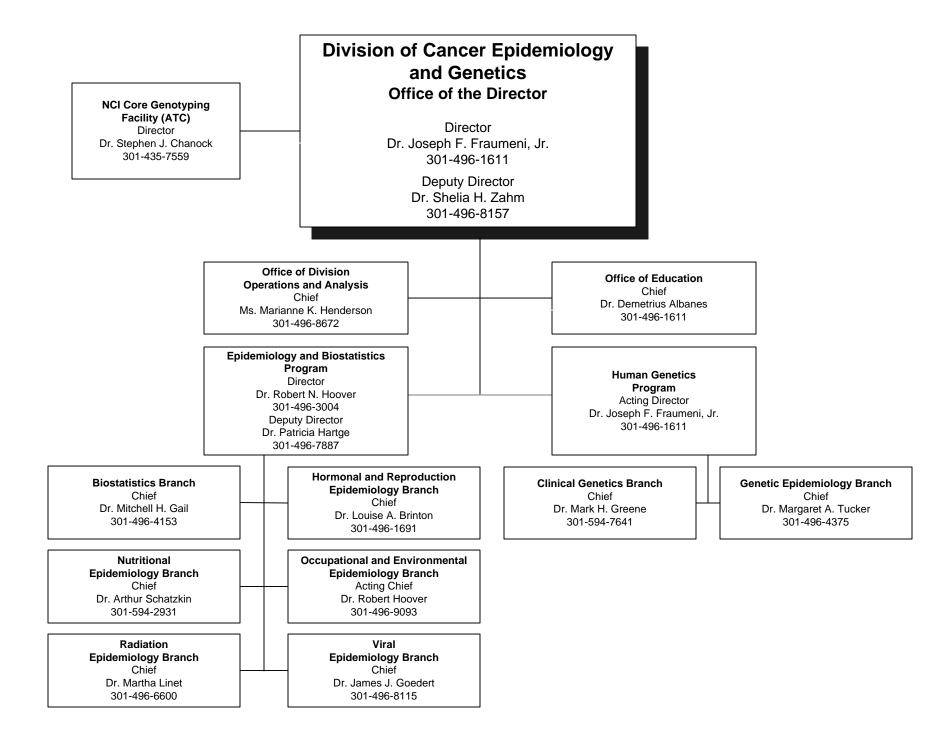
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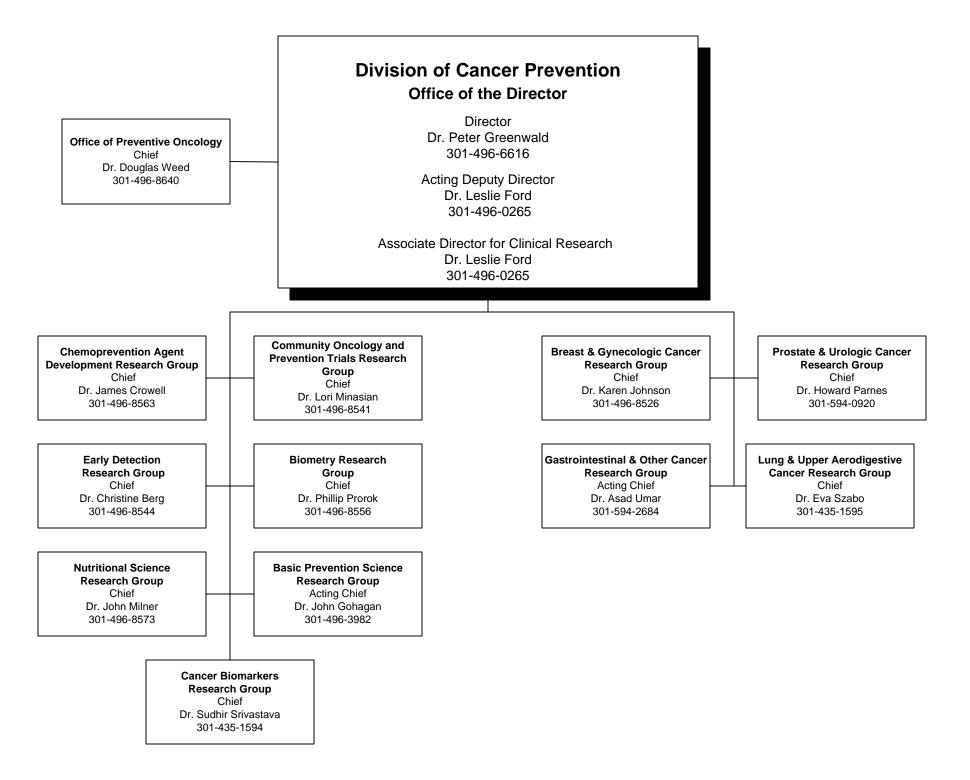
Office of the Director Continued - OD IV

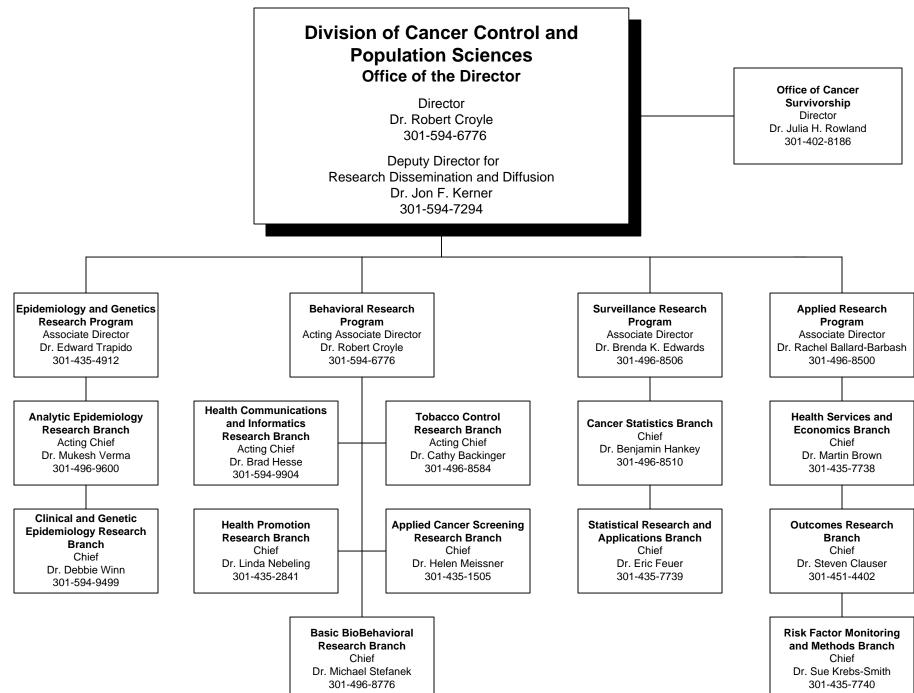


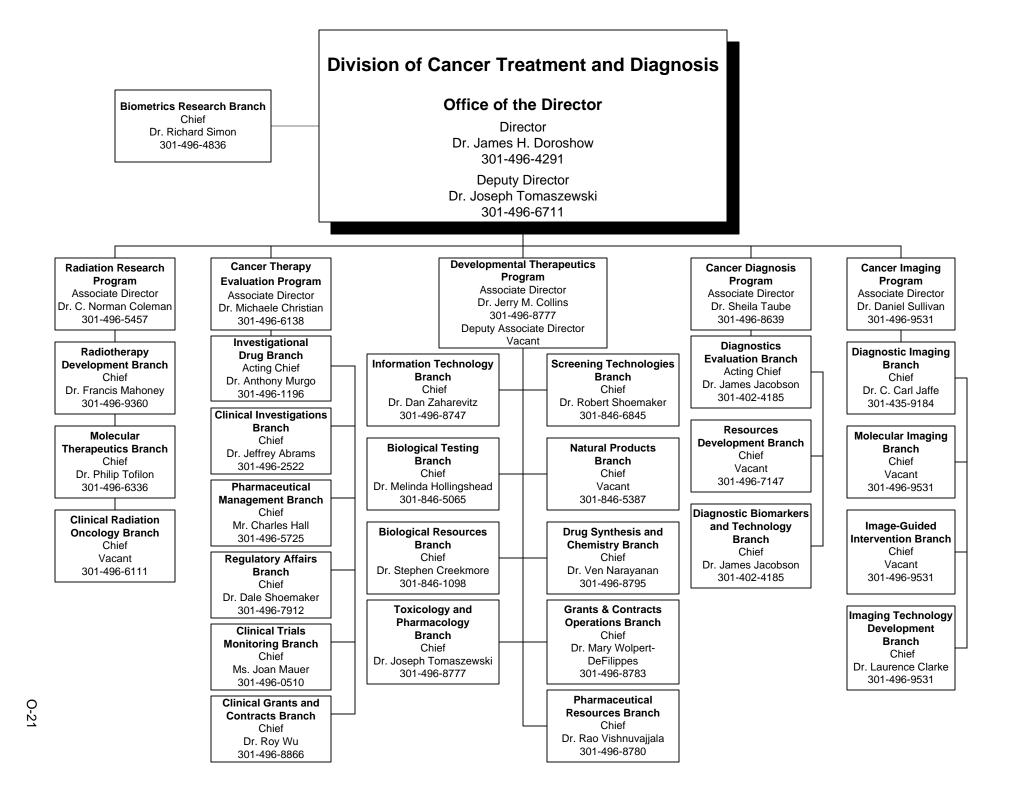


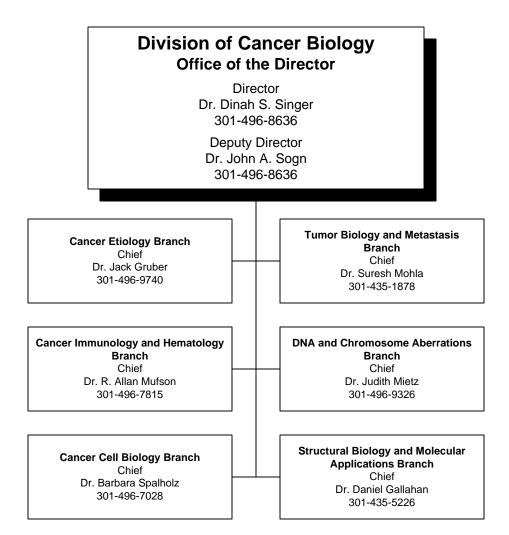


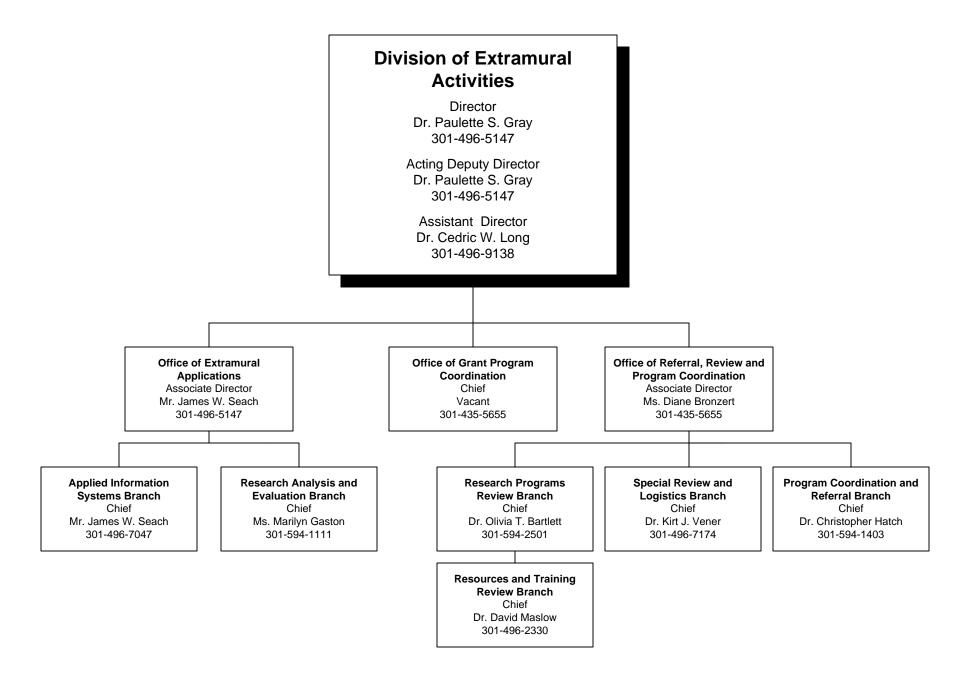












Number of Deaths for the Five Leading Cancer Sites by Age Group and Sex

All	Ages	Unde	r 15	15-	15-34		35-54		55-74		5+
Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Lung & Bronchus	Lung & Bronchus	Leukemia	Leukemia	Leukemia	Breast	Lung & Bronchus	Breast	Lung & Bronchus	Lung & Bronchus	Lung & Bronchus	Lung & Bronchus
89,906	68,084	279	226	531	421	8,650	9,024	47,250	33,047	33,912	28,759
Prostate	Breast	Brain & ONS	Brain & ONS	Brain & ONS	Leukemia	Colon & Rectum	Lung & Bronchus	Colon & Rectum	Breast	Prostate	Colon & Rectum
29,554	41,619	240	218	368	305	3,177	6,189	12,165	16,445	21,001	16,188
Colon & Rectum	Colon & Rectum	Endocrine	Endocrine	NHL	Brain & ONS	Liver & IBD	Colon & Rectum	Prostate	Colon & Rectum	Colon & Rectum	Breast
27,990	27,793	98	76	253	273	2,067	2,475	8,107	8,987	12,464	15,729
Pancreas	Pancreas	Bone & Joints	Soft Tissue	Soft Tissue	Cervix	Pancreas	Ovary	Pancreas	Ovary	Pancreas	Pancreas
15,060	15,717	49	34	181	217	1,877	2,081	7,357	6,460	5,784	8,410
Leukemia	Ovary	Soft Tissue	Bone & Joints	Colon & Rectum	Colon & Rectum	Brain & ONS	Cervix	Esophagus	Pancreas	Leukemia	Ovary
12,104	14,657	44	33	180	142	1,872	1,523	5,334	6,067	5,507	6,004

Source: National Center for Health Statistics (NCHS) Public -use file for 2003 deaths.

NHL = Non Hodgkin's Lymphoma

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

		Number	Age	Percent
		of	Adjusted	of
Rank	Cause	Deaths	Rate*	Total
				Deaths
	All Causes	2,447,946	830.5	100.0%
1	Heart Disease	685,054	231.5	28.0%
2	CANCER	556,890	190.1	22.7%
3	Cerebrovascular Diseases	157,687	53.3	6.4%
4	Emphysema, Bronchitis & Asthma	126,380	43.3	5.2%
5	Accidents	109,201	37.2	4.5%
6	Diabetes Mellitus	74,216	25.3	3.0%
7	Pneumonia & Influenza	65,161	21.9	2.7%
8	Alzheimers	63,457	21.2	2.6%
9	Nephritis & Nephrosis	42,451	14.4	1.7%
10	Septicemia	34,066	11.6	1.4%
11	Suicide and Self-Inflicted Injury	31,477	10.7	1.3%
12	Symptoms, Signs and Ill-Defined Conditions	31,332	10.6	1.3%
13	Chronic Liver Dis and Cirrhosis of the Liver	27,500	9.3	1.1%
14	Hypertension without Heart Disease	21,940	7.4	0.9%
15	Homicide and Legal Intervention	18,114	6.2	0.7%
	Other and III-Defined	403,020	136.6	16.5%

Source: NCHS Public-use file for 2003 deaths.

* Age adjusted rate per 100,000 Population

Estimated New Cancer Cases and Deaths by Sex for All Races 2006

	Estir	mated New Ca	ises	Es	Estimated Deaths		
Primary Site	Total	Male	Female	Total	Male	Female	
All Sites	1,399,790	720,280	679,510	564,830	291,270	273,56	
Oral Cavity and Pharynx	30,990	20,180	10,810	7,430	5,050	2,3	
Tongue	9,040	5,870	3,170	1,780	1,150	-,0	
Mouth	10,230	5,440	4,790	1,870	1,100	7	
Pharynx	8,950	6,820	2,130	2,110	1,540	5	
Other Oral Cavity	2,770	2,050	720	1,670	1,260	4	
Digestive System	263,060	137,630	125,430	136,180	75,210	60,9	
Esophagus	14,550	11,260	3,290	13,770	10,730	3,0	
Stomach	22,280	13,400	8,880	11,430	6,690	4,7	
Small Intestine	6,170	3,160	3,010	1,070	560		
Colon *		49,220	57,460	55,170	27,870	27,3	
	106,680			55,170	27,070	27,3	
Rectum	41,930	23,580	18,350	660	220	4	
Anus, Anal Canal, & Anorectum	4,660	1,910	2,750	660 16 200	220	4	
Liver and Intrahepatic Bile Duct	18,510	12,600	5,910	16,200	10,840	5,3	
Gallbladder & Other Biliary	8,570	3,720	4,850	3,260	1,280	1,9	
Pancreas	33,730	17,150	16,580	32,300	16,090	16,2	
Other Digestive	5,980	1,630	4,350	2,320	930	1,3	
Respiratory System	186,370	101,900	84,470	167,050	93,820	73,2	
Larynx	9,510	7,700	1,810	3,740	2,950	7	
Lung and Bronchus	174,470	92,700	81,770	162,460	90,330	72,1	
Other Respiratory	2,390	1,500	890	850	540	3	
Bones and Joints	2,760	1,500	1,260	1,260	730	5	
Soft Tissues	9,530	5,720	3,810	3,500	1,830	1,6	
Skin (excl. basal & squamous)	68,780	38,360	30,420	10,710	6,990	3,7	
Melanoma-skin	62,190	36,300	27,930	7,910	5,020	2,8	
Other non-epithelial skin	6,590	4,200	27,930 2,490	2,800	5,020 1,970	∠,o 8	
		4,100	2,490		460		
Breast	214,640			41,430		40,9	
Genital Organs	321,490	244,240	77,250	56,060	28,000	28,0	
Cervix Uteri	9,710		9,710	3,700		3,7	
Endometrium (uterus)	41,200		41,200	7,350		7,3	
Ovary	20,180		20,180	15,310		15,3	
Vulva	3,740		3,740	880		8	
Vagina and other genital	2,420		2,420	820		8	
organs, female				07.050			
Prostate	234,460	234,460		27,350	27,350		
Testis	8,250	8,250		370	370		
Penis and other genital	1,530	1,530		280	280		
organs, male							
Urinary System	102,740	70,940	31,800	26,670	17,530	9,1	
Urinary Bladder	61,420	44,690	16,730		8,990	4,0	
Kidney and Renal Pelvis	38,890	24,650	14,240	12,840	8,130	4,7	
Ureter and other urinary organs	2,430	1,600	830	770	410	3	
Eye and Orbit	2,360	1,230	1,130	230	110	1	
Brain and Other Nervous System	18,820	10,730	8,090	12,820	7,260	5,5	
Endocrine Glands	32,260	8,690	23,570	2,290	1,020	1,2	
Thyroid	30,180	7,590	22,590	1,500	630		
Other Endocrine	2,080	1,100	980	790	390	4	
Lymphomas and Myelomas	66,670	34,870	31,800	20,330	10,770	9,5	
Hodgkin Disease	7,800	4,070	3,610	20,330	770	9,5	
Non-Hodgkin Lymphoma	58,870	30,680	28,190	18,840	10,000	8,8	
Multiple Myeloma	16,570	9,250	7,320	11,310	5,680	5,6	
Leukemia	35,070	20,000	15,070	22,280	12,470	9,8	
Lymphocytic Leukemias	13,950	8,430	5,520	6,150	3,490	2,6	
Myeloid Leukemias	16,430	8,900	7,530	9,640	5,390	4,2	
Other Leukemias	4,690	2,670	2,020	6,490	3,590	2,9	
All Other Sites	27,680	13,320	14,360	45,280	24,340	20,9	

Source: Cancer Facts & Figures-2006, American Cancer Society (ACS), Atlanta, Georgia 2006. Excludes basal and squamous cell skin and in situ carcinomas except urinary bladder. Incidence projections are based on rates from the NCI SEER Program 1979-2002.

Estimated deaths come from the NCHS public use data file for the total US.

* Estimated deaths for colon & rectum cancers are combined.

The Cost of Cancer

Cancer treatment spending has risen but remains stable in proportion to total U.S. treatment spending.

The financial costs of cancer treatment are a burden to people diagnosed with cancer, their families, and society as a whole. Cancer treatment accounted for about \$74.0 billion in 2005. This is just under 5 percent of total U.S. spending for medical treatment. The additional economic burden of cancer due to morbidity and premature mortality is estimated to be \$135.9 billion resulting in a total economic burden of cancer in 2005 of \$209.9 billion.

Year	Amount (\$ in millions)	Percent of All Health Care Expenditures
1963	\$1,279	4.35%
1972	3,872	4.96%
1980	13,049	6.01%
1985	18,104	4.81%
1990	27,458	4.46%
1995	41,200	4.69%
2002	60,900	4.57%
2004	72,006	4.67%
2005	74,000	4.60%

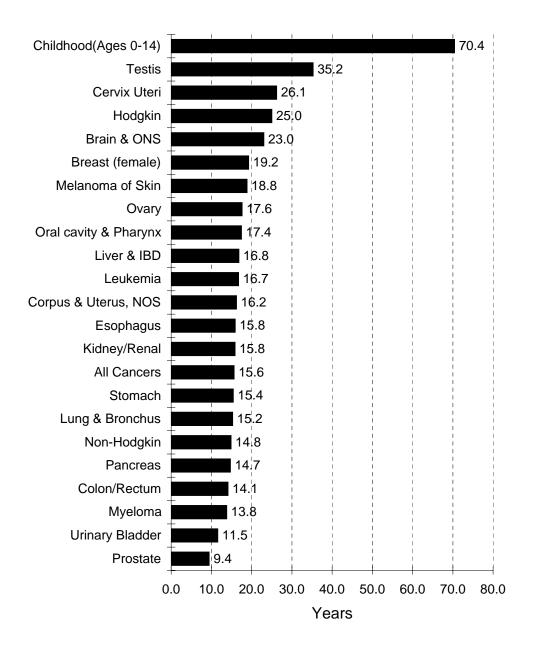
Sources:

Ries LAG, Eisner MP, Kosary CL, Hankey BF, Miller MA, Clegg L, Mariotto A, Feuer EJ, Edwards BK (eds). SEER Cancer Statistics Review, 1975-2001, National Cancer Insitute, Bethesda, MD

Brown ML, Riley GF, SchusslerN, Etzioni RD. Estimating health care costs related to cancer treatment from SEER-Medicare data. *Medical care 2002* Aug; 40 (8 Suppl):IV-104-17.

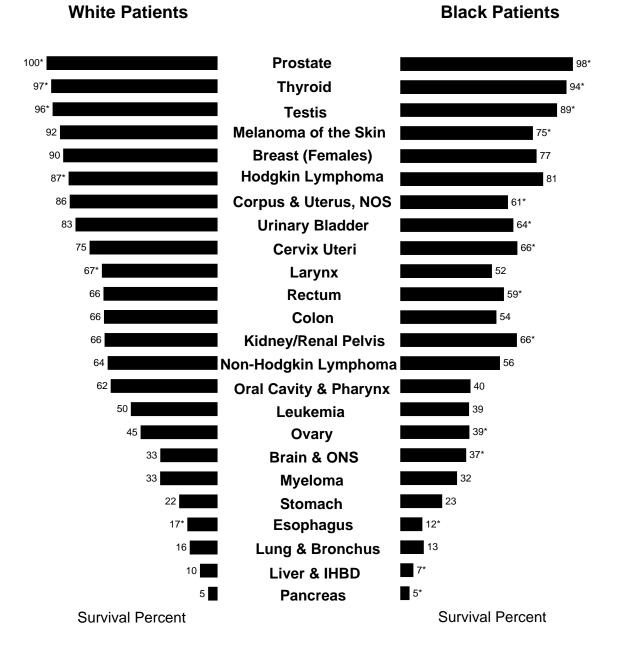
NHLBI Fact Book - 2003, 2005. National Heart, Lung and Blood Institute, Bethesda. Estimates by NHLBI; data from NCHS, HCFA, the Bureau of the Census, and the Institute for Health and Aging, University of California, San Francisco.

Average Years of Life Lost Per Person Dying of Cancer All Races, Both Sexes, 2003



Source: NCHS public-use data and 2003 life tables.

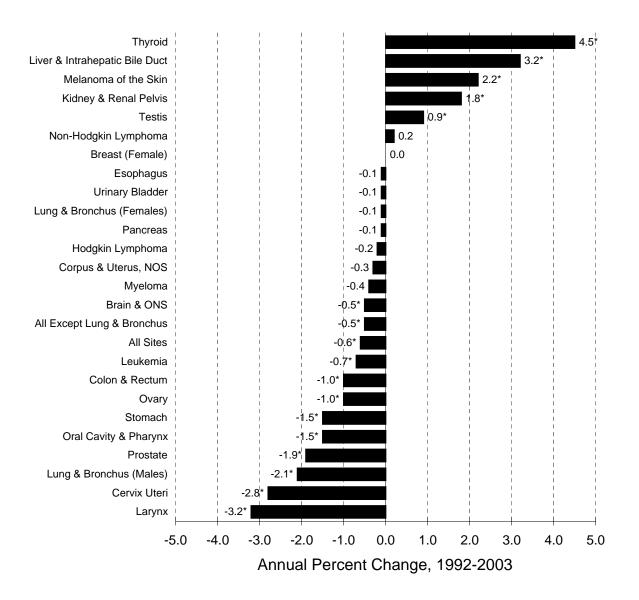
5 Year Relative Survival Rates by Cancer Site SEER Program 1996-2002 Males and Females



Data From NCI SEER Program http://www.seer.cancer.gov/

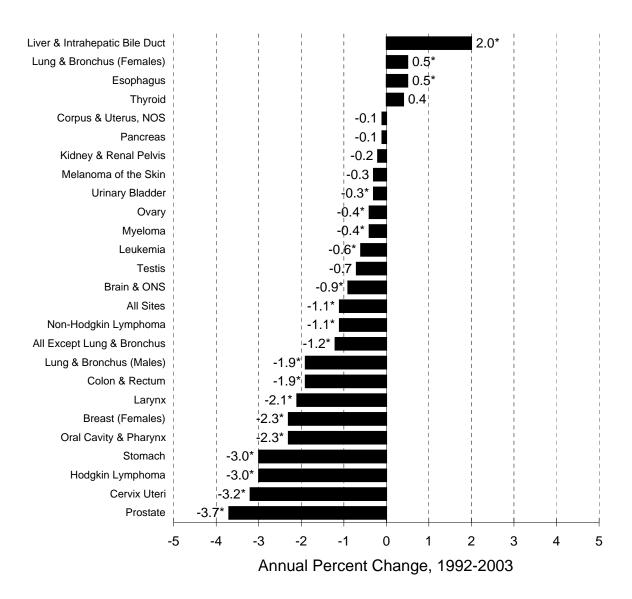
* The relative cumulative rate increased from a prior interval and has been adjusted. The 5-year relative survival rate is calculated using 60 monthly intervals.

Cancer Incidence Rates Annual Percent Changes from 1992 to 2003



* The annual percent change is significantly different from zero (p<.05).

Cancer Mortality Rates Annual Percent Changes from 1992 to 2003



* The annual percent change is significantly different from zero (p<.05).

Cancer Incidence Rates By Race SEER, 1992-2003

	Incidence Rates per 100,000						
Cancer Site	Blacks	Whites	Hispanics	Asian/ Pacific Islander	American Indian/ Alaska Native		
All Sites	524.3	482.2	349.4	334.7	262.5		
Males	709.7	570.4	422.8	388.9	297.8		
Females	401.2	424.8	304.5	297.0	239.4		
Oral Cavity and Pharynx	12.5	10.9	6.5	8.7	7.7		
Esophagus	7.5	4.3	3.0	2.8	3.2		
Stomach	13.5	7.7	13.2	16.9	10.6		
Colon and Rectum	62.5	53.2	38.2	46.2	36.7		
Colon excluding Rectum	48.4	38.6	26.4	31.4	26.5		
Rectum and Rectosigmoid Junction	14.2	14.6	11.8	14.9	10.2		
Liver and IHBD	6.8	4.6	8.9	13.8	7.5		
Pancreas	15.9	10.9	9.8	9.2	7.7		
Larynx	6.6	3.9	2.8	1.7	1.6		
Lung and Bronchus	81.1	63.5	33.1	42.3	37.7		
Males	121.5	80.8	46.7	60.5	51.3		
Females	53.6	51.3	23.8	28.2	27.2		
Melanoma of the Skin	1.0	19.5	3.9	1.3	2.3		
Breast (females)	120.2	137.3	86.5	91.5	63.4		
<50 years	43.2	42.9	31.0	37.4	22.8		
50+ years	322.0	384.6	231.7	233.3	169.5		
Cervix Uteri	12.3	9.2	16.7	10.1	7.3		
Corpus and Uterus, NOS	18.5	25.8	16.3	16.7	11.3		
Ovary	10.4	15.0	11.7	10.2	9.3		
Prostate	280.7	174.4	140.7	103.0	66.3		
Testis	1.3	6.0	3.4	1.9	2.9		
Urinary Bladder	12.5	22.4	10.7	9.6	5.2		
Kidney and Renal Pelvis	13.1	11.6	10.9	6.2	12.0		
Brain and Other Nervous System	4.1	7.1	5.0	3.5	2.5		
Thyroid	4.1	7.2	6.4	7.9	4.3		
Hodgkin lymphoma	2.4	2.9	2.3	1.1	0.6		
Non-Hodgkin lymphoma	14.5	20.3	16.0	13.5	8.5		
All Sites Except Lung and Bronchus	443.3	418.7	316.4	292.4	224.8		
Males	588.2	489.6	376.1	328.3	246.5		
Females	347.6	373.4	280.7	268.8	212.1		

Data source: NCI SEER Program.

NCI's SEER Program, adjusted to the 2000 US population age distribution. Rates for Hispanics exclude cases diagnosed in Alaska, Hawaii and Rural Georgia.

Cancer Mortality Rates By Race United States, 1992-2003

	Mortality Rates per 100,000						
				Asian/ Pacific	American Indian/		
Cancer Site	Blacks	Whites	Hispanics	Islander	Alaska Native		
All Sites	257.0	199.7	136.4	123.9	133.7		
Males	355.9	250.5	173.6	153.8	163.0		
Females	198.2	167.2	111.6	101.7	114.3		
Oral Cavity and Pharynx	4.6	2.8	1.8	2.5	2.3		
Esophagus	7.2	4.1	2.4	2.1	2.7		
Stomach	9.4	4.3	7.3	9.5	5.4		
Colon and Rectum	28.4	20.9	14.1	13.3	13.6		
Liver and IHBD	6.1	4.1	7.3	10.8	5.6		
Pancreas	14.3	10.3	8.4	7.4	6.2		
Larynx	2.9	1.3	1.0	0.5	1.0		
Lung and Bronchus	66.4	56.7	25.3	28.4	35.8		
Males	107.6	78.6	39.8	40.8	48.7		
Females	39.4	41.2	14.9	19.0	26.4		
Melanoma of the Skin	0.5	3.0	0.8	0.4	0.7		
Breast (females)	36.0	27.7	17.5	12.8	14.4		
<50 years	10.8	6.0	4.7	3.9	3.1		
50+ years	102.0	84.5	51.2	36.3	44.0		
Cervix Uteri	6.0	2.7	3.7	2.9	3.1		
Corpus and Uterus, NOS	7.0	3.9	3.2	2.2	2.4		
Ovary	7.5	9.3	6.2	4.8	5.2		
Prostate	72.2	30.6	24.1	13.8	21.1		
Testis	0.2	0.3	0.3	0.1	0.2		
Urinary Bladder	4.0	4.5	2.4	1.8	1.7		
Kidney and Renal Pelvis	4.2	4.3	3.8	1.9	4.8		
Brain and Other Nervous System	2.7	5.0	2.9	1.9	2.0		
Thyroid	0.4	0.5	0.6	0.6	0.3		
Hodgkin lymphoma	0.5	0.5	0.5	0.2	0.2		
Non-Hodgkin lymphoma	5.6	8.6	6.4	5.2	4.3		
All Sites Except Lung and Bronchus	190.7	143.0	111.1	95.5	98.0		
Males	248.2	171.9	133.9	113.0	114.2		
Females	158.8	126.0	96.7	82.7	87.9		

Data source: NCHS public-use data files. Rates for Hispanics exclude cases diagnosed in Connecticut, Maine, Maryland, Minnesota, New Hampshire, New York, North Dakota, Oklahoma, and Vermont.

The Prevalence of Cancer: Estimated Number of Persons Diagnosed With Cancer United States, 2002

Primary Sita	E	Estimated Prevale	ence
Primary Site	Total ^	Males	Females
ALL SITES ^a	10,146,324	4,503,895	5,642,429
Brain and			
Other Nervous System	105,960	56,865*	49,095*
Breast	2,290,049	11,780	2,278,269
Cervix	223,441*		223,441*
Colon and Rectum	1,051,682	505,267	546,415
Corpus and Uterus	571,854		571,854
Esophagus	23,402	17,651	5,751
Hodgkin Lymphoma	145,501	76,257	69,244
Kidney and Renal Pelvis	221,270	130,654	90,616
Larynx	97,903	78,348	19,555
Leukemia	189,865	106,434	83,431
Acute Lymphocytic Leukemia	44,730#	24,523#	20,207#
Lung and Bronchus	350,679	174,384	176,295
Melanoma of the Skin	629,822	304,097	325,725
Non-Hodgkin Lymphoma	347,039	180,337	166,702
Oral Cavity and Pharynx	231,799	147,272	84,527
Ovary	169,875		169,875
Pancreas	26,079	12,491	13,588
Prostate	1,831,929	1,831,929	
Stomach	59,311	34,258	25,053
Testis	164,009	164,009	
Thyroid	327,403	74,985	252,418
Urinary Bladder	499,199	367,550	131,649
Childhood (0-19 yrs)	215,915#	110,475#	105,440#

Source: U.S. 2002 cancer prevalence rates are based on 2002 cancer prevalence proportions from the nine SEER registries and 1/1/2002 population estimates based on the average of 2001 and 2002 population estimates from the U.S. Bureau of the Census.

^a The All Sites figures are estimates based on all cancer sites, not just those listed here. ^ The total column represents prevalence estimates using the completeness index method (Capocaccia et. al. 1997, Merrill et. al. 2000). Totals are obtained by summing males and females and not by modeling.

* Completeness index was approximated using empirical data from historical Connecticut tumor registry by age at prevalence

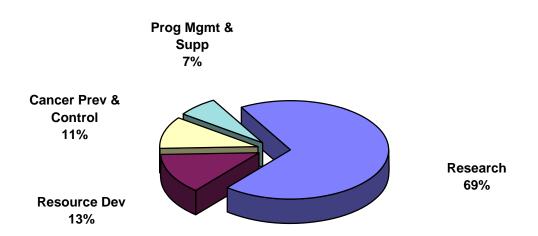
Current methodology does not allow for the estimation of complete prevalence for childhood cancer or acute lymphocytic leukemia. Estimates shown are 27 year limited-duration prevalence.

A. Actual Obligations Resulting From Appropriated Funds:

	FY 2005 Appropriation Labor/HHS/ ED Recission Across the Board .80% Reduction NIH 1% Transfer Assessment for NIH Roadmap Activities Lapse Actual Obligations Subtotal	\$4,865,525 -1,353 -38,914 -30,505 -9 4,794,744
В.	Reimbursable Obligations: Reimbursements	15,528
C.	Total NCI Obligations:	\$4,810,272 *

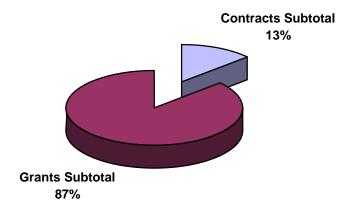
Program Structure Fiscal Year 2005

(Dollars in Thousands)



Budget Activity	Amount	Percent
Research:		
Cancer Causation	\$1,101,861	23.0%
Detection and Diagnosis Research	368,144	7.7%
Treatment Research	1,069,308	22.3%
Cancer Biology	786,200	16.4%
Subtotal Research	3,325,513	69.4%
Resource Development:		
Cancer Centers Support	455,241	9.5%
Research Manpower Development	179,501	3.7%
Buildings and Facilities	7,936	0.2%
Subtotal Resource Development	642,678	13.4%
Cancer Prevention and Control	510,829	10.7%
Program Management and Support	315,724	6.5%
*Total NCI	4,794,744	100.0%

(Dollars in Thousands)



Mechanism	Amount	Percent
Contracts:		
R&D Contracts	\$282,270	7.5%
Interagency Agreements	83,942	2.2%
Cancer Control Contracts	130,650	3.5%
Buildings and Facilities	7,936	0.2%
Construction Contracts	0	0.0%
Subtotal Contracts	504,798	13.4%
Grants:		
Research Project Grants	2,188,884	58.3%
Cancer Centers/Specialized Centers/SPORES	454,252	12.1%
NRSA	67,299	1.8%
Other Research Grants	308,972	8.2%
Cancer Control Grants	231,809	6.2%
Construction Grants	0	0.0%
Subtotal Grants	3,251,216	86.6%
Total Extramural Funds	3,756,014	100.0%
Total Intramural/RMS/Control Inhouse	1,038,730	
*Total NCI	\$4,794,744	

NCI Obligations by Mechanism, Fiscal Year 2005 (Dollars in Thousands)

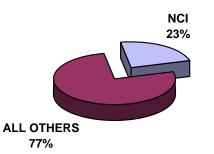
		Number	Amount	% of Total
Research Project	Non-Competing	3,855	1,600,584	33.4%
Grants	Administrative Supplements	(292)	50,655	1.1%
	Competing	1,292	439,870	9.2%
	Subtotal, without SBIR/STTR Grants	5,147	2,091,109	43.6%
	SBIR/STTR Grants	265	97,775	2.0%
	Subtotal, Research Project Grants	5,412	2,188,884	45.7%
Centers & SPOREs	Cancer Centers Grants-P30	61	255,263	5.3%
	SPOREs-P20/P50	57	133,025	2.8%
	Other Specialized Centers	34	65,964	1.4%
	Subtotal, Centers	152	454,252	9.5%
Other Research	Career Program		,	0.0%
	Temin & Minority Mentored Awards-K01	127	17,734	0.4%
	Estab. Inv. Award-K05	20	2,554	0.1%
	Preventive Oncology-K07	110	13,529	0.3%
	Clinical Investigator-K08	141	17,841	0.4%
	Clinical Oncology-K12	13	7,436	0.2%
	Transitional Career Development-K22	35	5,344	0.1%
	Mentored Patient Oriented RCDA-K23	60	7,533	0.2%
	Mid-Career Invest. & Patient Orient. Res-K24	16	2,306	0.1%
	Mentored Quant. Res Career-K25	9	1,227	0.0%
	Inst. Curr. Award-K30	0	1,147	0.0%
	Subtotal, Career Program	531	76,652	1.6%
	Cancer Education Program-R25	101	34,581	0.7%
	Clinical Cooperative Groups-U10	63	142,847	3.0%
	Minority Biomedical Support-S06	03	3,367	0.1%
	Scientific Evaluation-U09/T09	0	8,621	0.2%
	Continuing Education	3	338	0.0%
	Resource Grants-R24/U24	51	28,178	0.6%
	Explor Coop Agreement-U56	29	12,487	0.3%
	Conference Grants-R13	96	1,900	0.0%
	Subtotal, Other Research Grants	874	308,972	6.4%
Subtotal, Research G		6,438	2,952,108	61.6%
NRSA Fellowships	Trainees:	1,469	67,299	1.4%
	R&D Contracts	286	344,336	7.2%
R&D Contracts	SBIR Contracts	32	6,721	0.1%
	Subtotal, Contracts	318	351,056	7.3%
lature manufactoria		1,832	586,990	12.2%
Intramural Research	Program	1,032	124,019	2.6%
	NIH Management Fund/SSF AssessmentSubtotal, Intramural ResearchFTEs:	1,832	711,009	14.8%
DMO		612		3.0%
RMS	Research Mgmt and Support	012	145,709	0.6%
	NIH Management Fund/SSF Assessment	640	27,993	
<u> </u>	Subtotal, RMS FTEs:	612	173,702	3.6%
Cancer Prevention	Cancer Control Grants	221	231,810	4.8%
and Control	Cancer Control Contracts	178	145,806	3.0%
	Inhouse	410	145,232	3.0%
	NIH Management Fund/SSF Assessment	440	8,786	0.2%
Duildings and Freilit	Subtotal, Prevention and Control FTEs:	410	531,634	11.1%
Buildings and Facilitie			7,936	0.2%
Construction		0.054	0	0.0%
*Total NCI	FTEs:	2,854	4,794,744	100.0%

Division Obligations by Mechanism, Fiscal Year 2005 (Dollars in Thousands)

С	CR	DCEG	DCTD	DCB	DCCPS	DCP	DEA	OD	Research Grants	Program Support
		0020	0010	202	20010	201	BER	00		58,721
			EG DCTD DCB DCPS DCP DEA OD Grants Sup 1 1 1,541,863 5 5,0655 1 439,870 1 439,870 1 2,032,388 5 1 1 2,032,388 5 2,130,163 5 5 1 2,130,163 5 5,019 133,025 1 1 133,025 1	00,721						
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			5 0 1 9					250 244	2,100,100	00,121
			0,010							
			4,732	14.667	9,409					
								17,734		
								2,554		
								13,529		
								17,841		
								7,436		
									142,847	
								34.581		0
			9.751	14.667	9.409					58,721
			,	,	,				, ,	,
		18,664	108.393	2.395	29,709					55,480
						485				,
		19,243								55,480
37	76,842	50,520		-,	- ,					23,926
	,									124,019
37	76,842	50,520	408					135,294		147,945
				11,065			12,564			21,349
										27,993
			32,169	11,065			12,564	68,564		49,342
			19,506		52,193	132,533		27,577		
<u> </u>		5,932	9,548		33,254	73,663		23,409		
<u> </u>	984	10,548	7,216		27,393	19,294		74,655		5,142
					,			,		8,786
	984	16,480	36,271		112,840	225,491		125,641		13,928
			,		,			7,936		
	77,826	86,243	189,480	29,721	153,297	225,975	12,564	1,066,321	2,327,902	325,416

NIH Management Fund, Service & Supply Fund, and GSA Rent Fiscal Year 2005

(Dollars in Thousands)



DISTRIBUTION OF NCI PAYMENT	Amount	Share of NCI
Clinical Center	\$90,987	56.6%
Center for Scientific Review	8,497	5.3%
Center for Information Technology	7,901	4.9%
Service & Supply Fund	13,740	8.5%
Other Research Services	13,537	8.4%
Other OD	26,136	16.3%
*Total Management Fund and SSF	160,798	100.0%
Other NIH Institutes Management Fund and SSF	529,853	
Total NIH Management Fund and SSF	\$690,651	

*Excludes GSA Rental Payments for Space which totaled \$42,449 in FY 2005

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 : All building rental, including utilities and guard services.

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

Service & Supply Fund : Animal support, collaborative research, conference services, hazardous waste management, interpreting services, library, occupational health and safety, property management support and radiation safety

Special Sources of Funds

CRADAs

As a result of the Federal Technology Transfer Act of 1986 (PL 99-502), 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.

NCI CRADA	NCI CRADA Receipts Deposited to the U.S. Treasury									
	(Dollars in Thousands)									
	Carryover									
	from Prior									
Fiscal Year	Year	Collections	Obligations							
1995	2,448	2,811	1,395							
1996	3,864	2,017	1,394							
1997	4,486	13,378	6,639							
1998	11,217	5,351	7,266							
1999	9,302	3,645	4,707							
2000	8,240	2,717	4,618							
2001	6,339	5,295	2,770							
2002	8,864	5,048	2,380							
2003	11,533	5,221	5,361							
2004	11,351	5,080	5,469							
2005	10,962	6,858	4,253							

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 Federal Technology Transfer Act (PL 99-502). Receipts are also used to support costs associated with processing and collecting royalty income and for technology transfer efforts in NCI and NIH.

NCI Royalty Income Funding History

	i ter i ter ang i neter y										
	(Dollars in Thousands)										
		Inventor									
Years	Collections*	Payments	Other								
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								
2000/2001	37,040	4,811	32,229								
2001/2003	27,443	6,210	21,233								
2002/2004	42,565	3,961	38,604								
2003/2005	27,271	5,262	22,009								
2004/2006	26,923	4,951	21,972								
**2005/2007	34,086	5,000	29,086								

* Does not include assessments by NIH.

**2005/2007 collections and payments are estimates.

Stamp Out Breast Cancer

The Stamp Out Breast Cancer Act (PL 105-41) was established in August 1997 and extended in July 2000 (PL 106-253) and again in November 2005 (PL 109-100). This act allows postal customers to contribute to funding for breast cancer research through their voluntary purchases of special rate postage stamps from the 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 November 2005, NCI has received \$33,561,283. NCI has used these funds for research projects directed towards breast cancer research. Thus far, two major programs have been funded -- the "Insight Awards to Stamp Out Breast Cancer" and the "Breast Cancer Research Stamp Exception Program." In FY 2005, 7 Awards for a total of \$2,987K were funded from Breast Cancer Stamp funds.

Funding for Various Research Areas

(Dollars in Millions)

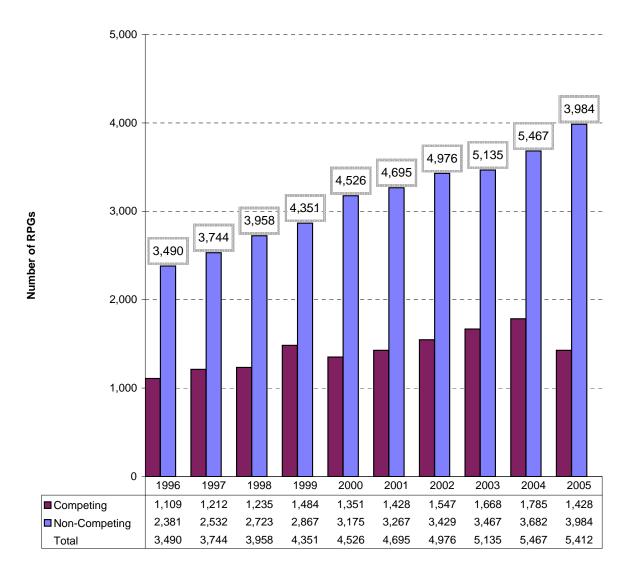
The National Cancer Institute reports how appropriated funds are spent in a number of different categories or classifications including specific cancer sites, cancer types, diseases related to cancer, as well as types of research mechanisms. The table below represents funding levels for frequently requested 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.

Disease Area	2001 Actual	2002 Actual	2003 Actual	2004 Actual	2005 Actual
Total NCI Budget	\$3,753.7	\$4,176.7	\$4,592.3	\$4,723.9	\$4,794.7
AIDS	237.8	254.4	263.4	267.0	265.9
Brain & CNS	80.7	95.2	111.5	132.3	124.9
Breast Cancer	475.2	522.6	548.7	566.2	560.1
Cervical Cancer	72.6	67.6	79.0	79.0	81.7
Clinical Trials	648.6	702.1	799.5	800.0	781.8
Colorectal Cancer	207.4	245.0	261.6	262.0	253.1
Head and Neck Cancers	50.0	58.9	77.7	88.2	89.5
Hodgkins Disease	10.2	11.8	16.5	17.4	17.2
Leukemia	154.0	177.2	200.9	214.7	220.6
Liver Cancer	54.5	62.5	63.7	63.0	60.5
Lung Cancer	206.5	237.5	273.5	276.5	266.1
Melanoma	71.8	82.3	90.7	94.9	102.9
Multiple Myeloma	19.7	20.8	26.3	23.9	28.2
Non Hodgkin's Lymphoma	79.5	85.6	95.2	99.6	107.0
Ovarian Cancer	76.9	93.5	99.4	99.5	97.7
Pancreatic Cancer	21.8	33.1	42.3	52.7	66.7
Prostate Cancer	258.0	278.4	305.2	308.5	309.0
Stomach Cancer	9.0	11.4	13.4	11.6	11.0
Uterine Cancer	18.8	23.1	25.5	27.0	31.1

Research Project Grants Number of Awards

Fiscal Years 1996 - 2005

Includes Small Business Innovation Research and Small Business Technology Transfer Awards



RPGs Requested and Awarded

Fiscal Years 1996 - 2005

(Dollars in Thousands)

		_	•	uested	Award		Success Rate	
iscal Year		Туре	No.	Amt.	No.	Amt.		
	Competing	New	3,071	\$733,313	682	\$142,249		
1996		Renewal	947	367,270	422	139,995		
		Supplement	10	1,921	5	694		
		Subtotal	4,028	1,102,504	1,109	282,938	27.5%	
	Non-Competing				2,381	751,592		
	Total				3,490	1,034,530		
	Competing	New	3,328	\$828,653	815	\$160,763		
	compound	Renewal	815	354,054	392	146,912		
1997		Supplement	14	3,136	5	755		
		Subtotal	4,157	1,185,843	1,212	308,430	29.2%	
		Subiolai	4,157	1,100,040			29.2%	
	Non-Competing				2,532	814,885		
	Total			•	3,744	1,123,315		
	Competing	New	3,054	\$797,477	847	\$189,746		
		Renewal	697	283,562	382	137,764		
1998		Supplement	18	4,299	6	1,421		
		Subtotal	3,769	1,085,338	1,235	328,931	32.8%	
	Non-Competing				2,723	901,845		
	Total				3,958	1,230,776		
	Competing	New	3,905	\$1,091,110	1,088	\$237,187		
		Renewal	757	340,075	390	145,623		
1999		Supplement	12	3,882	6	2,353		
1333		Subtotal	4,674	1,435,067			31.8%	
		Subiolai	4,074	1,435,067	1,484	385,163	31.0%	
	Non-Competing				2,867	976,610		
	Total				4,351	1,361,773		
2000	Competing	New	4,116	\$1,253,002	957	\$251,628		
		Renewal	839	435,207	392	175,908		
		Supplement	11	2,379	2	231		
		Subtotal	4,966	1,690,588	1,351	427,767	27.2%	
	Non-Competing				3,175	1,100,234		
	Total				4,526	1,528,001		
	Competing	New	4,342	\$1,374,538	1,050	\$290,707		
	compound	Renewal	856	437,455	372	173,722		
2001		Supplement	29	11,108	6	1,214		
2001							27.20/	
		Subtotal	5,227	1,823,101	1,428	465,643	27.3%	
	Non-Competing				3,267	1,213,098		
	Total			<u> </u>	4,695	1,678,741		
	Competing	New	4,539	\$1,407,475	1,142	\$302,217		
		Renewal	861	404,789	384	186,087		
2002		Supplement	42	8,512	21	3,499		
		Subtotal	5,442	1,820,776	1,547	491,803	28.4%	
	Non-Competing				3,429	1,356,138		
	Total				4,976	1,847,941		
	Competing	New	5,323	\$1,675,039	1,222	\$347,446		
		Renewal	955	447,122	441	194,084		
2003		Supplement	20	4,671	5	1,338		
2003		Subtotal	6,298				26.5%	
	Non Compating	Subiolai	0,290	2,126,832	1,668	542,868	20.0%	
	Non-Competing				3,467	1,457,144		
	Total	Nam	0.550	CO 045 454	5,135	2,000,012		
	Competing	New	6,558	\$2,045,451	1,333	\$339,925		
		Renewal	988	518,201	445	210,790		
2004		Supplement	24	8,337	7	2,196		
		Subtotal	7,570	2,571,989	1,785	552,911	23.6%	
	Non-Competing				3,682	1,549,727		
	Total				5,467	2,102,638		
	Competing	New	6,357	\$2,239,503	1,086	\$309,507		
C		Renewal	1,050	473,898	335	162,857		
	1							
2005		Supplement	<u></u>	6 1 1 7	7	1 105		
2005		Supplement	22	6,147	7	1,185	10.00/	
2005	Non-Competing	Supplement Subtotal	22 7,429	6,147 2,719,548	7 1,428 3,984	1,185 473,549 1,656,614	19.2%	

Includes Small Business Innovation Research and Small Business Technology Transfer Awards.

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

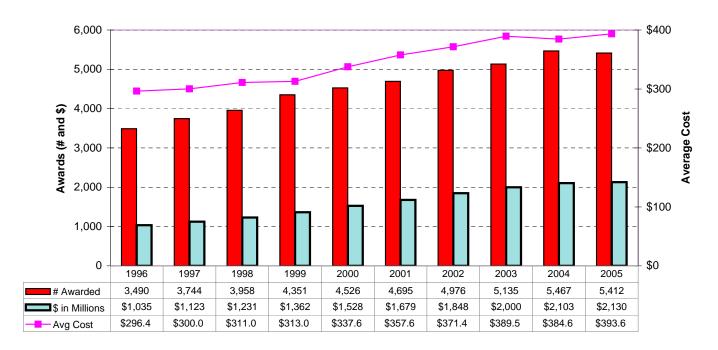
The requested data excludes applications not recommended for further review.

Totals exclude Assessments for Program Evaluation and projects awarded with Stamp Out Breast Cancer Funds.

RPG Awards by Activity Code Fiscal Years 1996 - 2005*

(Dollars in Thousands; Activity Code Descriptions on next page)

·		R01	P01	R35	R37	R29	RFA	U01	U19	R03	R21	R33	R15	R55	R56	SBIR/ STTR	TOTAL
1996	#	1,964	144	65	110	388	268	226		85	46			14		180	3,490
1330	\$	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
1337	\$	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
1000	\$	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
2000	#	3,011	179	21	60	314	269	18		100	223	20		5		306	4,526
	\$	898,764	286,234	19,413	24,688	34,769	132,872	13,617		7,034	32,897	10,074	99	450		67,090	1,528,001
2001	#	3,231	178	1	61	210	260	18		122	231	49	3	3		328	4,695
	\$	1,008,199	301,115	2,186	26,682	23,738	150,224	14,873		9,024	42,326	23,883	358	300		75,833	1,678,741
2002	#	3,376	173		65	112	267	17		186	308	79	10	9		374	4,976
	\$	1,093,908	317,632		29,445	12,471	177,195	17,531		14,115	57,633	39,317	1,477	850		86,367	1,847,941
2003	#	3,573	178		70	14	252	27		203	360	81	21			356	5,135
	\$	1,207,387	336,607		35,360	1,584	173,342	31,126		15,207	67,742	37,714	3,086			90,857	2,000,012
2004	#	3,780	177		73	0	233	26		240	425	96	20			397	5,467
2004	\$	1,277,185	344,489		37,888	53	168,539	31,377		18,067	77,970	42,931	4,560			99,579	2,102,638
2005	#	3,848	176		74		254	30	1	223	430	88	20	2	1	265	5,412
	\$	1,312,762	338,660		40,007		171,403	34,100	1,049	16,894	76,566	36,250	4,091	200	407	97,775	2,130,164



*EXCLUDES projects awarded with the Stamp Out Breast Cancer Funds and Program Evaluation.

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
B 6 6	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
001	named investigator(s) in an area representing his/her specific interest and competencies
U19	Research Program Cooperative Agreements support research programs that have multiple projects directed
0.0	towards specific major objective, basic theme, or program goal, requiring a broad-based, multidisciplinary, and
	often long-term, approach.
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.
R56	High-Priority, Short-Term Project Award provide limited interim support to enable an applicant to gather
	additional data for revision of a new or competing renewal application.
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
DAA	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.
1142	
U43	Small Business Innovation Research (SBIR) Cooperative Agreement - Phase I utilized when an assistance
	relationship will exist between the institute and a recipient and in which substantial programmatic involvement is anticipated between the institute and the recipient during performance of the contemplated activity.
U44	Small Business Innovation Research (SBIR) Cooperative Agreement - Phase II in-depth development of
V 77	
	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), Fiscal Year 2005 (Dollars in Thousands)

State	Grantee Institution	Туре	Amoun
Alabama	University of Alabama at Birmingham	Comprehensive	\$5,80
Arizona	University of Arizona	Comprehensive	4,09
California	Burnham Institute	Lab/Basic	3,39
	Beckman Research Institute of City of Hope	Comprehensive	2,41
	Salk Institute for Biological Sciences	Lab/Basic	2,87
	University of California Davis	Clinical	3,02
	University of California Irvine	Comprehensive	2,57
	University of California Los Angeles	Comprehensive	4,52
	University of California San Diego	Comprehensive	6,55
	University of California San Francisco	Comprehensive	7,12
	University of Southern California	Comprehensive	6,10
Colorado		· ·	
	University of Colorado Health Sciences Center	Comprehensive	3,56
Connecticut	Yale University	Comprehensive	8
District of Columbia	Georgetown University	Comprehensive	3,12
Florida	H. Lee Moffitt Cancer Center and Research Institute	Comprehensive	2,34
Hawaii	University of Hawaii at Manoa	Clinical	1,50
llinois	Northwestern University	Comprehensive	4,66
	University of Chicago	Clinical	3,83
ndiana	Indiana University - Purdue University at Indianapolis	Clinical	1,46
Indiana		Lab/Basic	
	Purdue University West Lafayette		1,26
owa	University of Iowa	Comprehensive	2,44
Vaine	Jackson Laboratory	Lab/Basic	2,69
Maryland	Johns Hopkins University	Comprehensive	6,55
Massachusetts	Dana-Farber Cancer Institute	Comprehensive	4,52
	Massachusetts Institute of Technology	Lab/Basic	2,90
Vichigan	University of Michigan at Ann Arbor	Comprehensive	5,16
viloringari	Wayne State University	Comprehensive	2,75
			,
Vinnesota	Mayo Clinic Rochester	Comprehensive	4,97
	University of Minnesota Twin Cities	Comprehensive	3,53
Missouri	Washington University	Clinical	4,33
Nebraska	University of Nebraska Medical Center	Clinical	1,45
New Hampshire	Dartmouth College	Comprehensive	2,91
New Jersey	Robert Wood Johnson Medical School	Comprehensive	3,25
New Mexico	University of New Mexico Albuquerque	Clinical	1,38
New York	Cold Spring Harbor Laboratory	Lab/Basic	4,25
	Columbia University Health Sciences	Comprehensive	1,84
	Institute for Cancer Prevention*	Clinical	56
	New York University School of Medicine	Clinical	2,57
	Roswell Park Cancer Institute Corp	Comprehensive	3,79
	Sloan-Kettering Institute for Cancer Research	Comprehensive	10,13
	Yeshiva University	Clinical	3,88
North Carolina	Duke University	Comprehensive	6,71
torar ouronna	University of North Carolina Chapel Hill	Comprehensive	6,66
		-	
<u></u>	Wake Forest University Health Sciences	Comprehensive	1,32
Ohio	Case Western Reserve University	Comprehensive	4,43
	Ohio State University	Comprehensive	4,03
Oregon	Oregon Health & Science University	Clinical	1,16
Pennsylvania	Fox Chase Cancer Center	Comprehensive	8,15
	Thomas Jefferson University	Clinical	4,48
	University of Pennsylvania	Comprehensive	7,56
		Comprehensive	
	University of Pittsburgh at Pittsburgh		5,24
	Wistar Institute	Lab/Basic	2,65
Tennessee	St. Jude Children's Research Hospital	Clinical	4,97
	Vanderbilt University	Comprehensive	5,07
Texas	University of Texas San Antonio Health Science Center	Clinical	3,06
	University of Texas M.D. Anderson Cancer Center	Comprehensive	9,30
Jtah	Huntsman Cancer Institute/University of Utah	Clinical	78
/ermont	University of Vermont & St. Agric College	Comprehensive	1,34
	· · · ·		
/irginia	University of Virginia Charlottesville	Clinical	1,98
	Virginia Commonwealth University/Massey Cancer Center	Clinical	1,85
Washington	Fred Hutchinson Cancer Research Center	Comprehensive	10,01
Wisconsin	University of Wisconsin Madison	Comprehensive	5,58
	Total P30s	61	242,68
	Total Planning Grants (P20s)	Ŭ,	7,55
	Center for AIDs Research (CFARs)		3,75
	Other P30s & U41s		1,26

Specialized Programs of Research Excellence, Fiscal Year 2005

(Dollars in Thousands)

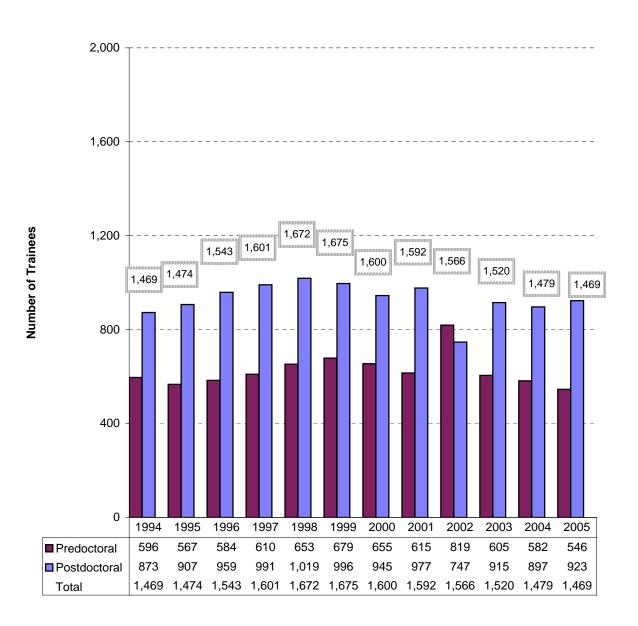
In 1992, the NCI established the Specialized Programs of Research Excellence (SPORE). This program promotes interdisciplinary research and speeds the bidirectional exchange between basic and clinical science to move basic research findings from the laboratory to applied settings involving patients and 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 scientists 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.

Mechanism	Site	No.	Amount
P50 SPOREs	Brain	4	\$6,938
	Breast	10	21,304
	Cervical	1	2,456
	Genitourinary	2	5,329
	Gastrointestinal	4	10,175
	Head and Neck	4	7,065
	Leukemia	1	2,492
	Lung	6	14,583
	Lymphoma	3	7,178
	Myeloma	1	2,253
	Ovarian	5	10,023
	Pancreatic	1	2,299
	Prostate	11	29,003
	Skin	3	6,580
	Uterine	1	1,949
	Total P50s	57	129,627
P20 SPOREs	Lung	1	1,057
	Pancreatic	2	1,956
	Total P20s	3	3,013
	Subtotal	60	132,640
Co-funded	Urology with NIDDK		385
Total		60	\$133,025

NRSA Predoctoral and Postdoctoral Trainees Fiscal Years 1994 - 2005

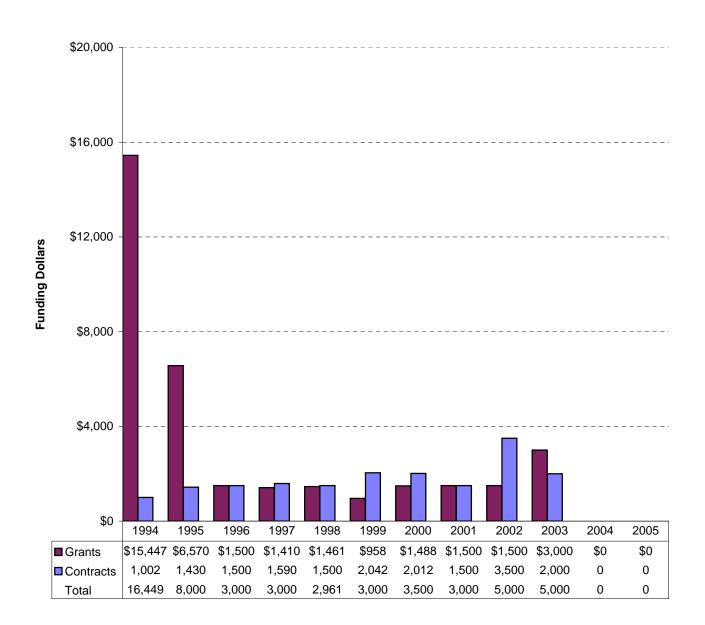
(Full Time Trainee Positions)



Construction/Renovation Funding

Fiscal Years 1994 - 2005

(Dollars in Thousands)



*Excludes Buildings and Facilities used for repairs and improvements at the NCI - Frederick facility totalling \$7,936 in FY 2005.

Grant and Contract Awards by State Fiscal Year 2005 (Dollars in Thousands)

		rants	Co	ntracts	То	tal NCI	
State	No	Amount	No	Amount	No	Amount	State
Alabama	81	\$39,755	9	\$7,823	90	\$47,578	Alabama
Alaska	4	2,309	0	0	4	2,309	Alaska
Arizona	92	51,418	3	1,984	95	53,402	Arizona
Arkansas	17	7,577	0	0	17	7,577	Arkansas
California	933	488,527	27	118,816	960	607,343	California
Colorado	110	33,756	3	3,671	113	37,427	Colorado
Connecticut	93	27,576	2	2,992	95	30,568	Connecticut
Delaware	3	1,494	0	0	3	1,494	Delaware
District of Columbia	84	30,764	23	9,414	107	40,178	District of Columbia
Florida	163	48,706	3	4,539	166	53,246	Florida
Georgia	77	28,088	7	4,657	84	32,744	Georgia
Hawaii	21	12,732	3	4,652	24	17,384	
Idaho	2	383	0	0	2		Idaho
Illinois	227	99,426	20	10,696	247	110,122	
Indiana	59	20,169	1	100	60		Indiana
lowa	36	16,182	4	4,707	40	20,889	
Kansas	19	6,304	5	3,871	24		Kansas
Kentucky	56	15,570	4	2,129	60		Kentucky
Louisiana	48	13,003	1	1,725	49		Louisiana
Maine	7	4,494	0	0	7		Maine
Maryland	246	129,863	74	106,653	320		Maryland
Massachusetts	642	310,916	9	4,799	651		Massachusetts
Michigan	222	98,412	7	13,444	229		Michigan
Minnesota	170	85,672	5	8,337	175		Minnesota
Mississippi	3	471	0	0,007	3		Mississippi
Missouri	127	58,495	9	8,341	136		Missouri
Montana	5	1,719	0	0,541	5		Montana
Nebraska	32	12,850	1	1	33		Nebraska
Nevada	7	2,245	0	0	7		Nevada
	54		2	352	56		
New Hampshire		24,520			56 92		New Hampshire
New Jersey New Mexico	88	32,166	4	3,910			New Jersey
	33	13,358	1	1,993	34		New Mexico
New York	659	285,459	11	9,134	670		New York
North Carolina	294	131,973	10	3,847	304		North Carolina
North Dakota	7	1,528	0	0	7		North Dakota
Ohio	294	104,901	10	5,990	304	110,891	
Oklahoma	16	4,271	2	1,485	18		Oklahoma
Oregon	62	20,434	0	0	62		Oregon
Pennsylvania	563	297,920	9	5,300	572		Pennsylvania
Rhode Island	49	15,505	0	0	49		Rhode Island
South Carolina	56	15,458	0	0	56		South Carolina
South Dakota	4	3,695	0	0	4		South Dakota
Tennessee	189	89,445	1	2,609	190		Tennessee
Texas	491	226,800	14	5,542	505	232,342	
Utah	36	16,134	2	2,375	38	18,509	
Vermont	17	6,693	0	0	17		Vermont
Virginia	114	37,838	12	57,146	126		Virginia
Washington	261	144,568	8	7,907	269		Washington
West Virginia	6	1,074	2	862	8	,	West Virginia
Wisconsin	108	43,395	4	2,956	112	46,351	Wisconsin
Subtotal	6,987	3,166,012	312	434,759	7,299	3,600,771	Subtotal
American Samoa	1	368	0	0	1		American Samoa
Guam	1	495	0	0	1		Guam
Puerto Rico	5	2,515	0	0	5		Puerto Rico
Total	6,994	3,169,391	312	434,759	7,306	3,604,150	Total

Excludes NRSA TAP, Loan Repayment Program, Foreign Contracts and Grants, Program Evaluation, and other assessments and miscellaneous expenses.

Grant and Contract Awards by Country

Fiscal Year 2005

(Dollars in Thousands)

	Gra	nt	Cor	ntract	Tot	al NCI	
Country	No	Amount	No	Amount	No	Amount	Country
Argentina		49				49	Argentina
Australia	14	4,749			14	4,749	Australia
Belgium	1	426			1	426	Belgium
Canada	18	9,629	2	\$632	20	10,261	Canada
China		20	2	259	2	279	China
Costa Rica			1	3,450	1	3,450	Costa Rica
Denmark			1	43	1	43	Denmark
Finland			1	746	1	746	Finland
France	6	2,064			6	2,064	France
Germany	2	97			2	97	Germany
India	1	201			1	201	India
Israel	11	1,696			11	1,696	Israel
Italy			1	200	1	200	Italy
Netherlands	1	183			1	183	Netherlands
Russia			2	191	2	191	Russia
Senegal	1	27			1	27	Senegal
South Africa	2	167			2	167	South Africa
Spain	1	194			1	194	Spain
Sweden	5	1,622	1	105	6	1,727	Sweden
Switzerland	2	291			2	291	Switzerland
United Kingdom	3	279			3	279	United Kingdom
West Indies			1	570	1		West Indies
Total Foreign	68	21,694	12	6,196	80	27,890	

Institutions Receiv	ing More than \$15 Million in NCI Su	upport, F	Y 200	5
(Dollars in Thousands)	-			
			-	

State	Institution	Grants	Contracts	Total NCI
Alabama	University of Alabama at Birmingham	\$34,459	\$4,122	\$38,58´
Arizona	University of Arizona	37,818	1,747	39,56
California	Beckman Research Inst of City of Hope	18,498		18,498
	Burnham Institute	23,395	725	24,120
	National Childhood Cancer Foundation	39,438		39,43
	Science Applications International Corporation		94,072	94,072
	Scripps Research Institute	21,999		21,999
	Stanford University	38,929		38,929
	University of California System	180,697	4,234	184,93
	University of Southern California	46,703	3,486	50,189
Colorado	University of Colorado Health Sciences Center	20,855	2,889	23,744
Connecticut	Yale University	22,203	934	23,13
District of Columbia	Georgetown University	22,448	2,175	24,623
Florida	H. Lee Moffitt Cancer Ctr. & Research Institute	20,954	2,170	20,954
Georgia	Emory University	18,181	1,208	19,389
Illinois	Northwestern University	27,194	2,079	29,273
IIIIII015				
	University of Chicago	37,096	1,134	38,230
	University of Illinois at Chicago	15,252	1,929	17,18
lowa	Iowa University	14,708	4,707	19,414
Maryland	Johns Hopkins University	84,585	717	85,302
	Westat Inc.		34,490	34,490
Massachusetts	Beth Israel Deaconess Medical Center	21,310		21,310
	Brigham & Women's Hospital	37,416		37,416
	Dana-Farber Cancer Institute	68,474		68,474
	Harvard University	36,074		36,074
	Massachusetts General Hospital	34,787		34,787
	Massachusetts Institute of Technology	22,345		22,345
Michigan	University of Michigan at Ann Arbor	63,732	3,515	67,247
	Wayne State University	16,309	5,263	21,571
Minnesota	Mayo Clinic Rochester	52,312	3,413	55,725
	University of Minnesota Twin Cities	29,759	4,924	34,683
Missouri	Washington University	44,380	6,390	50,770
New Hampshire	Dartmouth College	23,974	254	24,228
New York	Columbia University Health Sciences	27,754	204	27,754
INEW TOIK	Mount Sinai School of Medicine	15,822		15,822
	New York University School of Medicine Roswell Park Cancer Institute Corp	19,448		19,448 33,692
		33,692	1 500	
	Sloan-Kettering Institute for Cancer Research	65,715	1,509	67,223
	Yeshiva University	25,977	050	25,977
North Carolina	Duke University	61,393	658	62,051
<u> </u>	University of North Carolina Chapel Hill	49,615		49,615
Ohio	Case Western Reserve University	25,641		25,642
	Cleveland Clinic Lerner College	15,884		15,884
	Ohio State University	40,321	1,807	42,127
Pennsylvania	American College of Radiology	39,306		39,306
	Fox Chase Cancer Center	30,956	1,949	32,904
	NSABP Foundation, Inc.	21,277		21,277
	Thomas Jefferson University	16,355		16,355
	University of Pennsylvania	73,397	688	74,085
	University of Pittsburgh at Pittsburgh	53,107	2,019	55,120
Tennessee	St. Jude Children's Research Hospital	25,647	2,609	28,256
	Vanderbilt University	55,988	_,	55,988
Texas	Baylor College of Medicine	36,693		36,693
I OAGO	CTRC Research Foundation	18,877		18,877
	University of Texas MD Anderson Cancer Center	113,726	4,656	118,382
Utah	University of Utah	14,847	2,375	17,223
			2,373	
Virginia	University of Virginia Charlottesville	18,234	ED 040	18,234
Maahingtor	Department of Interior	04.000	53,212	53,212
Washington	Fred Hutchinson Cancer Research Center	91,066	6,204	97,270
	University of Washington	32,435	1,404	33,840
Wisconsin	University of Wisconsin Madison	34,427	1,649	36,075
	Total	\$2,233,881	\$265,143	\$2,499,024

Includes Manpower Development Grants

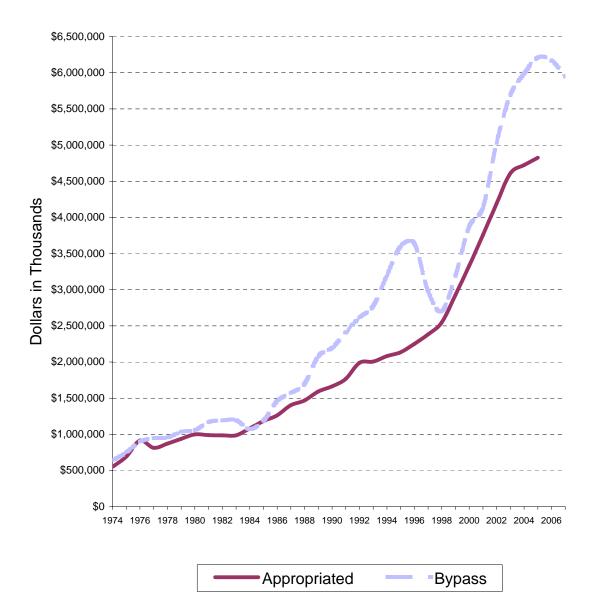
Appropriations of the NCI 1938-2005 (In Whole Dollars)

1938 - 1969 1970 - 1979 1980 - 1989	\$1,875,699,720 6,073,870,500 11,958,860,000	
1990		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		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	•
1990 - 1999 2000		•
	3,332,317,000	transfer authority, and \$239,190,000 of AIDS funding. prior to reductions in PL 106-113 (-\$17,763,000 for across the board reduction). Includes \$245,804,000 of AIDS funding. prior to reductions in PL 106-554(-\$2,005,000 for across-the-board reduction). Includes -\$711,000 Secretary's 1% transfer, -\$781,000 transfer for Office of Human Research Protection and -\$24,000 lapse.
2000	3,332,317,000 3,757,242,000	transfer authority, and \$239,190,000 of AIDS funding. prior to reductions in PL 106-113 (-\$17,763,000 for across the board reduction). Includes \$245,804,000 of AIDS funding. prior to reductions in PL 106-554(-\$2,005,000 for across-the-board reduction). Includes -\$711,000 Secretary's 1% transfer, -\$781,000 transfer for Office of Human Research Protection and -\$24,000 lapse. Includes \$255,960,000 of AIDS funding. prior to reductions in PL 107-116(-\$4,524,000 via the Secretary's 1% transfer authority, -\$2,054,000 for the enacted rescission, -\$7,118,000 administrative reduction and -\$8,000 lapse). Includes \$254,396,000 of
2000 2001	3,332,317,000 3,757,242,000 4,190,405,000	transfer authority, and \$239,190,000 of AIDS funding. prior to reductions in PL 106-113 (-\$17,763,000 for across the board reduction). Includes \$245,804,000 of AIDS funding. prior to reductions in PL 106-554(-\$2,005,000 for across-the-board reduction). Includes -\$711,000 Secretary's 1% transfer, -\$781,000 transfer for Office of Human Research Protection and -\$24,000 lapse. Includes \$255,960,000 of AIDS funding. prior to reductions in PL 107-116(-\$4,524,000 via the Secretary's 1% transfer authority, -\$2,054,000 for the enacted rescission, -\$7,118,000
2000 2001 2002	3,332,317,000 3,757,242,000 4,190,405,000 4,622,394,000	transfer authority, and \$239,190,000 of AIDS funding. prior to reductions in PL 106-113 (-\$17,763,000 for across the board reduction). Includes \$245,804,000 of AIDS funding. prior to reductions in PL 106-554(-\$2,005,000 for across-the-board reduction). Includes -\$711,000 Secretary's 1% transfer, -\$781,000 transfer for Office of Human Research Protection and -\$24,000 lapse. Includes \$255,960,000 of AIDS funding. prior to reductions in PL 107-116(-\$4,524,000 via the Secretary's 1% transfer authority, -\$2,054,000 for the enacted rescission, -\$7,118,000 administrative reduction and -\$8,000 lapse). Includes \$254,396,000 of AIDS funding. prior to reductions in PL 108-7(-\$30,046,000 for the enacted rescission
2000 2001 2002 2003	3,332,317,000 3,757,242,000 4,190,405,000 4,622,394,000 4,770,519,000	transfer authority, and \$239,190,000 of AIDS funding. prior to reductions in PL 106-113 (-\$17,763,000 for across the board reduction). Includes \$245,804,000 of AIDS funding. prior to reductions in PL 106-554(-\$2,005,000 for across-the-board reduction). Includes -\$711,000 Secretary's 1% transfer, -\$781,000 transfer for Office of Human Research Protection and -\$24,000 lapse. Includes \$255,960,000 of AIDS funding. prior to reductions in PL 107-116(-\$4,524,000 via the Secretary's 1% transfer authority, -\$2,054,000 for the enacted rescission, -\$7,118,000 administrative reduction and -\$8,000 lapse). Includes \$254,396,000 of AIDS funding. prior to reductions in PL 108-7(-\$30,046,000 for the enacted rescission and -\$2,000 lapse). Includes \$263,442,000 of AIDS funding. prior to reductions in PL 108-199(-\$3,136,000 for Labor/HHS/ED rescission; \$28,128,000 for across the board reduction; -\$15,357,000 NIH 1% transfer assessment, and \$5,000 lapse). Includes \$266,975,000

(In Whole Dollars)

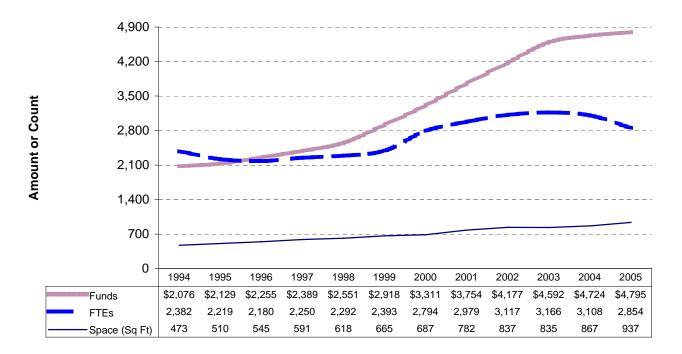
Fiscal	
Year	Request
1973	\$550,790,000
1974	640,031,000
1975	750,000,000
1976	898,500,000
1977	948,000,000
1978	955,000,000
1979	1,036,000,000
1980	1,055,000,000
1981	1,170,000,000
1982	1,192,000,000
1983	1,197,000,000
1984	1,074,000,000
1985	1,189,000,000
1986	1,460,000,000
1987	1,570,000,000
1988	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
2002	5,030,000,000
2003	5,690,000,000
2004	5,986,000,000
2005	6,211,000,000
2006	6,170,000,000
2007	5,949,714,000

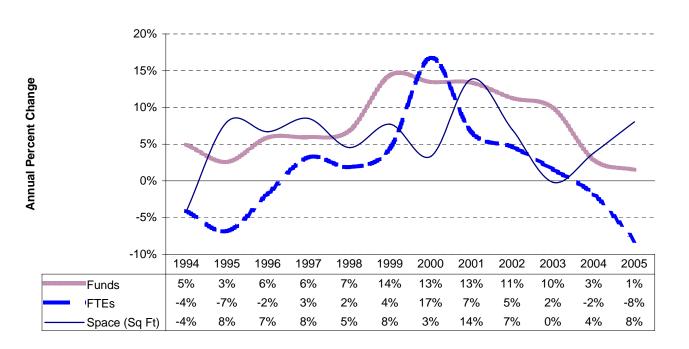
The National Cancer Act in December 1971, included a provision for the Director, NCI to submit an annual budget request directly to the President, with comment only by NIH and DHHS. This Bypass Budget was first submitted for 1973.



Comparison of Dollars, Positions and Space Fiscal Years 1994-2005

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 equals 2,080 hours. The increase in FTEs in FY 2000 is due to the fact that 195 contract staff were converted to NCI appointments. Space is in thousands of square feet, excluding NCI-Frederick.





H-4

Fiscal Year	Full Time Appointment	Part Time Appointment	Training Fellows	Total Personnel Resources
1996	1,841	460	960	3,261
1997	1,915	422	1,023	3,360
1998	1,921	466	1,124	3,511
1999	1,941	628	1,060	3,629
2000	2,139	831	1,202	4,172
2001	2,224	912	963	4,099
2002	2,250	979	949	4,178
2003	2,193	1,073	1,191	4,457
2004	2,083	990	1,232	4,305
2005	1,959	882	1,077	3,918

AIDS Funding History Fiscal Years 1993-2005

(Dollars in Thousands)

Fiscal Year	NCI	NIH	% NCI of NIH
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%
2000	244,145	2,005,100	12%
2001	237,789	2,244,160	11%
2002	254,396	2,500,866	10%
2003	263,442	2,718,171	10%
2004	266,975	2,840,384	9%
2005	265,907	2,909,381	9%

