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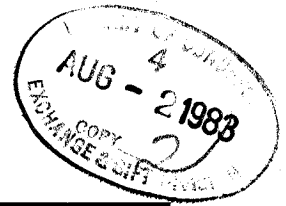
1982

National
Cancer
Program

U.S. DEPARTMENT
OF HEALTH AND
HUMAN SERVICES

Public Health
Service

National
Institutes of
Health



NCI FACT BOOK

National Cancer Program 1982

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U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service National Institutes of Health

PREFACE

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 staff, the 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 Manager, National Cancer Institute, 9000 Rockville Pike, Bethesda, Maryland 20205.

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DIRECTORY OF PERSONNEL

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NATIONAL CANCER INSTITUTE HISTORICAL DATA

LEGISLATIVE HIGHLIGHTS

July 23, 1937—The National Cancer Institute Act, introduced by Congressman Warren G. Magnuson, was passed by Congress. An appropriation of \$700,000 for each fiscal year was authorized.

July 1, 1944—The Public Health Service Act, Public Law 410, 78th Congress provided that "The National Cancer Institute shall be a division in the National Institutes of Health." The act also revised and consolidated many revisions into a single law. The limit of \$700,000 annual appropriation was removed.

January 22, 1971—In his State of the Union Message, President Nixon announced that he would ask for the appropriation of an additional \$100 million to launch an intensive effort to control cancer, and that he would ask later for whatever additional funds could be effectively used.

December 23, 1971—The President signed P. L. 92-218, The National Cancer Act of 1971, providing increased authorities and responsibilities for the NCI Director; initiating a National Cancer Program; establishing a three-member President's Cancer Panel and a 23-member National Cancer Advisory Board; establishing cancer control programs as necessary for cooperation with State and other health agencies, and providing for the collection, analysis, and dissemination of all data useful in the diagnosis, prevention, and treatment of cancer, including the establishment of an international cancer research data bank.

July 23, 1974—The National Cancer Act Amendments of 1974, P.L. 93-352, was signed. The Amendments: encourage the NCP to explore the role of nutrition in the treatment, rehabilitation, and causation of cancer; authorize the Director to include personnel needs in the budget estimate to OMB; remove the limit on the number of comprehensive cancer centers; increase the number of expert appointments to 100; and direct the NCI to provide and contract for a program to disseminate and interpret information respecting the cause, prevention, diagnosis and treatment of cancer.

August 1, 1977—The Biomedical Research Extension Act of 1977, P.L. 95-83, increased the number of expert appointments from 100 to 151.

November 9, 1978—The Biomedical Research and Training Amendments of 1978, P.L. 95-622, was signed into law, authorizing appropriations for fiscal years 1979 and 1980. The amendments redefined the National Cancer Program to highlight prevention activities; expanded the membership of the National Cancer Advisory Board to 29 members; added basic research to the cancer centers authority; authorized travel and moving expenses to and from duty station for experts; and emphasized education and information in all aspects of the National Cancer Program.

December 17, 1980—The Health Programs Extension Act of 1980, P.L. 96-538, was signed into law, authorizing expenditure of funds for fiscal years 1981 and 1982.

HISTORICAL EVENTS

- August 5, 1937**—President Franklin D. Roosevelt signed the National Cancer Act.
- November 9, 1937**—The National Advisory Cancer Council held its first meeting
- January 13, 1938**—Dr. Carl Voegtlin was appointed the first Director of the Institute.
- October 31, 1940**—President Franklin D. Roosevelt dedicated Building 6.
- July 1, 1947**—NCI reorganized to provide for expanded program; intramural cancer research, cancer research grants, and cancer control activities.
- July 2, 1953**—NCI inaugurated a full-scale clinical research program in the new Clinical Center.
- April 1955**—The Cancer Chemotherapy National Service Center was established in the Institute to coordinate the first national, voluntary, cooperative cancer chemotherapy program.
- January 11, 1966**—NCI reorganized to coordinate related activities. The areas of three Scientific Directors were established: Etiology; Chemotherapy; and a group of discipline-oriented laboratories and branches referred to as General Laboratories and Clinics.
- April 27, 1970**—At the request of Senator Ralph W. Yarborough, Chairman of the Committee on Labor and Public Welfare, the Senate approved the establishment of the National Panel of Consultants on the Conquest of Cancer.
- October 18, 1971**—President Nixon converted the Army's former biological warfare facilities at Fort Detrick, Md., to research on the causes, treatment and prevention of cancer.
- December 23, 1971**—President Nixon signed P.L. 92-218, The National Cancer Act of 1971.
- June 22, 1972**—The Institute awarded a contract for the operation and maintenance of the Frederick Cancer Research Center at Fort Detrick, Maryland. This constituted the largest research contract ever awarded by a research component of the National Institutes of Health.
- June 30, 1972**—A U. S.-U.S.S.R. agreement on the exchange of drugs, visiting scientists, and information was signed.
- July 27, 1972**—A Bureau-level organization was established for the National Cancer Institute, giving the Institute and its components organizational status commensurate with the responsibilities bestowed on it by The National Cancer Act of 1971. Under the reorganization, the Institute was composed of the Office of the Director and four Divisions.
- September 10, 1974**—NCI established the Division of Cancer Control and Rehabilitation.
- July 1975**—The Division of Cancer Treatment was expanded to include the NCI Surgery and Radiation Oncology Branches and the extramural program of Cancer Cooperative Clinical Trials.
- May 15, 1978**—The first phase of an extensive NCI reorganization was announced. Day-by-day administrative and funding responsibility for extramural research programs was consolidated in each of the four research divisions. Responsibility for grant and contract review committees and for other committee management activities was transferred to the Division of Cancer Research Resources and Centers.
- July 14, 1980**—The Division of Extramural Affairs replaced the Division of Cancer Research Resources and Centers. Also, the new Division of Resources, Centers and Community Activities replaced the Division of Cancer Control and Rehabilitation.
- March 4, 1981**—A Biological Response Modifiers Program (BRMP) was officially established at NCI.
- July 14, 1981**—The NCI component of the National Toxicology Program was officially transferred to the National Institute of Environmental Health Sciences.
- September 26, 1982**—The single large contract for the operation of the Frederick Cancer Research Facility was recompeted as five separate contracts in FY 1982. A reorganization was implemented that centralized the management of Frederick under an Associate Director. The NCI Frederick Cancer Research Facility Advisory Committee was established to provide external peer review of the quality of the contractor-initiated research.
-

**DIRECTOR
NATIONAL CANCER PROGRAM
NATIONAL CANCER INSTITUTE**

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

January 1, 1980 TO PRESENT

Dr. Vincent T. DeVita, Jr., received his B.S. degree in 1957 from the College of William and Mary and in 1961 received his M.D. degree with distinction from the George Washington School of Medicine. He interned at the University of Michigan Medical Center and then completed a year of residency with the George Washington University medical service. Dr. DeVita joined NCI in 1963 as a clinical associate, and after completing a senior residency at the Yale-New Haven Medical Center in 1965-66, returned to NCI as a senior investigator in the Solid Tumor Service and, in 1971, became Chief of the Medicine Branch. He was named Director of the Division of Cancer Treatment in 1974 and, in 1975,

Clinical Director of the Institute. In January 1980 he was appointed Acting Director, National Cancer Institute, and in July 1980, Director. Dr. DeVita serves on the editorial boards of numerous medical journals, maintains memberships in many scientific societies, and was President of the American Society of Clinical Oncology (1977-78). For his outstanding research and medical leadership, he has received a number of honors and awards, including the 1972 Albert and Mary Lasker Medical Research Award, the 1980 Griffuel Prize, and an Honorary Doctor of Science Degree from the College of William and Mary in May 1982.

PRESIDENT'S CANCER PANEL

	EXPIRATION OF APPOINTMENT
Dr. Armand Hammer, <i>Chairman 1982</i> Occidental Petroleum Corporation Washington, D. C.	1984
Dr. Harold Amos Harvard Medical School Boston, Massachusetts	1983
Dr. William P. Longmire, Jr. Center for Health Sciences University of California Los Angeles, California	1985

EXECUTIVE SECRETARY

Dr. Elliott H. Stonehill
National Cancer Institute, NIH
Bethesda, Maryland

NATIONAL CANCER ADVISORY BOARD

APPOINTEES

	EXPIRATION OF APPOINTMENT
Dr. Tim Lee Carter, <i>Chairman</i> Carter Clinic Tompkinsville, Kentucky	1988
Mr. Richard A. Bloch H & R Block, Inc. Kansas City, Missouri	1988
Mrs. Angel Bradley North Miami, Florida	1988
Dr. Victor Braren Vanderbilt University School of Medicine Nashville, Tennessee	1988
Dr. Ed L. Calhoon Beaver, Oklahoma	1988
Dr. Maureen M. Henderson University of Washington Seattle, Washington	1984
Dr. Robert C. Hickey M.D. Anderson Hospital and Tumor Institute Houston, Texas	1986
Dr. Geza J. Jako Surgeon, Research Professor Melrose, Massachusetts	1988
Dr. Joseph Gale Katterhagen Tacoma General Hospital Tacoma, Washington	1986

EX OFFICIO MEMBERS

Dr. John F. Beary III Department of Defense Washington, D. C.
Dr. George A. Keyworth Office of Science and Technology Policy Washington, D. C.
Ms. Anne Gorsuch Environmental Protection Agency Washington, D. C.
Mr. Stuart M. Statler Consumer Product Safety Commission Washington, D. C.
The Honorable Raymond J. Donovan Secretary of Labor Washington, D. C.
Dr. Donald L. Custis Veterans Administration Washington, D. C.

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Dr. Denis J. Prager Office of Science and Technology Policy Washington, D. C.
Dr. John Todhunter Environmental Protection Agency Washington, D. C.
Dr. Peter W. Preuss Consumer Product Safety Commission Bethesda, Maryland
Dr. Robert Brandt Department of Labor Washington, D. C.

EXPIRATION OF APPOINTMENT

Mrs. Rose Kushner Breast Cancer Advisory Center Kensington, Maryland	1986
Ann Landers Field Newspaper Syndicate Chicago, Illinois	1986
Dr. LaSalle D. Leffall Howard University Washington, D. C.	1986
Dr. William E. Powers Harper Grace Hospital Detroit, Michigan	1986
Dr. Janet D. Rowley University of Chicago Chicago, Illinois	1984
Mr. Sheldon W. Samuels AFL-CIO Washington, D. C.	1984
Mr. Morris M. Schrier MCA, Inc. New York, New York	1984
Dr. Irving J. Selikoff Mount Sinai School of Medicine New York, New York	1984

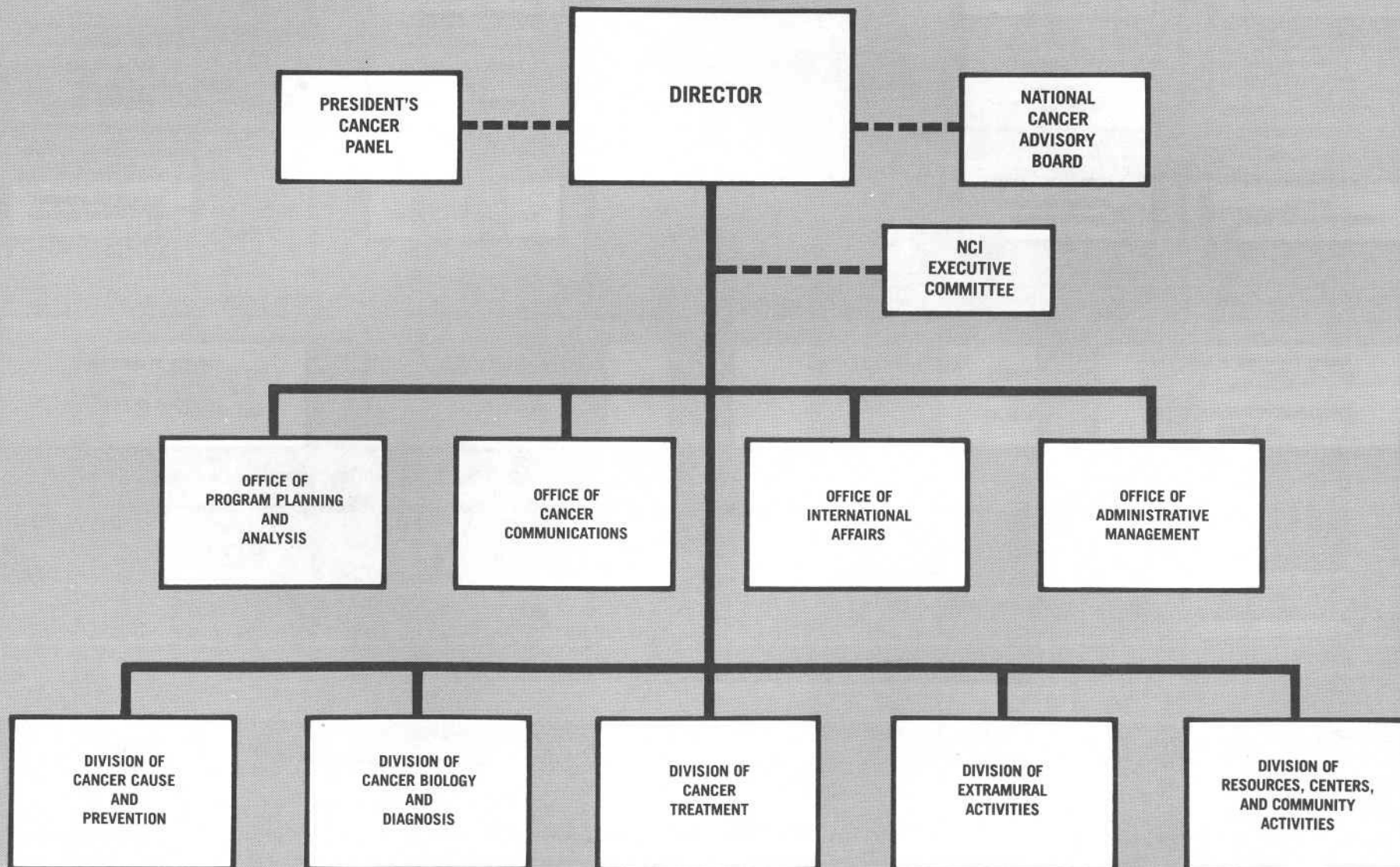
Dr. Arthur H. Hayes, Jr. Food and Drug Administration Rockville, Maryland
Dr. J. Donald Millar National Institute for Occupational Safety and Health Atlanta, Georgia
Dr. David P. Rall National Institutes of Environmental Health Sciences Research Triangle Park, North Carolina
The Honorable Richard Schweiker Secretary for Health and Human Services Washington, D. C.
Dr. James B. Wyngaarden National Institutes of Health Bethesda, Maryland

Dr. Hollis Boren Veterans Administration Washington, D. C.
Dr. Allen Heim Food and Drug Administration Rockville, Maryland
Dr. Elliott S. Harris National Institute for Occupational Safety and Health Atlanta, Georgia

EXECUTIVE SECRETARY

Mrs. Barbara S. Bynum National Cancer Institute, NIH Bethesda, Maryland

NATIONAL CANCER INSTITUTE



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 Dr. Jane Henney, Deputy Director

Plans, develops, directs, and coordinates the activities and programs of the Institute and of the National Cancer Program; and provides overall policy guidance and staff direction.

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 Mr. Louis M. Carrese

OFFICE OF CANCER COMMUNICATIONS
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OFFICE OF INTERNATIONAL AFFAIRS
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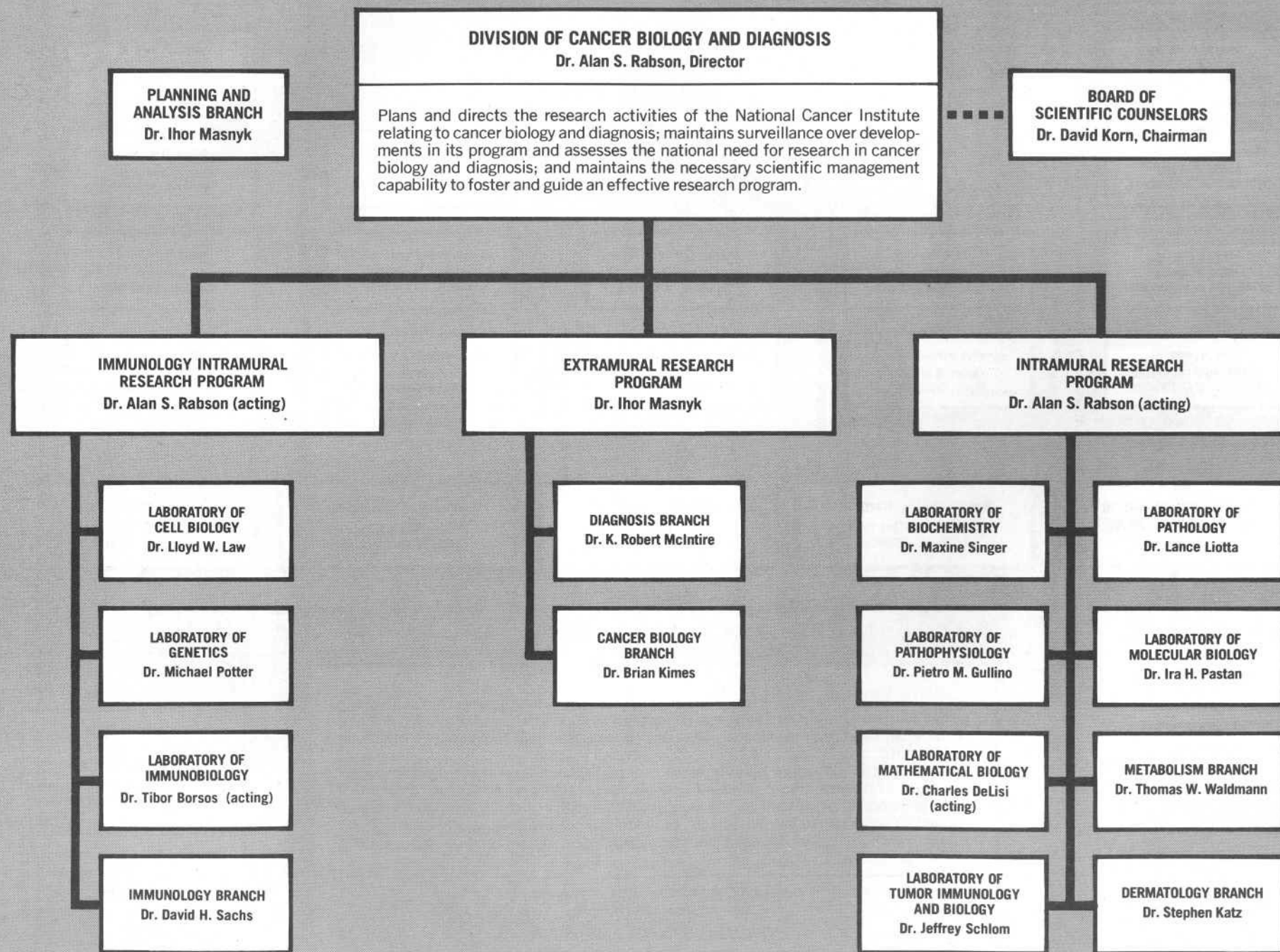
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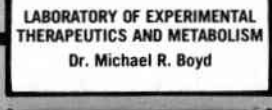
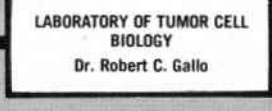
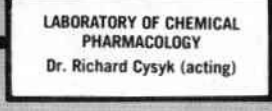
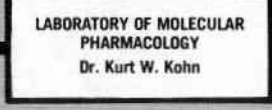
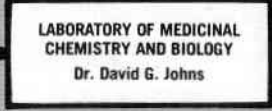
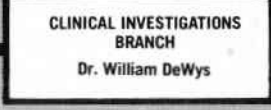
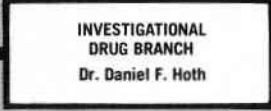
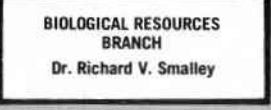
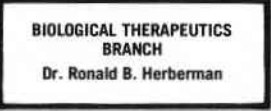
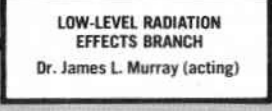
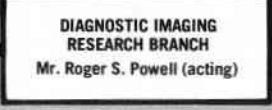
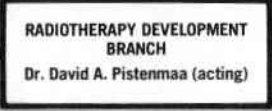
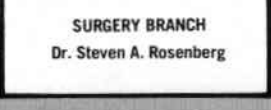
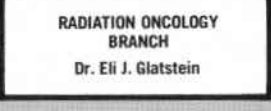
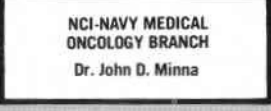
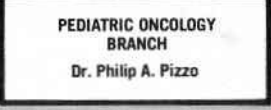
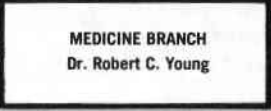
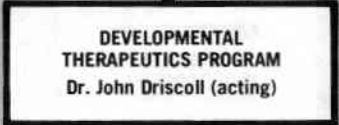
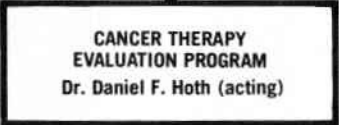
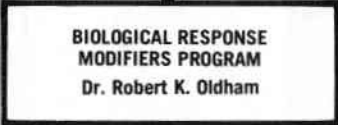
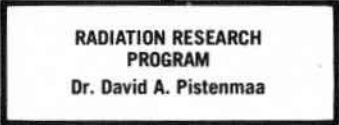
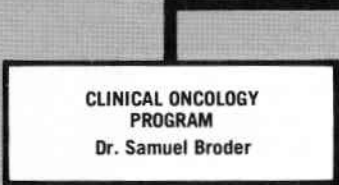
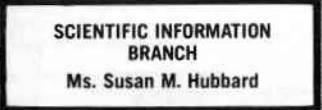
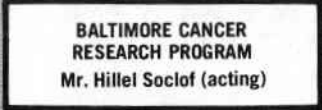
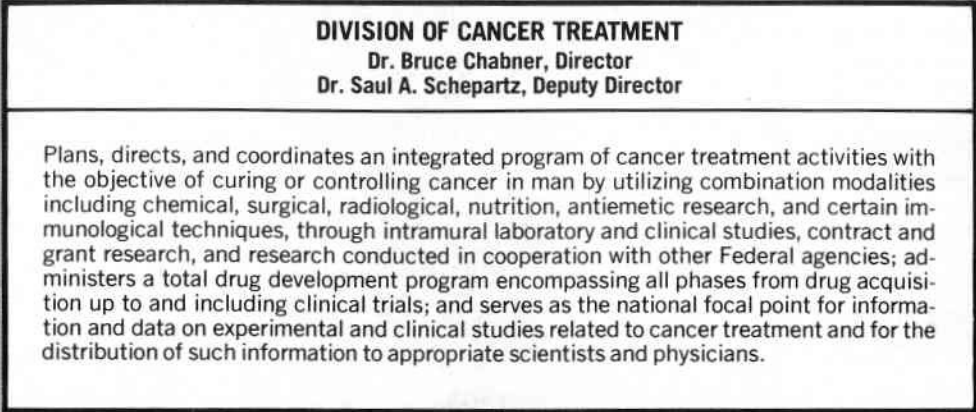
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Dr. Ven Narayanan

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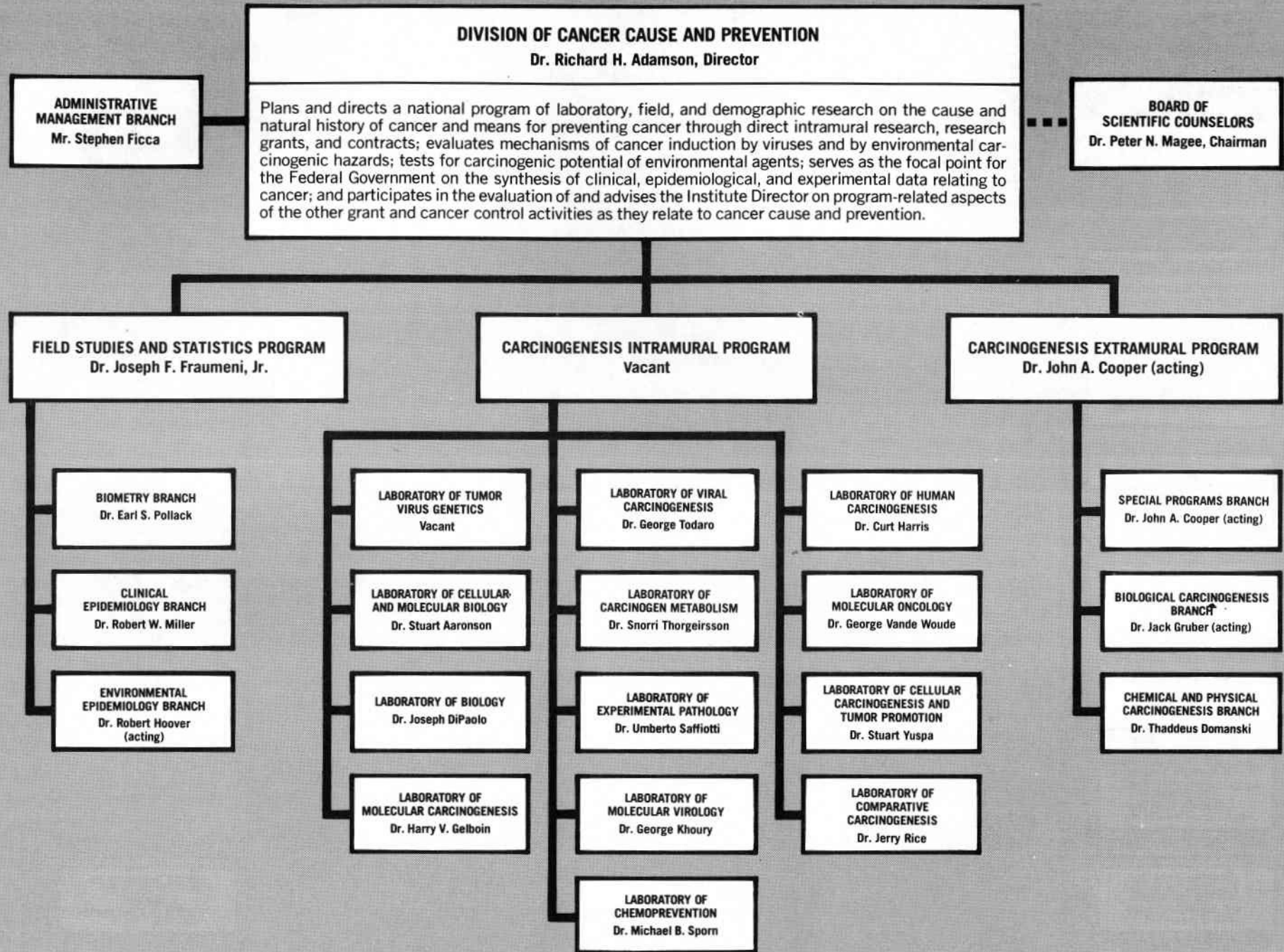
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Mr. J. Paul Davignon

TOXICOLOGY BRANCH
Vacant

INFORMATION TECHNOLOGY
BRANCH
Dr. G.W.A. Milne

EXTRAMURAL RESEARCH
& RESOURCES BRANCH
Dr. Moreswar Nadkarni



DIVISION OF RESOURCES, CENTERS, AND COMMUNITY ACTIVITIES¹

Dr. Peter Greenwald, Director
Dr. Joseph Cullen, Deputy Director

Plans and conducts research, evaluation, demonstration, technology transfer, education, and information dissemination programs to expedite optimal use of new information relevant to the prevention, detection, and diagnosis of cancer, and the pretreatment evaluation, treatment, rehabilitation, and the continuing care of cancer patients in the community and in cancer centers; plans, directs, and coordinates the support of cancer research at cancer centers and through organ site programs; plans and conducts basic and applied research programs in pain and rehabilitation; supports professional and paraprofessional clinical education, research training, and continuing education; and administers project grant programs for the construction, alteration, renovation, and equipping of basic and clinical research facilities.

**BOARD OF
SCIENTIFIC COUNSELORS**
Dr. Lester Breslow
 Chairman

**ADMINISTRATIVE
MANAGEMENT AND
PLANNING BRANCH**
 Mr. Nicholas Olimpio

**BIOMETRICS AND
OPERATIONS RESEARCH
BRANCH**
 Dr. Edward Sondik

**PREVENTION, DETECTION,
AND DIAGNOSIS PROGRAM**
 Dr. William DeWys (acting)

**TREATMENT, CONTINUING CARE,
AND REHABILITATION PROGRAM**
 Dr. Jerome Yates

**RESEARCH RESOURCES
PROGRAM**
 Dr. Joseph Cullen (acting)

**PREVENTIVE MEDICINE
BRANCH**
 Dr. Richard Costlow

**BEHAVIORAL MEDICINE
BRANCH**
 Dr. Sandra Levy

**COMMUNITY OUTREACH
AND REHABILITATION
BRANCH**
 Dr. Jerome Yates (acting)

**ORGAN SYSTEMS
BRANCH**
 Dr. Andrew Chiarodo

**CANCER CENTERS
BRANCH**
 Dr. Jerome Yates
(acting)

**OCCUPATIONAL CANCER
BRANCH**
 Dr. Veronica Conley
(acting)

SCREENING BRANCH
 Vacant

**CLINICAL MANPOWER
BRANCH**
 Dr. Barney C. Lepovetsky
(acting)

**RESEARCH FACILITIES
BRANCH**
 Dr. Donald Fox

**RESEARCH MANPOWER
BRANCH**
 Dr. Barney C. Lepovetsky

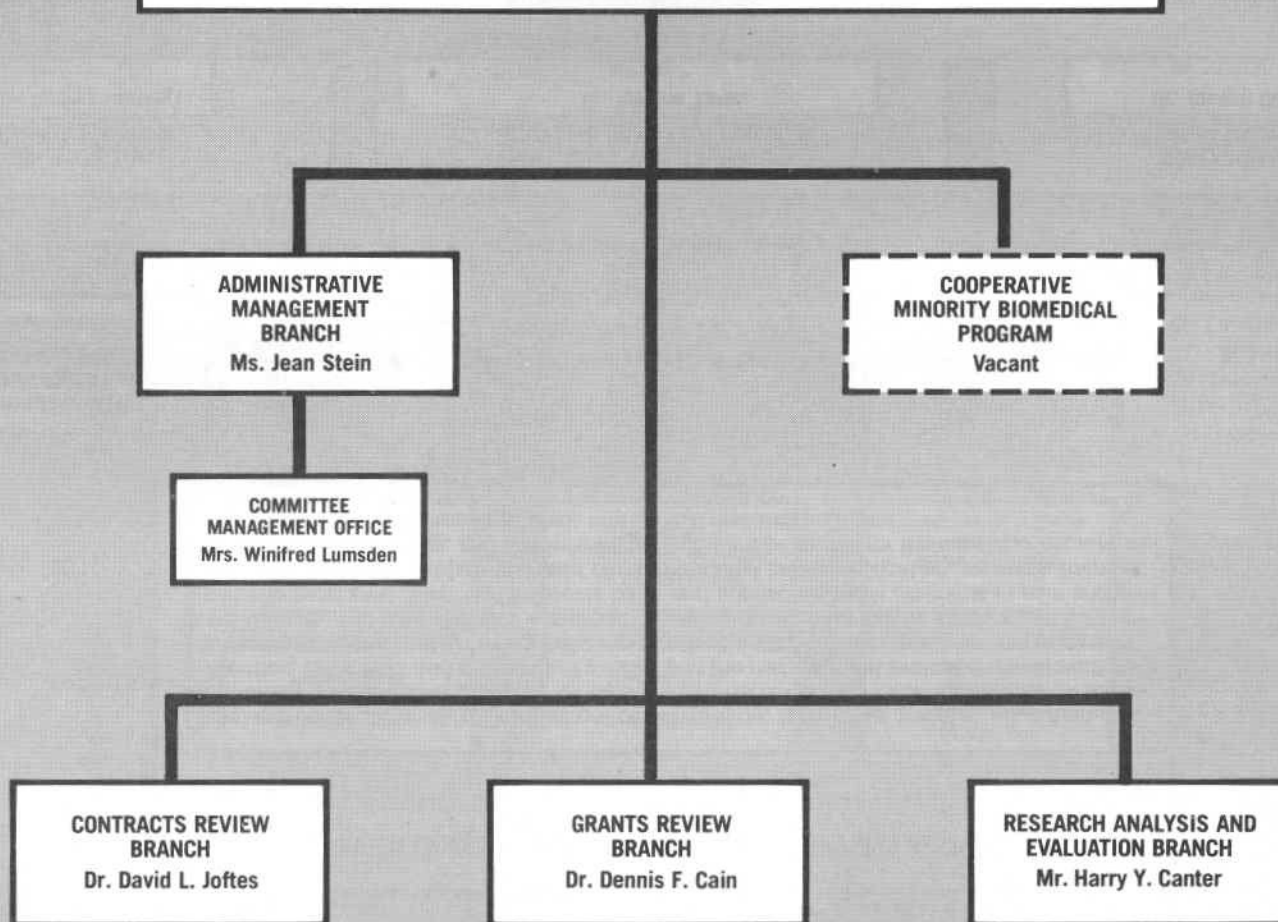
**EDUCATIONAL RESEARCH
AND EVALUATION BRANCH**
 Dr. Joseph Cullen
(acting)

¹ A proposed reorganization currently pending review would alter the official program and branch levels shown above.

DIVISION OF EXTRAMURAL ACTIVITIES

Mrs. Barbara S. Bynum, Director
Dr. William A. Walter, Jr., Deputy Director

Administers and directs the Institute's grant and contract review and processing activities; provides initial technical and scientific merit review of grants and contracts for the Institute; represents the Institute on over-all NIH extramural and collaborative program policy committees, coordinates such policy within NCI, and develops and recommends NCI policies and procedures as related to the review of grants and contracts; coordinates the Institute's review of research grant and training programs with the National Cancer Advisory Board; coordinates the implementation of committee management policies within the Institute and provides the Institute's staff support for the National Cancer Advisory Board; coordinates program planning and evaluation in the extramural area; provides scientific reports and analyses to the Institute's grant and contract programs.

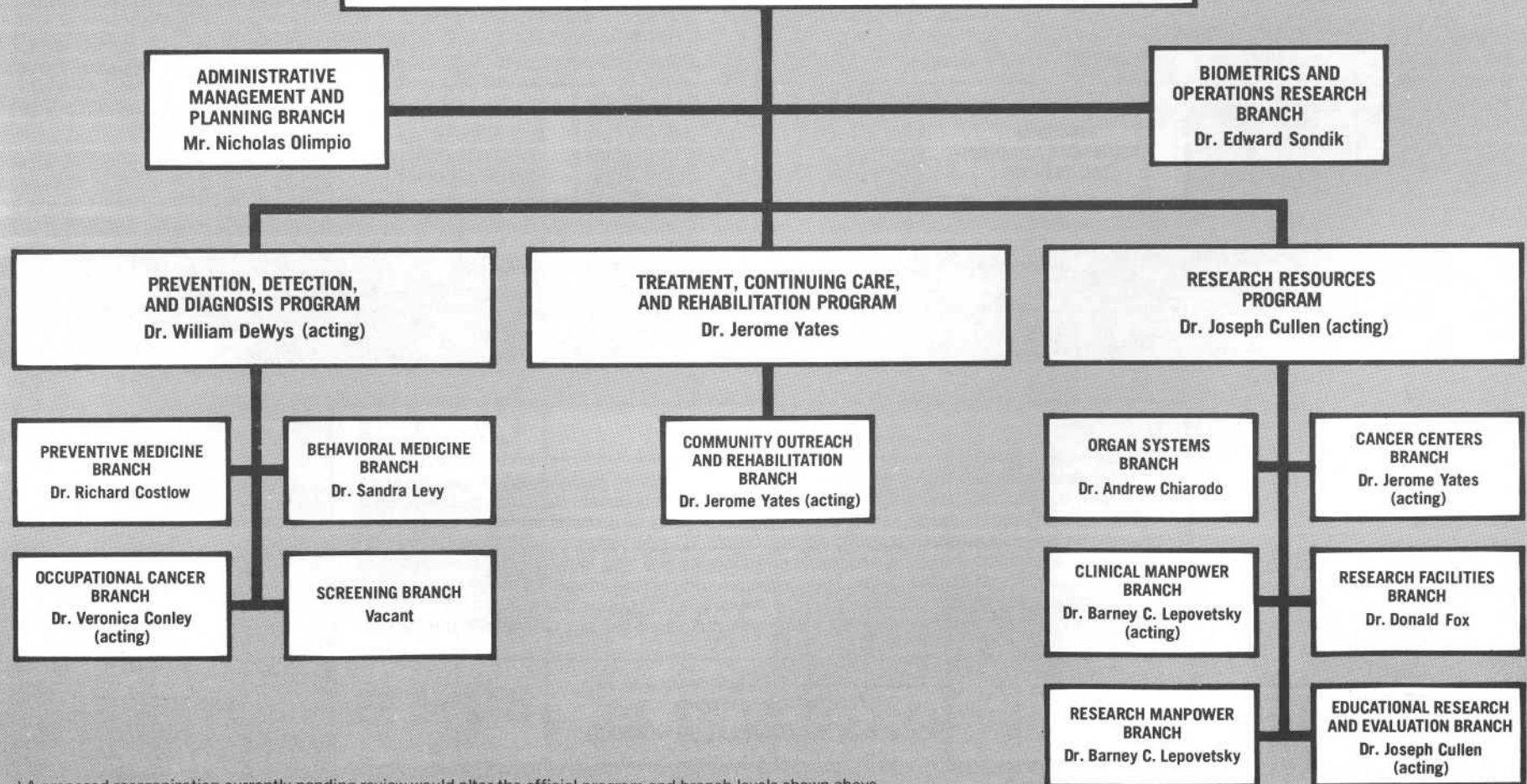


DIVISION OF RESOURCES, CENTERS, AND COMMUNITY ACTIVITIES¹

Dr. Peter Greenwald, Director
Dr. Joseph Cullen, Deputy Director

Plans and conducts research, evaluation, demonstration, technology transfer, education, and information dissemination programs to expedite optimal use of new information relevant to the prevention, detection, and diagnosis of cancer, and the pretreatment evaluation, treatment, rehabilitation, and the continuing care of cancer patients in the community and in cancer centers; plans, directs, and coordinates the support of cancer research at cancer centers and through organ site programs; plans and conducts basic and applied research programs in pain and rehabilitation; supports professional and paraprofessional clinical education, research training, and continuing education; and administers project grant programs for the construction, alteration, renovation, and equipping of basic and clinical research facilities.

BOARD OF
SCIENTIFIC COUNSELORS
Dr. Lester Breslow
Chairman

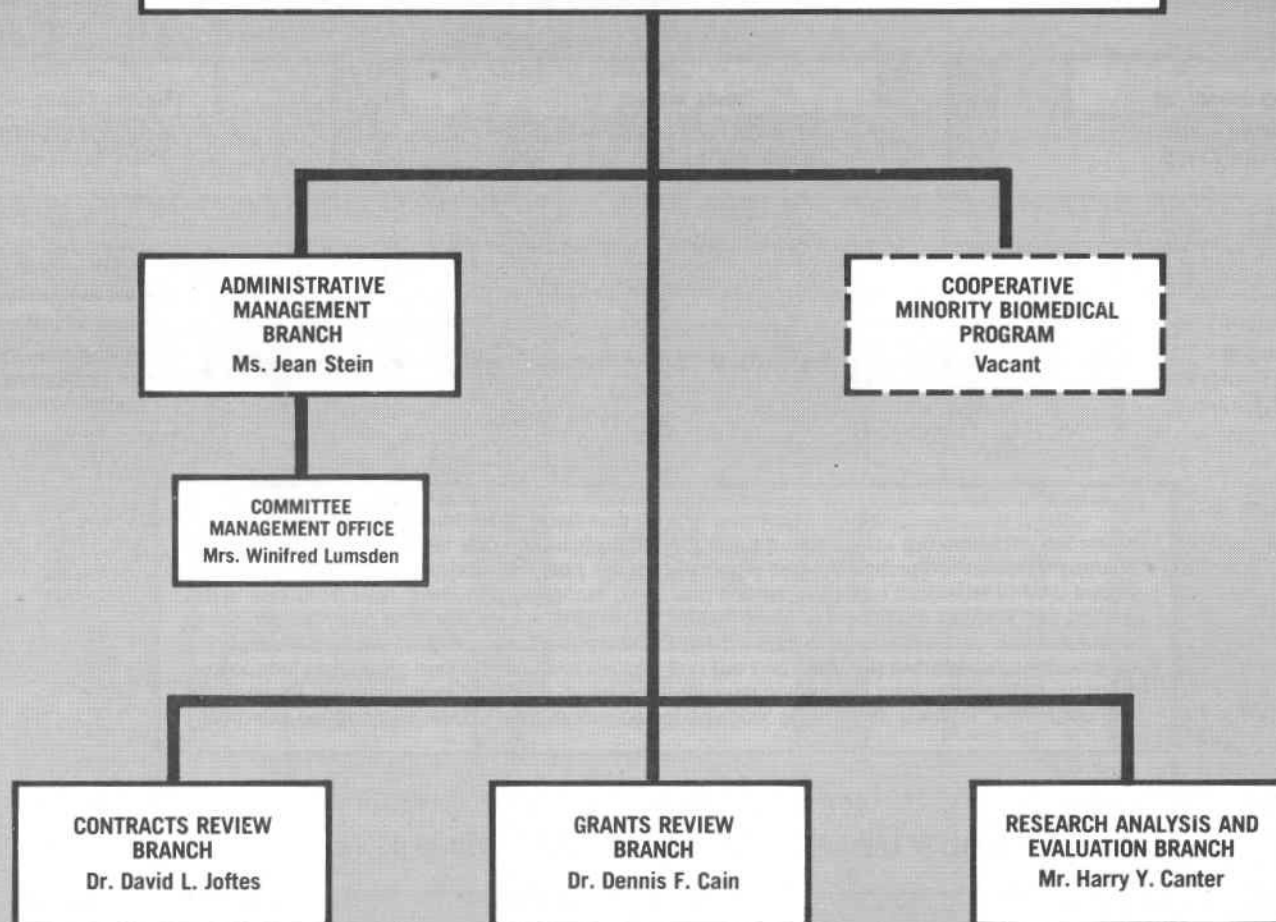


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NUMBER OF DEATHS FOR THE FIVE LEADING CANCER SITES BY AGE GROUP AND SEX — 1979

TOTAL		UNDER 15		15-34		35-54		55-74		75+	
MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
Lung 72,712	Breast 34,395	Leukemia 529	Leukemia 376	Leukemia 822	Breast 610	Lung 9,904	Breast 8,052	Lung 47,113	Breast 17,421	Lung 15,533	Colon & Rectum 12,782
Colon & Rectum 26,055	Colon & Rectum 27,662	Brain & CNS 242	Brain & CNS 231	Brain & CNS 462	Leukemia 520	Colon & Rectum 2,342	Lung 4,662	Colon & Rectum 13,990	Lung 15,577	Prostate 12,699	Breast 8,312
Prostate 22,239	Lung 25,605	Connective Tissue 69	Bone 52	Hodgkin's Disease 328	Uterus 282	Pancreas 1,273	Colon & Rectum 2,179	Prostate 9,242	Colon & Rectum 12,546	Colon & Rectum 9,513	Lung 5,253
Pancreas 11,021	Uterus 10,709	Bone 47	Kidney 48	Non-Hodgkin's Lymphomas 311	Brain & CNS 275	Brain & CNS 1,176	Ovary 1,990	Pancreas 6,482	Ovary 5,802	Pancreas 3,222	Pancreas 4,206
Leukemia 9,005	Ovary 10,564	Kidney 41	Connective Tissue 41	Testis 280	Hodgkin's Disease 193	Leukemia 1,061	Uterus 1,936	Stomach 4,696	Uterus 5,485	Bladder 3,218	Uterus 3,004

Source: Vital Statistics of the United States, 1979.

RELATIONSHIP OF CANCER TO LEADING CAUSES OF DEATH IN THE UNITED STATES — 1979

RANK	CAUSE OF DEATH	NUMBER OF DEATHS	DEATH RATE PER 100,000 POPULATION	PERCENT OF TOTAL DEATHS
	All Causes	1,913,841	869.5	100.0
1	Diseases of Heart	733,235	333.1	38.3
2	Cancer	403,395	183.3	21.1
3	Stroke	169,488	77.0	8.9
4	Accidents	105,312	47.8	5.5
5	Bronchitis, Emphysema, and Asthma	49,933	22.7	2.6
6	Pneumonia and Influenza	45,030	20.5	2.4
7	Diabetes Mellitus	33,192	15.1	1.7
8	Cirrhosis of Liver	29,720	13.5	1.6
9	Arteriosclerosis	28,801	13.1	1.5
10	Suicide	27,206	12.4	1.4
11	Diseases of Infancy	23,448	10.7	1.2
12	Homicide	22,550	10.2	1.2
13	Nephritis and Nephrosis	15,729	7.1	0.8
14	Congenital Abnormalities	13,526	6.1	0.7
15	Septicemia and Pyemia	8,024	3.6	0.4
	Other and Ill-defined	205,252	93.3	10.7

Source: Vital Statistics of the United States, 1979.

ESTIMATED CANCER DEATHS AND NEW CASES BY SEX AND SITE—1982¹

SITE	ESTIMATED DEATHS			ESTIMATED NEW CASES		
	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE
All Sites	430,000	233,000	197,000	835,000 ¹	413,000 ¹	422,000 ¹
Buccal Cavity & Pharynx (Oral)	9,150	6,300	2,850	26,800	18,600	8,200
Lip	175	150	25	4,600	4,100	500
Tongue	2,000	1,400	600	4,800	3,200	1,600
Salivary Gland	700	450	250	9,700	5,800	3,900
Floor of Mouth	525	400	125			
Other & Unspecified Mouth	1,550	1,000	550			
Pharynx	4,200	2,900	1,300	7,700	5,500	2,200
Digestive Organs	113,500	59,250	54,250	198,600	102,100	96,500
Esophagus	8,300	6,000	2,300	8,900	6,300	2,600
Stomach	13,800	8,200	5,600	24,200	14,600	9,600
Small Intestine	700	350	350	2,100	1,100	1,000
Large Intestine } (Colon- Rectum } Rectum	48,600	23,000	25,600	85,000	39,000	46,000
Liver & Biliary Passages	8,500	4,600	3,900	38,000	21,000	17,000
Pancreas	9,900	4,800	5,100	13,100	6,100	7,000
Other & Unspecified Digestive	22,300	11,600	10,700	24,800	12,800	12,000
Other & Unspecified Digestive	1,400	700	700	2,500	1,200	1,300
Respiratory System	116,100	84,000	32,100	143,000	102,100	40,900
Larynx	3,700	3,100	600	10,900	9,100	1,800
Lung	111,000	80,000	31,000	129,000	91,000	38,000
Other & Unspecified Respiratory	1,400	900	500	3,100	2,000	1,100
Bone, Tissue & Skin	10,300	5,900	4,400	21,500	11,000	10,500
Bone	1,750	1,000	750	1,900	1,100	800
Connective Tissue	1,650	800	850	4,800	2,600	2,200
Skin	6,900 ⁴	4,100	2,800	14,800 ²	7,300 ³	7,500 ²
Breast	37,300	300	37,000	112,900	900	112,000
Genital Organs	46,750	24,250	22,500	155,700	78,300	77,400
Cervix, Invasive } Uterus	7,100	—	7,100	16,000 ³	—	16,000 ³
Corpus, Endometrium } Uterus	3,000	—	3,000	39,000	—	39,000
Ovary	11,400	—	11,400	18,000	—	18,000
Prostate	23,300	23,300	—	73,000	73,000	—
Other & Unspecified Genital, Male	950	950	—	5,300	5,300	—
Other & Unspecified Genital, Female	1,000	—	1,000	4,400	—	4,400
Urinary Organs	18,900	12,300	6,600	55,200	38,300	16,900
Bladder	10,600	7,300	3,300	37,100	27,000	10,100
Kidney & Other Urinary	8,300	5,000	3,300	18,100	11,300	6,800
Eye	400	200	200	1,800	900	900
Brain & Central Nervous System	10,400	5,700	4,700	12,400	6,900	5,500
Endocrine Glands	1,500	600	900	11,100	3,500	7,600
Thyroid	1,050	350	700	10,100	2,900	7,200
Other Endocrine	450	250	200	1,000	600	400
Leukemia	15,900	8,900	7,000	23,500	13,000	10,500
Other Blood & Lymph Tissues	21,100	11,000	10,100	39,600	20,900	18,700
Hodgkin's Disease	1,600	900	700	7,000	4,000	3,000
Multiple Myeloma	6,900	3,500	3,400	9,600	4,900	4,700
Other Lymphomas	12,600	6,600	6,000	23,000	12,000	11,000
All Other & Unspecified Sites	28,700	14,300	14,400	32,900	16,500	16,400

Note: The estimates of new cancer cases are offered as a rough guide and should not be regarded as definitive. Especially note that year-to-year changes may only represent improvements in the basic data.

¹ Carcinoma in situ and non-melanoma skin cancers not included in totals. Carcinoma in situ of the uterine cervix accounts for over 45,000 new cases annually. Non-melanoma skin cancer accounts for about 400,000 new cases annually. ² Melanoma only. ³ Invasive cancer only. ⁴ Melanoma 5,100; other skin 1,800.

Incidence estimates are based on rates from NCI SEER Program, 1973-1978.

RESEARCH POSITIONS AT THE NATIONAL CANCER INSTITUTE¹

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

POSITION	ELIGIBILITY	ANNUAL SALARY	MECHANISM OF ENTRY
I. CIVIL SERVICE			
A. Civil Service (tenured)	Appropriate advanced education, experience and knowledge needed by NCI to conduct its programs.	Minimum starting: Ph.D. – \$34,930 Physicians – \$58,211 Maximum: \$63,800	Office of Personnel Management, Contact Director or Laboratory Chief in area of interest or the NCI Personnel Office.
II. SPECIAL APPOINTMENT OF EXPERTS AND CONSULTANTS			
A. Special Appointment of Experts and Consultants (non-tenured appointment which can be extended up to 4 years.	Applicants shall possess outstanding experience and ability as to justify recognition as authorities in their particular fields of activity.	Equivalent to the salary range of GS-13 through GS-18. Maximum: \$63,800	Recommendation by Division Directors. Final approval rests with the Director, NCI.
III. MEDICAL STAFF FELLOWS			
A. Medical Staff Fellows	Appointment for 2 or 3 years with an additional 1-year extension for an initial 2-year appointment. Graduate of accredited medical or osteopathic school and completion of internship. Completion of 2 or 3 years of clinical training beyond the M.D. degree and demonstrated outstanding ability to conduct successfully, preestablished programs in both clinical and laboratory research.	\$30,000-\$34,000	Apply to the Clinical and Professional Education Section, Clinical Center, National Institutes of Health 20205.
B. Medical Staff Fellows in Pharmacology (PRAT Fellows). For physicians committed to research careers in pharmacological sciences, or clinical pharmacology.	Appointment for 2 or 3 years with an additional 1-year extension for an initial 2-year appointment. Graduate of accredited medical or osteopathic school and completion of internship. Completion of 2 or 3 years of clinical training beyond the M.D. degree and demonstrated outstanding ability to conduct successfully, preestablished programs in both clinical and laboratory research.	\$30,000-\$34,000	Apply to the Clinical and Professional Education Section, Clinical Center, National Institutes of Health 20205.
IV. VISITING PROGRAM (limited tenure)²			
A. Visiting Fellow (maximum 3 years)	1-3 years postdoctoral experience or training.	Entrance stipend \$16,000-\$17,600 No dependency allowance provided.	Contact Director or Laboratory Chief in area of interest.
B. Visiting Associates (1 year with renewals to end of project)	3+ years postdoctoral experience or training with appropriate knowledge needed by NCI.	\$20,256-\$38,185	Contact Director or Laboratory Chief in area of interest.
C. Visiting Scientist (duration of project)	6+ years postdoctoral experience with appropriate unusual experience and knowledge needed.	\$29,374-\$57,500	Contact Director or Laboratory Chief in area of interest.

V. STAFF FELLOWSHIPS

POSITION	ELIGIBILITY	ANNUAL SALARY	MECHANISM OF ENTRY
A. Staff Fellowship	Physician or other doctoral degree equivalent awarded within last 5 years, U. S. citizen or non-citizen eligible for naturalization within 4 years. Maximum five-year appointment.	Staff Fellows Physicians \$20,688-\$34,312 Other Doctorates \$17,000-\$34,269 Senior Staff Fellows Physicians \$23,439-\$46,570 Other Doctorates \$20,688-\$38,422	Contact Director or Laboratory Chief in area of interest or the NCI Personnel Office.

VI. CIVIL SERVICE SUMMER EMPLOYMENT PROGRAMS

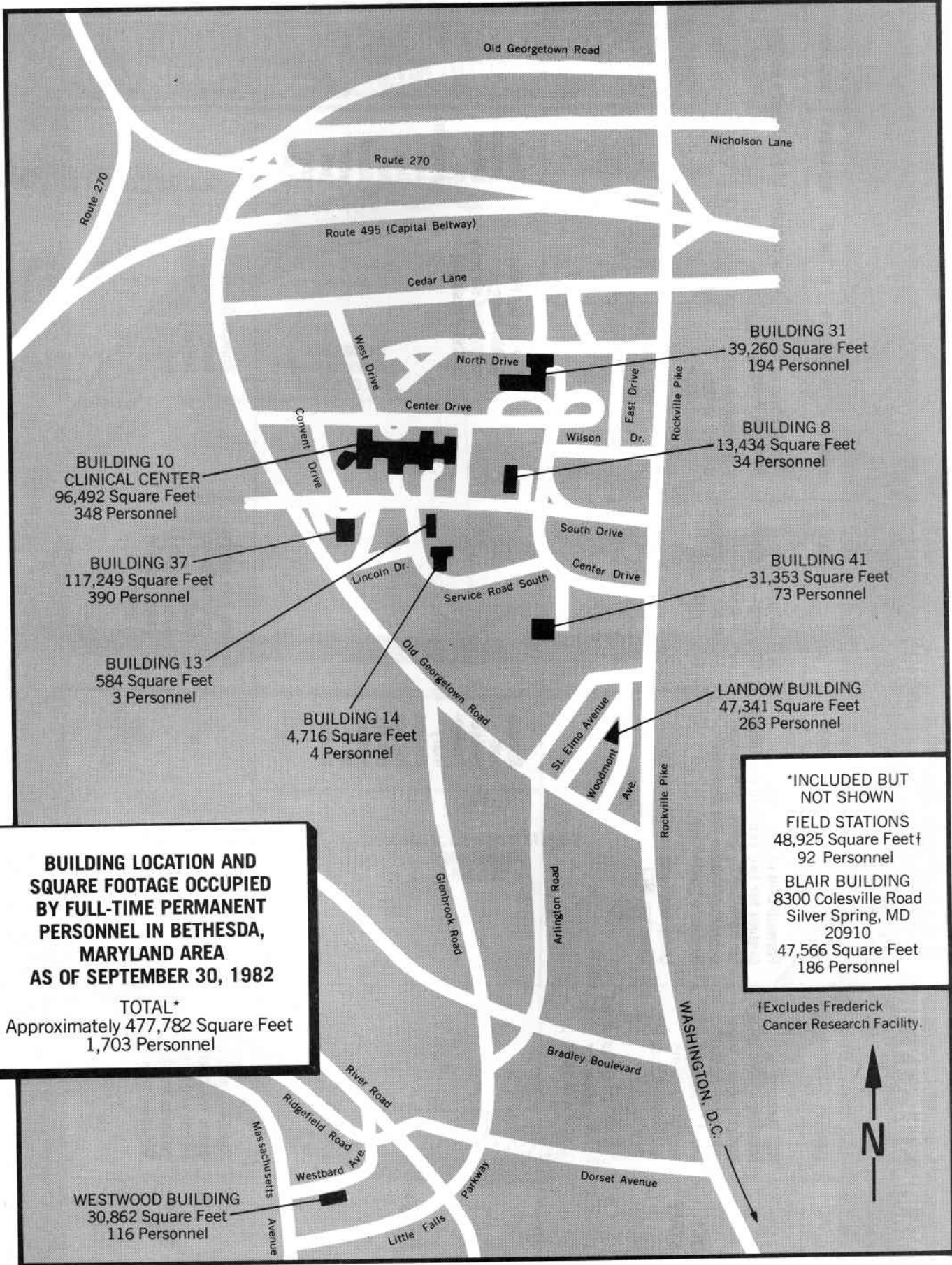
A. Summer Clerical Program	Must be 18 years of age or older (16 if high school graduate).	GS-1 through GS-4 Grade is based on education and/or experience.	Apply to NIH on or before March 15.
B. Summer Undergraduate Program	Students majoring in biological and/or physical sciences or related field, or applicants with appropriate experience.	GS-1 through GS-4 Grade is based on education and/or experience.	Apply to NIH by March 15.
C. Summer Graduate Program	College graduate, graduate student, planning to attend graduate school, faculty member, or equivalent experience and/or education.	GS-5 through GS-12 For some occupations superior scholastic work may qualify for a higher grade level.	Apply to NIH by March 15.
D. Summer Employment for Needy Youth	Educationally and economically disadvantaged youths in their formative years (must have reached 16th birthday).	Federal minimum wage.	Register with the local office of the State Employment service and apply to NIH.
E. Stay-in-School Program	Substantially full-time or full-time student at least 16 years of age who needs earnings from employment to continue in school.	Salary is commensurate with duties assigned and student's education and/or experience.	Apply to NIH. No deadline required for applying. However, no new appointments are made between May 1 to August 30.
F. The Federal Junior Fellowship Program	Graduating high school senior in a public or private school in the Metro. Wash., D. C. area. Must be in upper 10% of graduating class, have applied for admission to an accredited college or university and need financial assistance to attend school.	GS-1 through GS-4	Nominations are submitted directly to the Office of Personnel Management by high school principals or counselors.

VII. SPECIAL PROGRAMS

A. Research Fellow sponsored by organization other than NIH, PHS.	Determined by sponsoring organization.	Established by sponsoring organization.	Contact Director or Laboratory Chief in area of interest; also apply to sponsoring agency, e.g., American Cancer Society, Eleanor Roosevelt Cancer Foundation, Leukemia Society of America, Inc., etc.
B. COSTEP Program (operates year-round) Maximum 120 days per 12-month period.	U. S. Citizen. Must have completed one year of study in a medical, dental or veterinary school; or a minimum of two years of baccalaureate program in a health-related field such as engineering, nursing, pharmacy, etc. May be enrolled in a master's or doctoral program in a health-related field (designated by the Assistant Secretary for Health). Physical requirements of PHS Commissioned Corps. Plans to return to college.	Pay and allowance of a Commissioned Officer, Junior Asst. Grade.	Apply to PHS Commissioned Corps, COSTEP SECTION, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20852.
C. Fogarty International Scholars	International reputation, productivity, demonstrated ability in biomedical field.	\$42,000 per annum	Recommendation to Fogarty Center by Institute Director or Scientist. Contact Director in area of interest.

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

² Under most circumstances, the various visiting programs are limited to non-citizens.



MAJOR STEPS IN THE BUDGET FORMULATION REVIEW PROCESS

	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
NCI STAFF ¹	<p>NCI Director's Meeting—establish budget policy for upcoming fiscal year; review operating plans for current fiscal year</p> <p>Submit Congressional Justification for next fiscal year</p>		<p>Formulation of Preliminary Budget for two years in the future for both the by-pass, and budget submitted within the Administration's guidelines</p> <p>Congressional Testimony by Director, NCI</p>			<p>NCI Director's Meeting—establish specific division levels for upcoming fiscal year</p>		<p>Formulation of By-Pass Budget</p> <p>Formulation of Budget within Administration guidelines</p>		<p>Formulation of President's Budget</p>		
NCAB ²					<p>Review and revise Preliminary Budget for two fiscal years in future</p>				<p>Review By-Pass (OMB) Budget submitted directly to the President</p>	<p>Division presentations of program activities for fiscal year just completed</p>		
BSC ³	<p>Review operating plans for current fiscal year and policies from NCI Director's Meeting</p>					<p>Review and advise on implementation of specific divisional programs current fiscal year</p>				<p>Annual Division Budget Reviews current and future plans</p>		

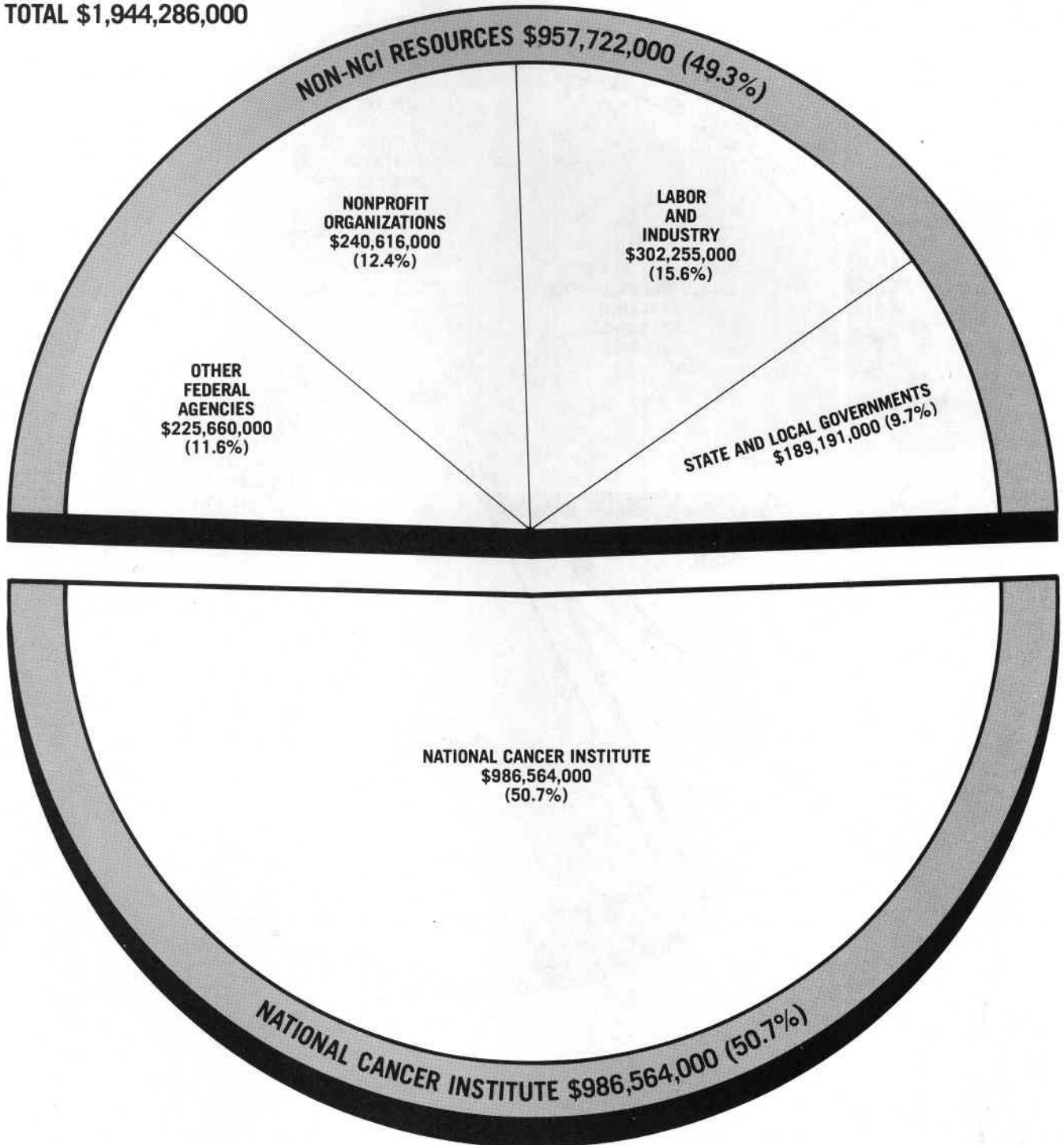
¹ Executive Committee and key administrative staff

² National Cancer Advisory Board—presidential appointees

³ Board of Scientific Counselors—outside NCI peer review bodies for each of four operating divisions

TOTAL NATIONAL RESOURCES FOR CANCER RESEARCH AND CANCER CONTROL — FISCAL YEAR 1982

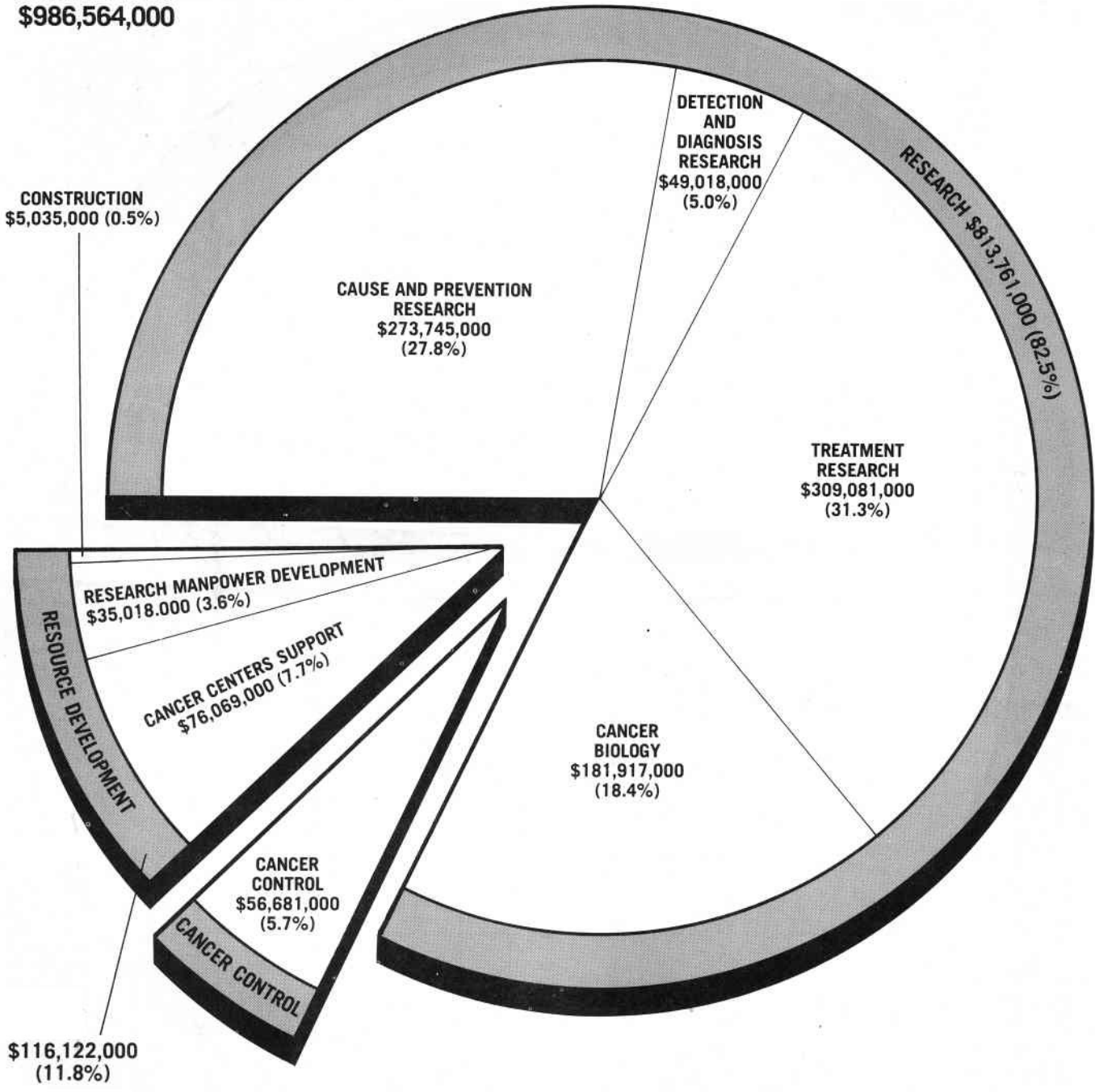
TOTAL \$1,944,286,000



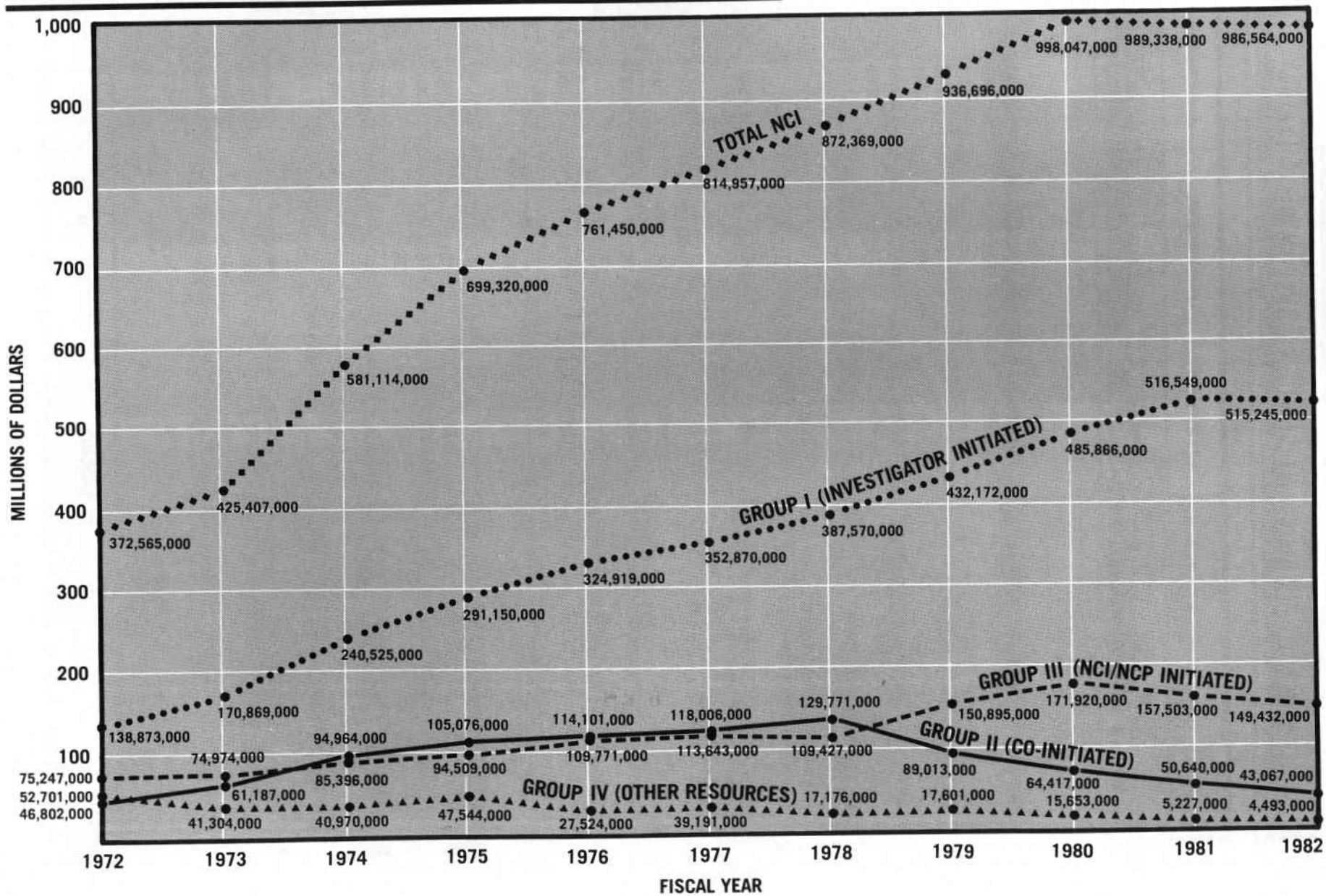
NOTE: Non-NCI resources data were provided by the Office of Program Planning and Analysis, NCI.

NCI PROGRAM STRUCTURE — FISCAL YEAR 1982

TOTAL DOLLARS
\$986,564,000



NATIONAL CANCER INSTITUTE BUDGET HISTORY BY GROUP



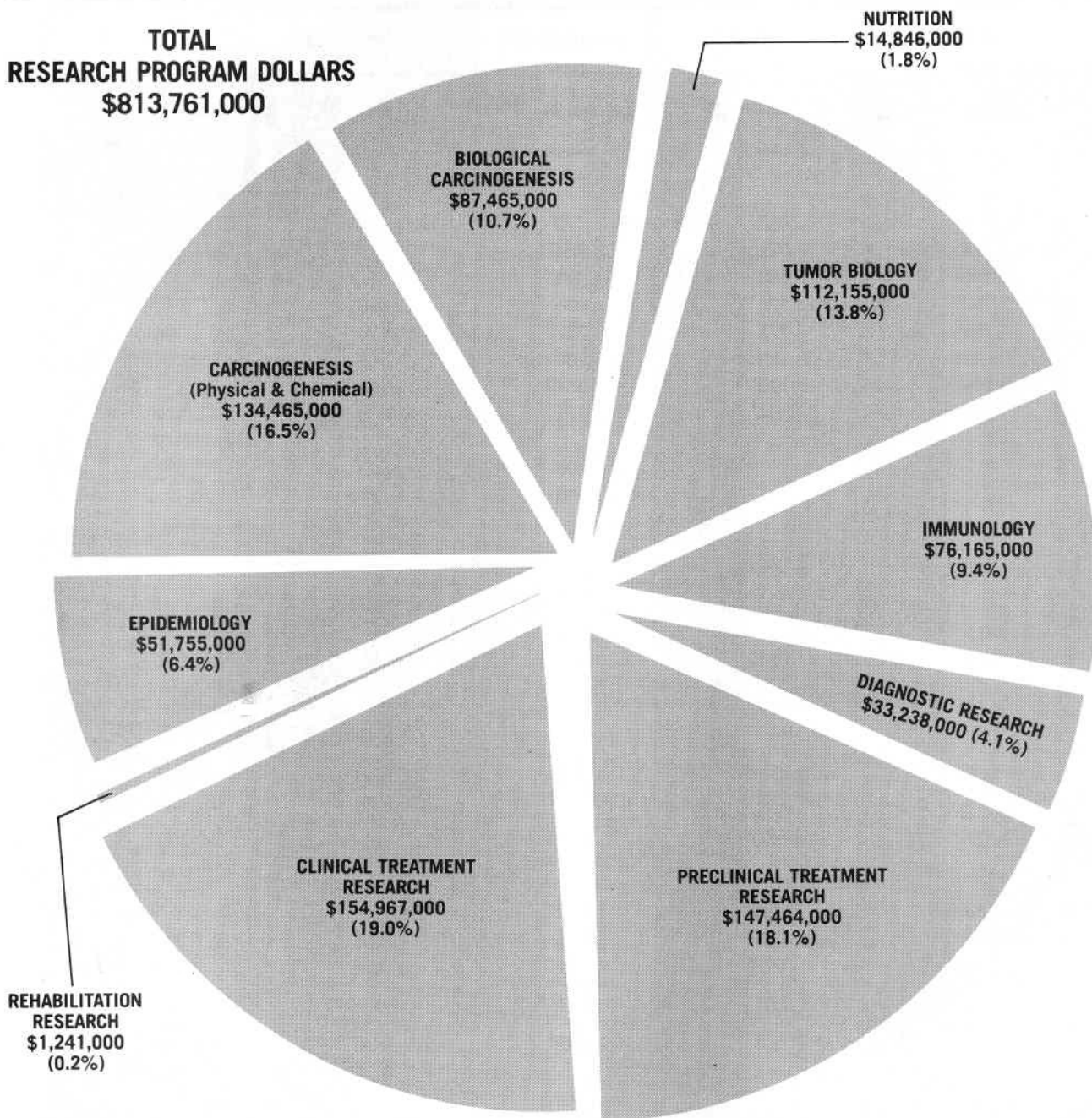
NATIONAL CANCER INSTITUTE BUDGET HISTORY BY MECHANISMS

(DOLLARS IN THOUSANDS)

	1973 ACTUAL		1974 ACTUAL		1975 ACTUAL		1976 ACTUAL	
	DOLLARS	PERCENT OF TOTAL	DOLLARS	PERCENT OF TOTAL	DOLLARS	PERCENT OF TOTAL	DOLLARS	PERCENT OF TOTAL
Group I – Investigator Initiated								
Regular Research Grants	\$ 73,412	21.1	\$ 99,415	21.5	\$115,195	21.4	\$130,633	22.7
Clinical Cooperative Groups	12,791	3.7	16,196	3.5	19,213	3.6	23,263	4.0
Program Projects – PO1's	52,008	14.9	71,997	15.6	84,536	15.7	80,029	13.9
Clinical Education Program	–	–	–	–	5,033	.9	7,698	1.3
Research Career Program	1,818	.5	1,673	.4	2,806	.5	3,243	.6
Fellowships and Training	13,888	4.0	23,562	5.1	23,104	4.3	18,160	3.1
Organ Site	3,950	1.1	10,007	2.2	11,167	2.1	14,090	2.5
Cancer Centers – Core Support	13,002	3.7	17,575	3.8	30,096	5.6	47,803	8.3
Other Centers – Support Grants	–	–	–	–	–	–	–	–
Cooperative Agreements	–	–	–	–	–	–	–	–
Minority Biomedical Support	–	–	–	–	–	–	–	–
Organ Systems	–	–	–	–	–	–	–	–
Subtotal	170,869	49.0	240,525	52.1	291,150	54.1	324,919	56.4
Group II – Co-Initiated								
CREG/RFA	–	–	–	–	–	–	2,577	.5
Research Contracts	61,187	17.6	94,964	20.5	105,076	19.5	111,524	19.3
Subtotal	61,187	17.6	94,964	20.5	105,076	19.5	114,101	19.8
Group III – NCI/NCP Initiated								
Resource Contracts	64,838	18.6	72,365	15.7	82,916	15.4	96,509	16.7
Interagency Agreements	10,136	2.9	13,031	2.8	11,593	2.2	13,262	2.3
Subtotal	74,974	21.5	85,396	18.5	94,509	17.6	109,771	19.0
Group IV – Other Resources								
Planning Grants	2,500	.7	2,880	.6	2,568	.4	2,803	.5
Construction Grants	34,737	10.0	31,692	6.9	30,000	5.6	20,000	3.5
Construction Contracts	4,067	1.2	6,398	1.4	14,976	2.8	4,721	.8
Subtotal	41,304	11.9	40,970	8.9	47,544	8.8	27,524	4.8
Total	348,334	100.0	461,755	100.0	538,279	100.0	576,315	100.0
Percent of Total NCI Budget		81.9		79.5		77.0		75.7
In-House Research	33,032	7.8	40,364	6.9	50,532	7.2	61,243	8.0
Management & Support	39,072	9.2	46,169	7.9	61,935	8.9	69,876	9.2
(NIH Management Fund)	(15,194)	(3.6)	(16,754)	(2.9)	(20,248)	(2.9)	(23,037)	(3.0)
Cancer Control (Grants & Contracts)	4,969	1.1	32,826	5.7	48,574	6.9	54,016	7.1
Subtotal	77,073	18.1	119,359	20.5	161,041	23.0	185,135	24.3
Total NCI	\$425,407	100.0	\$581,114	100.0	\$699,320	100.0	\$761,450	100.0

1977 ACTUAL		1978 ACTUAL		1979 ACTUAL		1980 ACTUAL		1981 ACTUAL		1982 ACTUAL	
DOLLARS	PERCENT OF TOTAL	DOLLARS	PERCENT OF TOTAL	DOLLARS	PERCENT OF TOTAL	DOLLARS	PERCENT OF TOTAL	DOLLARS	PERCENT OF TOTAL	DOLLARS	PERCENT OF TOTAL
\$140,159	23.0	\$158,716	24.7	\$188,488	27.3	\$213,610	29.0	\$237,662	32.6	\$240,956	33.8
27,121	4.5	29,774	4.6	32,021	4.6	36,884	5.0	35,094	4.8	38,808	5.5
83,453	13.7	88,058	13.7	93,953	13.6	104,094	14.1	115,311	15.8	111,365	15.6
8,996	1.5	9,952	1.5	11,404	1.7	10,906	1.5	7,999	1.1	4,614	0.6
3,507	.6	4,339	.7	4,771	0.7	5,357	0.7	5,480	0.8	5,706	0.8
19,791	3.3	20,129	3.1	20,139	2.9	27,260	3.7	25,606	3.5	22,374	3.1
14,711	2.4	16,194	2.5	17,032	2.5	17,554	2.4	15,962	2.2	-	-
55,132	9.1	60,348	9.4	64,364	9.3	67,421	9.1	71,408	9.8	70,977	10.0
-	-	-	-	-	-	-	-	-	-	4,019	0.6
-	-	-	-	-	-	800	0.1	300	-	504	0.1
-	-	-	-	-	-	1,980	0.3	1,727	0.2	1,977	0.3
-	-	-	-	-	-	-	-	-	-	13,945	2.0
352,870	58.1	387,570	60.2	432,172	62.6	485,866	65.9	516,549	70.8	515,245	72.4
7,266	1.2	9,412	1.5	7,894	1.1	6,971	0.9	6,712	0.9	9,403	1.3
110,740	18.2	120,359	18.6	81,119	11.8	57,446	7.8	43,928	6.0	33,664	4.7
118,006	19.4	129,771	20.1	89,013	12.9	64,417	8.7	50,640	6.9	43,067	6.0
94,229	15.5	87,806	13.6	130,161	18.9	151,305	20.5	140,622	19.3	88,028	12.4
19,414	3.2	21,621	3.4	20,734	3.0	20,615	2.8	16,881	2.3	61,404	8.6
113,643	18.7	109,427	17.0	150,895	21.9	171,920	23.3	157,503	21.6	149,432	21.0
1,199	.2	632	.1	271	.1	221	-	-	-	-	-
16,000	2.6	12,000	1.9	12,452	1.8	10,814	1.5	2,027	.3	1,225	0.2
5,992	1.0	4,544	.7	4,878	.7	4,618	.6	3,200	.4	3,268	0.4
39,191	3.8	17,176	2.7	17,601	2.6	15,653	2.1	5,227	.7	4,493	0.6
607,710	100.0	643,944	100.0	689,681	100.0	737,856	100.0	729,919	100.0	712,237	100.0
	74.6		73.8		73.6		73.9		73.8		72.2
67,855	8.3	79,217	9.1	88,944	9.5	98,665	9.9	109,377	11.0	112,125	11.4
80,184	9.8	86,594	9.9	91,167	9.7	97,863	9.8	96,495	9.8	110,012	11.1
(26,817)	(3.3)	(30,150)	(3.5)	(35,622)	(3.8)	(39,549)	(4.0)	(42,471)	(4.3)	(48,817)	(4.9)
59,208	7.3	62,614	7.2	66,904	7.2	63,663	6.4	53,547	5.4	52,190	5.3
207,247	25.4	228,425	26.2	247,015	26.4	260,191	26.1	259,419	26.2	274,327	27.8
\$814,957	100.0	\$872,369	100.0	\$936,696	100.0	\$998,047	100.0	\$989,338	100.0	\$986,564	100.0

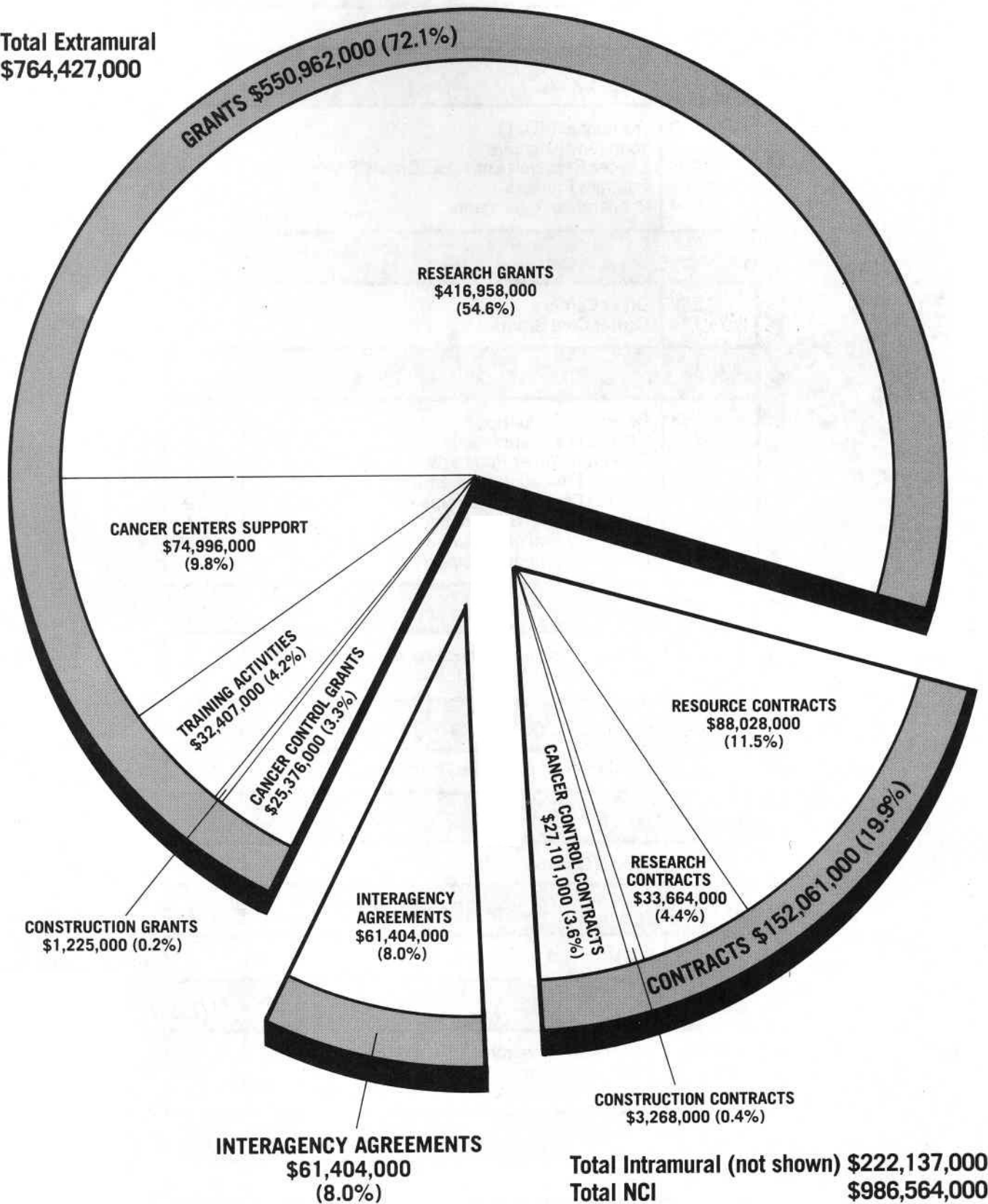
NCI RESEARCH PROGRAMS — FISCAL YEAR 1982



Research Programs	Amount	PERCENT OF TOTAL
Research Programs	\$813,761,000	82.5
Resource Development		
Cancer Centers Support	76,069,000	7.7
Research Manpower Development	35,018,000	3.6
Construction	5,035,000	0.5
Cancer Control	56,681,000	5.7
Total NCI	\$986,564,000	100.0

NCI EXTRAMURAL FUNDS — FISCAL YEAR 1982

Total Extramural
\$764,427,000

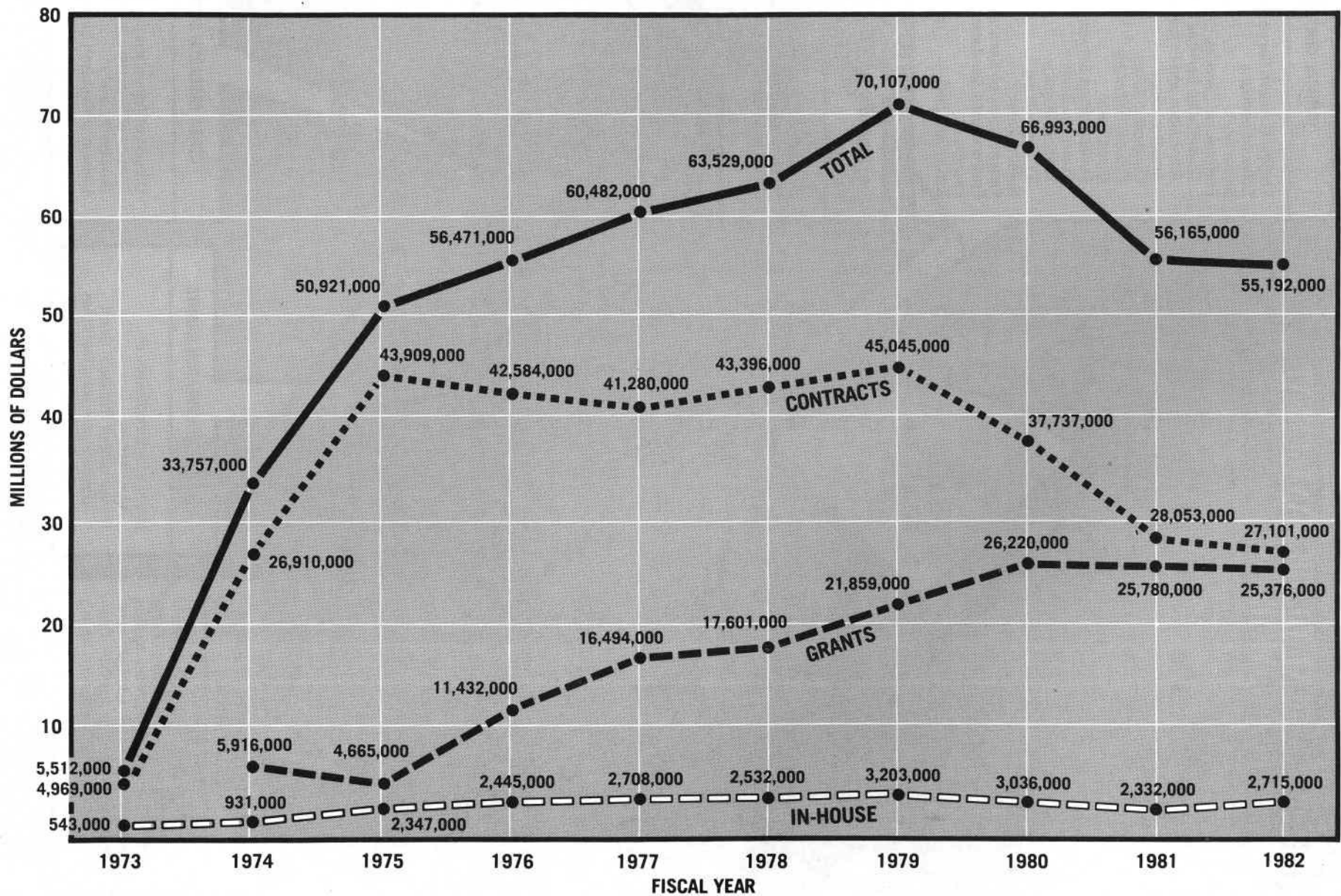


TOTAL NCI DOLLARS BY MECHANISMS — FISCAL YEAR 1982

(DOLLARS IN THOUSANDS)

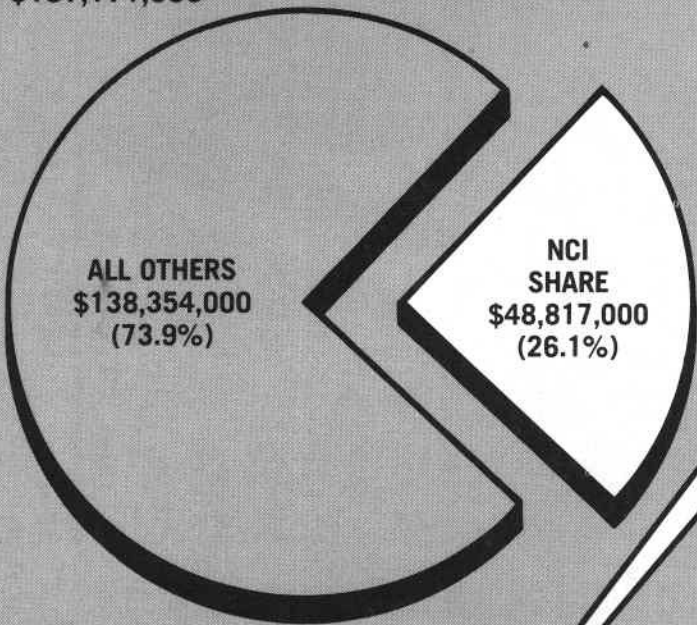
	AMOUNT	MECHANISM	PERCENT OF TOTAL	
	RESEARCH PROJECT GRANTS			
\$358,853	\$232,743	Traditional (R01)	23.6	36.4%
	4,838	Young Investigators	0.5	
	9,403	Cancer Research Emphasis Grants/RFA's	0.9	
	111,365	Program Projects	11.3	
	504	Cooperative Agreements	0.05	
	RESEARCH CENTERS GRANTS			
\$74,996	3,262	Other Centers	0.3	7.6%
	71,734	Center Core Grants	7.3	
	OTHER RESEARCH GRANTS			
\$68,138	2,653	Scientific Evaluation	0.3	6.9%
	722	Conference Grants	0.1	
	4,921	Research Career Programs	0.5	
	4,614	Clinical Education Programs	0.5	
	38,808	Clinical Cooperative Groups	3.9	
	13,945	National Organ Site Program	1.4	
	498	Veterinary Pathology Awards	0.05	
	1,977	Minority Biomedical Support	0.2	
	TRAINING PROGRAM			
\$22,374	2,864	National Research Service Awards— Individual	0.3	2.3%
	19,510	National Research Service Awards— Institutional	2.0	
	RESEARCH AND RESOURCE CONTRACTS			
\$183,096	183,096	Research and Resource Contracts	18.5	18.5%
	CANCER CONTROL			
\$55,192	55,192	Cancer Control	5.6	5.6%
	CONSTRUCTION			
\$4,493	4,493	Construction	0.5	0.5%
	IN-HOUSE			
\$219,422	168,181	Intramural Research	17.0	22.2%
	38,416	Direct Operations	3.9	
	12,825	Program Management	1.3	
	\$986,564	TOTAL NCI	100.0	

CANCER CONTROL OBLIGATIONS BY MECHANISM — FISCAL YEARS 1973-1982



REIMBURSEMENT TO NIH MANAGEMENT FUND — FISCAL YEAR 1982

TOTAL NIH SERVICES
\$187,171,000



DISTRIBUTION OF NCI SERVICES
\$48,817,000



DIVISION OF COMPUTER RESEARCH AND TECHNOLOGY

\$2,124,000

Research & Development Program in Which Concepts & Methods of Computer Science Are Applied to Bio-medical Problems (In addition, services are rendered to the NIH Communities on a fee-for-service basis.)

DIVISION OF RESEARCH GRANTS

\$2,871,000

Initial Scientific Review of Applications
Assignment of Research Grant Applications Among Institutes

OTHER RESEARCH SERVICES

\$20,999,000

Division of Administrative Services
Division of Engineering Services
Division of Safety
Division of Research Services

CLINICAL CENTER

Employee Health Services
Service Functions
Social Work
Professional Services
Consultative Services
Admissions and Follow-up
Anesthesiology
Diagnostic X-Ray
Clinical Pathology
Blood Bank
Rehabilitation Service
Pharmacy Service
Medical Records
TV Engineering
Nursing Service
Patient Nutrition Service
Environmental Sanitation Control
Laundry
Radiation Safety

STANDARD LEVEL USER CHARGES (SLUC)

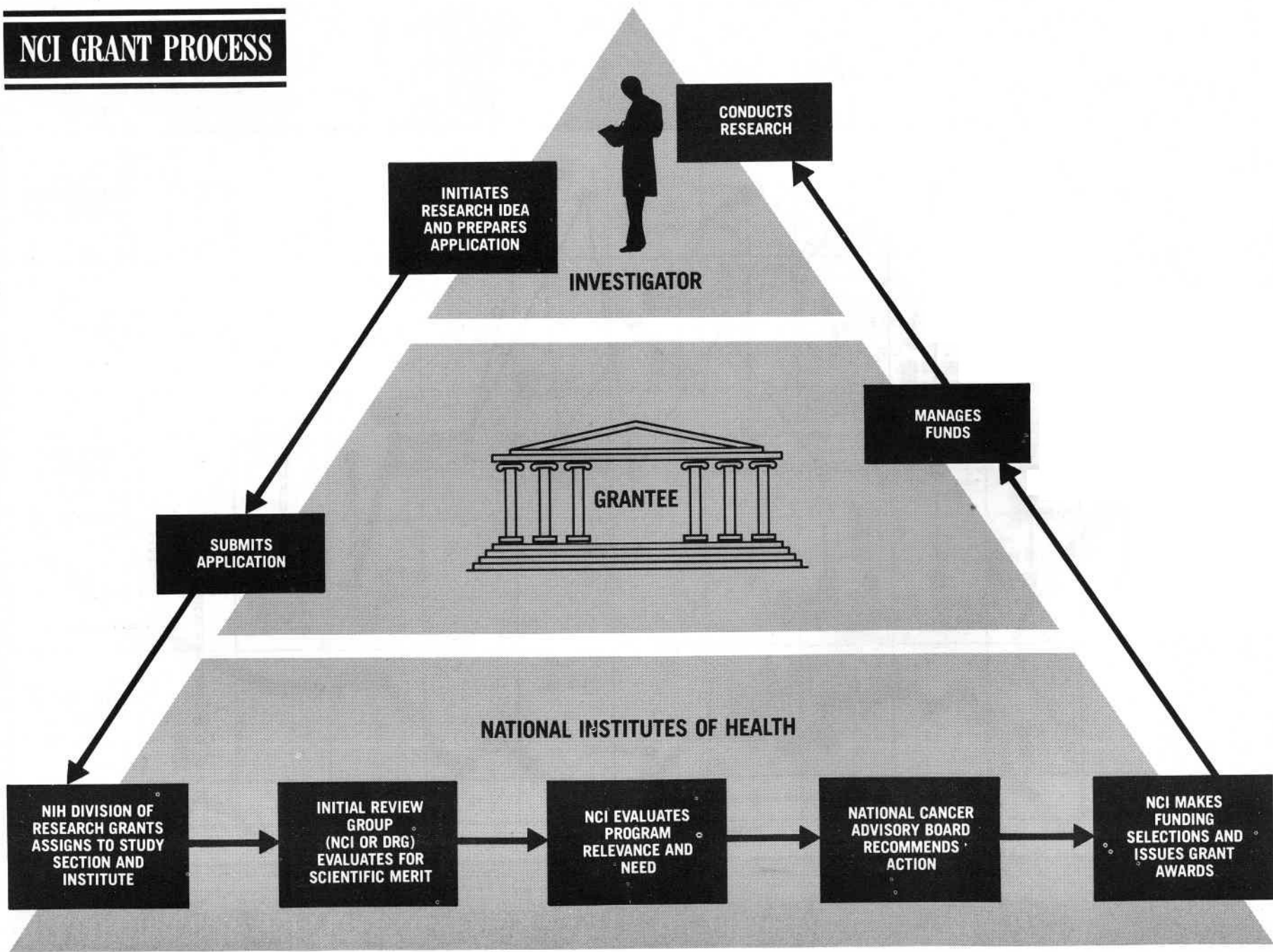
Building usage including utilities
Major renovations
Guard services for rental buildings

\$20,624,000

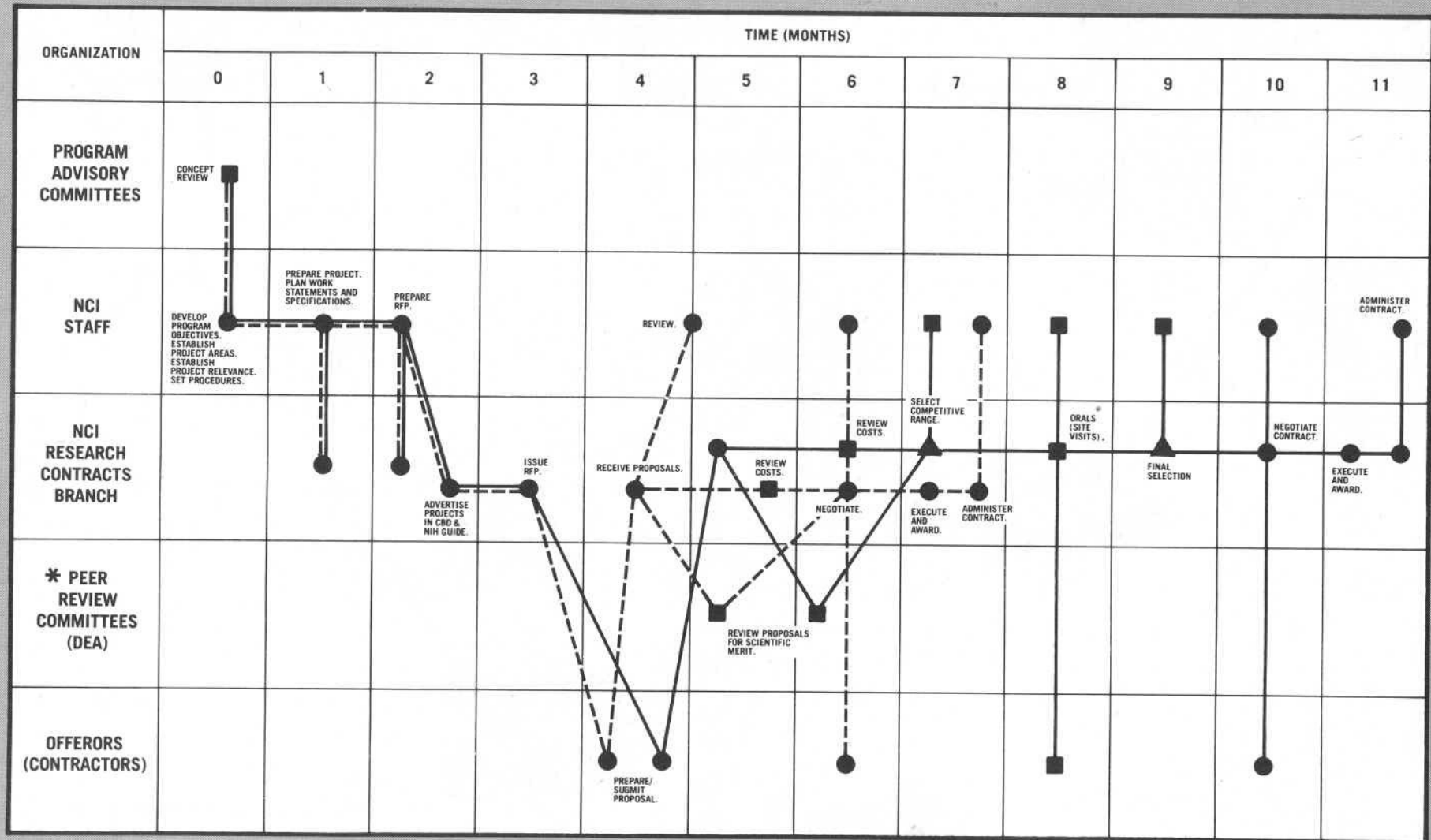
\$2,199,000

The Management Fund provides for the financing of certain common research supporting services and administrative activities which are required in the operating of NIH.

NCI GRANT PROCESS



NCI CONTRACT AWARD PROCESS — UNDER CANCER ACT OF 1971



NOTE: SIMULTANEOUS ACTIVITIES BY MORE THAN ONE ORGANIZATION INDICATE COOPERATIVE EFFORTS.

LEGEND:

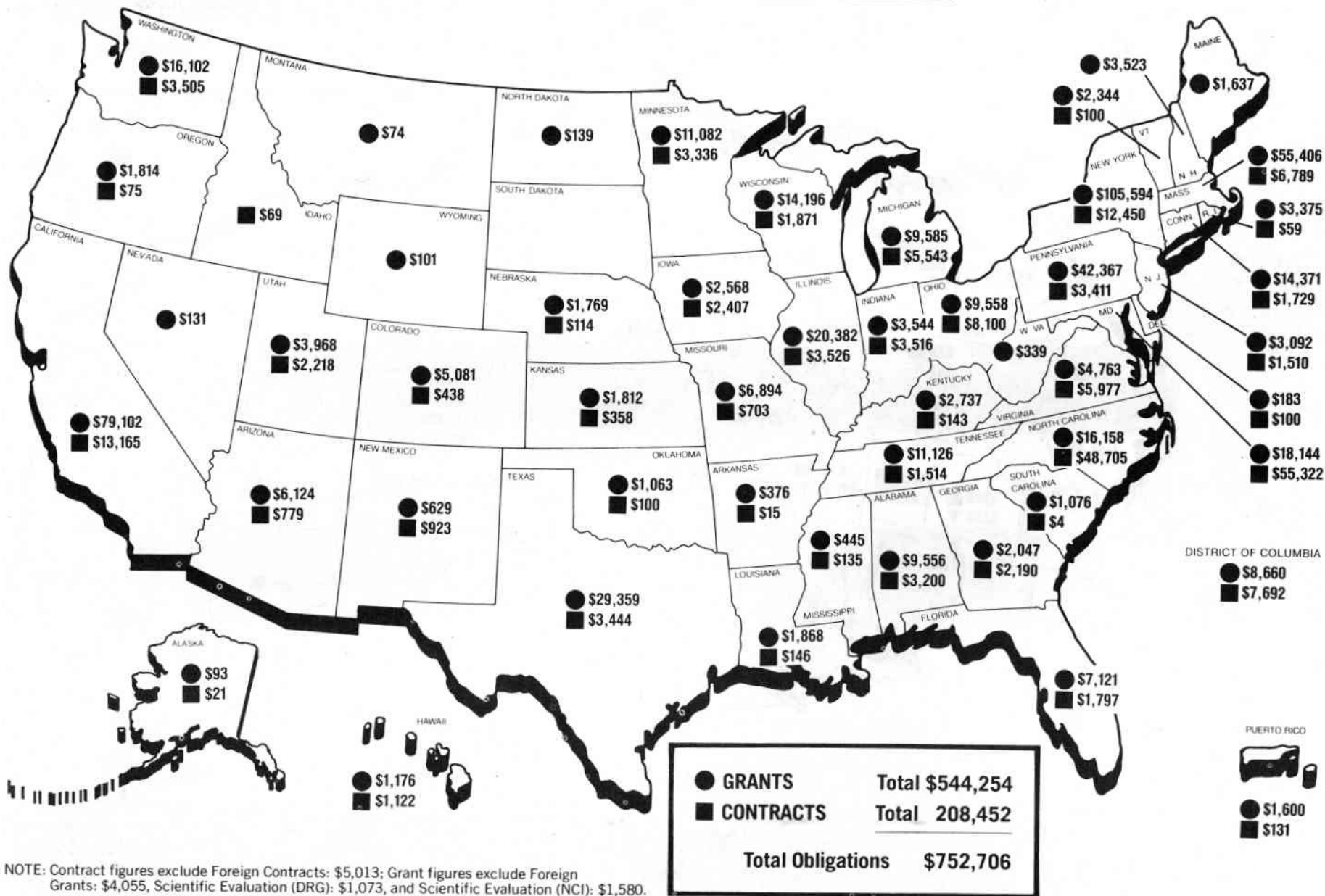
- OPERATION
- REVIEW
- ▲ DECISION

- NORMAL COMPETITIVE FLOW
- - - NON-COMPETITIVE CONTRACTS

* AD HOC COMMITTEES MAY BE USED— INCLUDES NON-GOVERNMENT EMPLOYEES.

STATE DISTRIBUTION OF GRANTS AND CONTRACTS — FISCAL YEAR 1982

(DOLLARS IN THOUSANDS)



NOTE: Contract figures exclude Foreign Contracts: \$5,013; Grant figures exclude Foreign Grants: \$4,055, Scientific Evaluation (DRG): \$1,073, and Scientific Evaluation (NCI): \$1,580.

INSTITUTIONS RECEIVING MORE THAN \$2,000,000 FROM THE NATIONAL CANCER INSTITUTE IN FISCAL YEAR 1982

(DOLLARS IN THOUSANDS)

NAME OF INSTITUTION	GRANTS	CONTRACTS	CONSTRUCTION	TOTAL	STATE
Alabama, University of	\$ 7,273	\$ 482	\$ -	\$ 7,755	Alabama
Southern Research Institute	-	2,370	-	2,370	Alabama
Arizona, University of	5,878	760	-	6,638	Arizona
California, University of	36,903	2,578	-	39,481	California
La Jolla Cancer Research Foundation	2,097	-	-	2,097	California
Northern California Cancer Program	2,064	2,156	-	4,220	California
Salk Institute for Biological Research	3,640	-	-	3,640	California
Scripps Clinic and Research Foundation	4,241	-	-	4,241	California
Southern California, University of	9,952	1,805	-	11,757	California
SRI International	1,374	2,387	-	3,761	California
Stanford University	10,258	214	-	10,472	California
Colorado, University of	2,951	-	-	2,951	Colorado
Yale University School of Medicine	12,396	892	-	13,288	Connecticut
George Washington University	2,020	32	-	2,052	Dist. of Col.
Georgetown University	1,797	418	-	2,215	Dist. of Col.
Howard University	1,754	471	-	2,225	Dist. of Col.
Emory University	1,420	1,428	-	2,848	Georgia
Florida, University of	2,732	-	-	2,732	Florida
Miami, University of	3,675	421	-	4,096	Florida
Hawaii, University of	1,153	1,001	-	2,154	Hawaii
American College of Radiology	2,407	-	-	2,407	Illinois
Chicago, University of	7,585	33	-	7,618	Illinois
IIT Research Institute	75	2,072	-	2,147	Illinois
Illinois, University of	2,732	-	-	2,732	Illinois
Northwestern University	2,837	60	-	2,897	Illinois
Harlan Industries	-	2,533	-	2,533	Indiana
Iowa, University of	2,461	2,315	-	4,776	Iowa
Kentucky, University of	2,011	90	-	2,101	Kentucky
Army, Department of, Ft. Detrick	-	5,222	-	5,222	Maryland
Johns Hopkins University	12,858	1,159	-	14,017	Maryland
Litton Bionetics, Inc.	-	14,813	2,863	17,676	Maryland
Maryland, University of	4,115	784	-	4,899	Maryland
Microbiological Associates	-	2,305	-	2,305	Maryland
Program Resources, Inc.	-	18,032	-	18,032	Maryland
Westat, Inc.	-	3,005	-	3,005	Maryland
Boston University	2,197	-	146	2,343	Massachusetts
Harvard University	9,870	-	-	9,870	Massachusetts
Massachusetts General Hospital	5,194	477	-	5,671	Massachusetts
Massachusetts Institute of Technology	9,058	246	-	9,304	Massachusetts
Sidney Farber Cancer Institute	16,719	691	-	17,410	Massachusetts
Michigan Cancer Foundation	2,238	1,886	-	4,124	Michigan
Michigan, University of	3,775	382	-	4,157	Michigan
Wayne State University	1,390	917	-	2,307	Michigan
Mayo Foundation	5,282	1,778	-	7,060	Minnesota
Minnesota, University of	5,800	1,373	-	7,173	Minnesota
Washington University	4,236	-	-	4,236	Missouri
Dartmouth College	3,301	-	-	3,301	New Hampshire
American Health Foundation	5,928	504	-	6,432	New York

NAME OF INSTITUTION	GRANTS	CONTRACTS	CONSTRUCTION	TOTAL	STATE
Bristol Laboratories Division of Bristol Myers Co.	\$ -	\$ 2,543	\$ -	\$ 2,543	New York
Cold Spring Harbor Laboratory	5,458	-	-	5,458	New York
Columbia University	10,410	-	-	10,410	New York
Cornell University - Ithaca	2,992	225	-	3,217	New York
Memorial Hospital for Cancer and Allied Diseases	4,707	2,458	-	7,165	New York
Mount Sinai School of Medicine	3,591	283	-	3,874	New York
New York State Department of Health	12,597	-	-	12,597	New York
New York University	6,186	78	-	6,264	New York
Rochester, University of	7,702	-	-	7,702	New York
Rockefeller University	4,071	-	-	4,071	New York
Sloan-Kettering Institute for Cancer Research	22,667	442	-	23,109	New York
State University of New York	5,641	-	-	5,641	New York
Yeshiva University	8,370	-	-	8,370	New York
Duke University	8,965	617	-	9,582	North Carolina
North Carolina, University of	5,184	125	219	5,528	North Carolina
Battelle Memorial Institute	94	4,149	-	4,243	Ohio
Case Western Reserve University	2,376	23	-	2,399	Ohio
Ohio State University	4,032	289	-	4,321	Ohio
Fox Chase Cancer Center	2,083	1,021	-	3,104	Pennsylvania
Hahnemann Medical College and Hospital of Philadelphia	2,276	-	-	2,276	Pennsylvania
Institute for Cancer Research	8,202	702	-	8,904	Pennsylvania
Pennsylvania State University	3,829	27	-	3,856	Pennsylvania
Pennsylvania, University of	6,447	64	-	6,511	Pennsylvania
Pittsburgh, University of	4,293	592	-	4,885	Pennsylvania
Temple University	3,516	-	-	3,516	Pennsylvania
Wistar Institute of Anatomy and Biology	6,454	-	-	6,454	Pennsylvania
Energy, Department of, Oak Ridge National Labs	-	2,525	-	2,525	Tennessee
St. Jude Children's Research Hospital	5,454	-	-	5,454	Tennessee
Vanderbilt University	2,507	77	-	2,584	Tennessee
Baylor College of Medicine	4,964	272	-	5,236	Texas
Texas, University of, Health Science Center	21,400	2,008	-	23,408	Texas
Utah, University of	3,680	2,218	-	5,898	Utah
Vermont, University of	2,193	100	-	2,293	Vermont
Meloy Laboratories, Inc.	-	2,175	-	2,175	Virginia
Virginia Commonwealth University	2,425	-	-	2,425	Virginia
Fred Hutchinson Cancer Research Center	10,344	1,546	-	11,890	Washington
Washington, University of	3,803	1,461	220	5,484	Washington
Wisconsin, University of	13,163	938	-	14,151	Wisconsin

TOTALS	\$447,723	\$105,100	\$3,448	\$556,271	
PERCENT OF TOTAL AWARDED ABOVE	80.5	18.9	0.6	100.0	
TOTAL NCI FISCAL YEAR 1982 OBLIGATIONS	\$986,564				
PERCENT OF NCI TOTAL OBLIGATIONS	45.4	10.7	0.3	56.4	

DISTRIBUTION OF NCI CONTRACTS — FISCAL YEAR 1982

PROGRAM DISTRIBUTION				
PERCENT OF TOTAL NUMBER OF CONTRACTS	NUMBER OF CONTRACTS	NCI PROGRAM AREA	THOUSANDS OF DOLLARS	PERCENT OF TOTAL DOLLARS
5.0	31	Division of Cancer Biology and Diagnosis	\$ 4,575	2.2
50.4	315	Division of Cancer Treatment	60,270	28.7
21.7	136	Division of Cancer Cause and Prevention	94,620	45.0
21.6	135	Division of Resources, Centers, and Community Activities	27,856	13.2
1.3	8	Office of the Director	22,876	10.9
625		TOTALS	\$210,197	

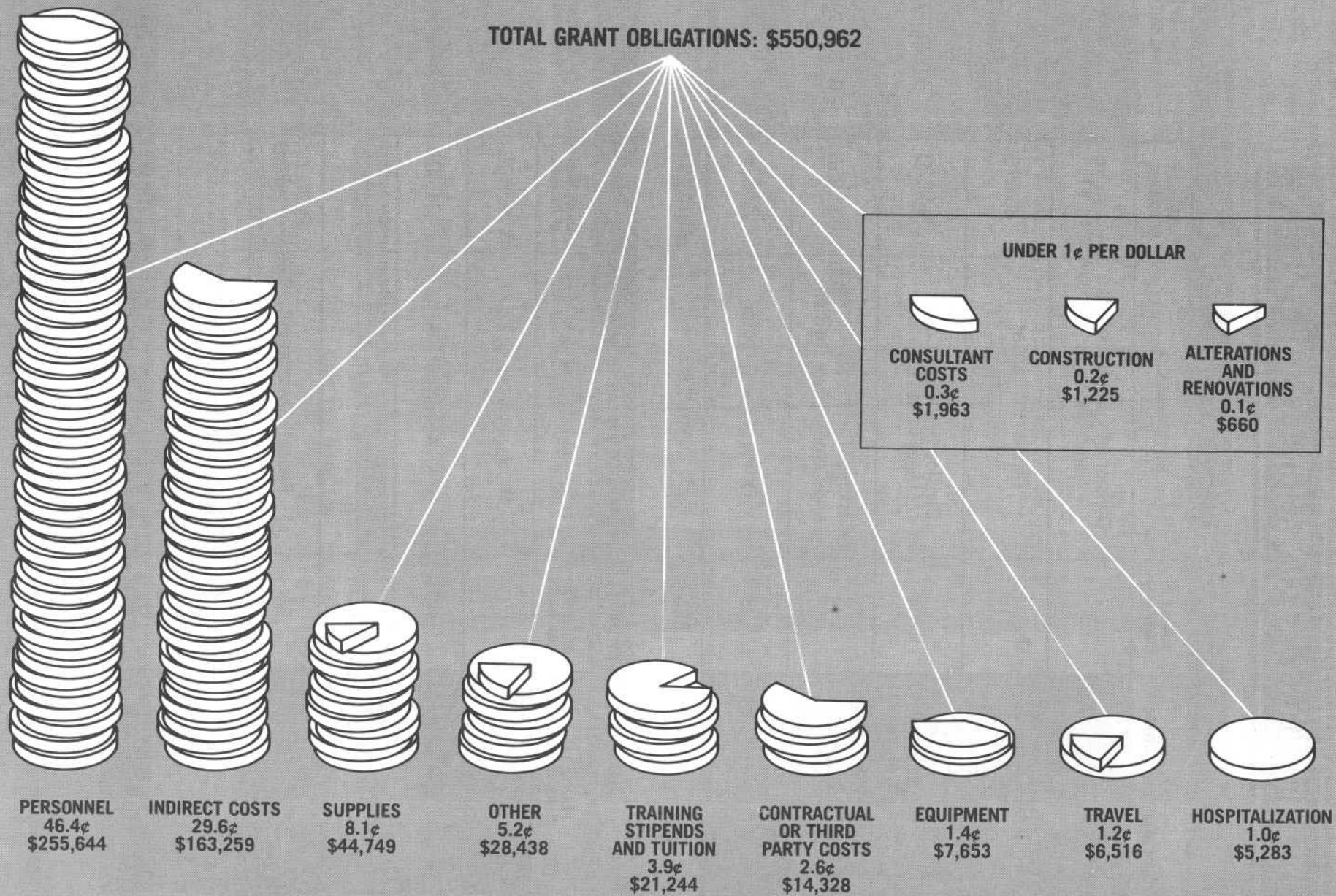
INSTITUTIONAL DISTRIBUTION				
PERCENT OF TOTAL NUMBER OF CONTRACTS	NUMBER OF CONTRACTS	TYPE OF INSTITUTION	THOUSANDS OF DOLLARS	PERCENT OF TOTAL DOLLARS
27.8	174	Profit-Making	\$ 67,175	32.0
30.1	188	Academic	31,401	14.9
26.6	166	Non-Profit	38,901	18.5
9.0	56	Federal Government	63,823	30.4
3.0	19	State and Local Government	3,884	1.8
3.5	22	Foreign	5,013	2.4
625		TOTALS	\$210,197	

NOTE: Excludes contracts that are not in direct support of research or control, such as Cancer Communications, Program Planning, and Construction contracts.

DISTRIBUTION OF THE GRANT DOLLAR—FISCAL YEAR 1982

(DOLLARS IN THOUSANDS)

TOTAL GRANT OBLIGATIONS: \$550,962



FOREIGN RESEARCH GRANTS AND CONTRACTS — FISCAL YEAR 1982

	NUMBER OF GRANTS	GRANT DOLLARS AWARDED	NUMBER OF CONTRACTS	CONTRACT DOLLARS AWARDED	TOTAL DOLLARS AWARDED	PERCENT OF TOTAL AMOUNT AWARDED
Australia	3	\$ 136,448	—	\$ —	\$ 136,448	1.5
Belgium	1	215,250	1	213,286	428,536	4.7
Canada	18	840,946	4	575,941	1,416,887	15.7
China	—	—	1	195,000	195,000	2.2
England	4	304,317	6	1,806,539	2,110,856	23.4
Finland	3	109,511	—	—	109,511	1.2
France	1	504,319	2	1,194,969	1,699,288	18.8
Germany	1	28,800	—	—	28,800	0.3
Ghana	—	—	1	12,500	12,500	0.1
Israel	10	834,476	2	327,500	1,161,976	12.9
Italy	2	67,007	1	145,000	212,007	2.3
Japan	—	—	3	492,000	492,000	5.4
Korea	1	12,029	—	—	12,029	0.1
South Africa	1	41,539	—	—	41,539	0.5
Sweden	9	684,857	—	—	684,857	7.6
Switzerland	3	242,154	—	—	242,154	2.7
Tanzania	—	—	1	50,000	50,000	0.6
TOTAL	57	\$4,021,653¹	22	\$5,012,735	\$9,034,388	100.0

¹ Excludes grants for resource manpower development: \$17,302—Canada; \$16,380—France.

APPROPRIATIONS OF THE NCI 1938-1983

1938	\$ 400,000		
1939	400,000		
1940 THROUGH 1946 \$3,879,570		}	0.18% \$21,000,470
1947	1,820,900		
1948	14,500,000	}	2.32% \$276,315,750
1949	22,000,000		
1950 THROUGH 1956 \$149,481,750		}	11.70% \$1,393,234,000
1957	48,432,000		
1958	56,402,000	}	5.09% \$606,018,563
1959	75,268,000		
1960 THROUGH 1966 \$958,954,000		}	80.71% \$9,612,549,500
1967	175,656,000		
1968	183,356,000	}	80.71% \$9,612,549,500
1969	185,149,500		
1970	190,486,063	}	80.71% \$9,612,549,500
1971	230,383,000		
1972	\$ 378,794,000	}	80.71% \$9,612,549,500
1973	492,205,000		
1974	551,191,500		
1975	691,666,000		
1976	761,727,000 ¹		
"TQ"	152,901,000 ²		
1977	815,000,000		
1978	872,388,000		
1979	937,129,000 ³		
1980	1,000,000,000 ⁴		
1981	989,355,000 ⁵		
1982	986,617,000 ⁶		
1983	983,576,000 ⁷		

TOTAL (1938-1983)\$11,909,118,283

TRANSITION QUARTER ("TQ")—July 1, 1976 through September 30, 1976
—The Interim Period in the changing of the Federal Fiscal Year from July 1 through June 30, to October 1 through September 30.

¹ Includes \$18,163,000 for training funds provided by Continuing Resolution.

² Includes \$3,201,000 for training funds provided by Continuing Resolution.

³ Included \$20,129,000 for training funds provided by Continuing Resolution.

⁴ 1980 appropriation authorized under a Continuing Resolution.

⁵ Reflects 1981 rescission of \$11,975,000.

⁶ Amount included in Continuing Resolution. Includes \$47,988,000 transferred to the National Institute of Environmental Health Sciences for the National Toxicology Program.

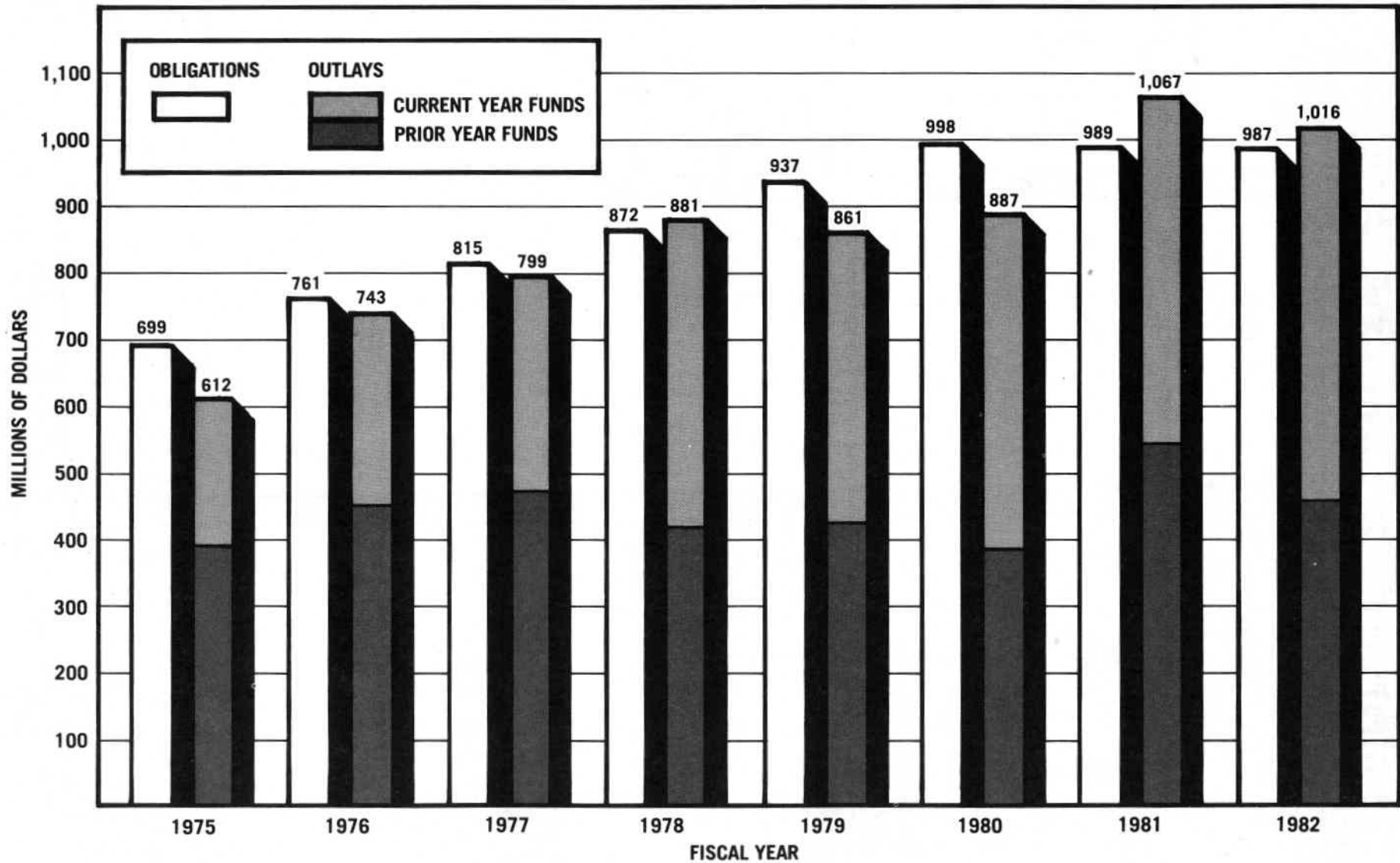
⁷ Appropriated under Continuing Resolution.

COMPARISON OF DOLLARS, POSITIONS AND SPACE

FISCAL YEAR	DOLLARS			POSITIONS			SPACE		
	OBLIGATIONS (\$000's)	PERCENT OF INCREASE OVER BASE YEAR	PERCENT OF INCREASE OVER PRIOR YEAR	ACTUAL FULL-TIME PERMANENT EMPLOYEES	PERCENT OF INCREASE OVER BASE YEAR	PERCENT OF INCREASE OVER PRIOR YEAR	ALLOCATED SPACE (SQUARE FEET)*	PERCENT OF INCREASE OVER BASE YEAR	PERCENT OF INCREASE OVER PRIOR YEAR
1971	232,855	Base Year	—	1426	Base Year	—	321,230	Base Year	—
1972	378,636	62.6	62.6	1665	16.8	16.8	329,587	2.6	2.6
1973	431,245	85.2	13.9	1736	21.7	4.3	357,972	11.4	8.6
1974	581,149	149.6	34.8	1805	26.6	4.0	381,436	18.7	6.6
1975	699,320	200.3	20.3	1849	29.7	2.4	382,485	19.1	0.2
1976	760,751	226.7	8.8	1955	37.1	5.7	387,324	20.6	1.3
1977	814,957	250.0	7.1	1986	39.3	1.6	428,285	33.3	10.6
1978	872,369	275.0	7.2	1969	38.1	-0.9	491,725	53.1	14.8
1979	936,696	302.3	7.4	1973	38.4	0.2	493,156	53.5	0.3
1980	998,047	328.6	6.5	1837	28.8	-6.7	467,730	45.6	-5.2
1981	989,338	324.9	-0.9	1815	27.3	-1.2	472,633	47.1	1.0
1982	986,564	323.7	-0.3	1703	19.4	-6.2	477,782	48.7	1.1

*Does not include field-station-assigned space or the Frederick Cancer Research Facility.

NATIONAL CANCER INSTITUTE OBLIGATIONS AND OUTLAYS



OBLIGATIONS: Orders placed, grants and contracts awarded, salaries earned and similar financial transactions which legally utilize or reserve an appropriation for expenditure.

OUTLAYS: Payments (cash or checks) made from current or prior year appropriations.

NCI TOTAL RESEARCH PROJECTS — 1977-1982¹

(DOLLARS IN THOUSANDS)

FISCAL YEAR

TYPE AWARD	REQUESTED		RECOMMENDED		AWARDED		PERCENT FUNDED ²
	NUMBER	AMOUNT	NUMBER	AMOUNT	NUMBER	AMOUNT	
1977							
Competing							
New	1,942	\$205,169	1,146	\$ 78,484	396	\$ 30,591	34.6
Renewal	657	102,681	525	58,264	247	33,823	47.0
Board Supplement	60	3,309	38	1,029	16	366	42.1
Subtotal	2,659	\$311,159	1,709	\$137,777	659	\$ 64,780	38.6
Noncompeting					1,474	159,692	
Total						\$224,472	
1978							
Competing							
New	1,936	\$197,460	1,310	\$ 89,506	522	\$ 41,386	39.8
Renewal	719	122,158	610	68,020	348	45,624	57.0
Board Supplement	50	5,388	31	3,545	24	3,302	77.4
Subtotal	2,705	\$325,006	1,951	\$161,071	894	\$ 90,312	45.8
Noncompeting					1,376	160,433	
Total						\$250,745	
1979							
Competing							
New	1,979	\$202,206	1,436	\$108,264	565	\$ 50,351	39.3
Renewal	613	121,689	556	78,166	314	56,651	56.5
Board Supplement	42	4,313	27	1,501	21	1,033	77.8
Subtotal	2,634	\$328,208	2,019	\$187,931	900	\$108,035	44.6
Noncompeting					1,493	177,097	
Total						\$285,132	
1980							
Competing							
New	1,913	\$219,207	1,403	\$117,167	461	\$ 45,303	32.9
Renewal	593	115,053	550	73,680	293	45,802	53.3
Board Supplement	43	2,619	38	1,492	29	1,261	76.3
Subtotal	2,549	\$336,879	1,991	\$192,339	783	\$ 92,366	39.3
Noncompeting					1,762	228,959	
Total						\$321,325	
1981							
Competing							
New	2,017	\$277,145	1,594	\$156,704	483	\$ 53,004	30.3
Renewal	687	131,355	653	91,034	311	48,122	47.6
Board Supplement	61	3,776	47	1,738	32	940	68.1
Subtotal	2,765	\$412,276	2,294	\$249,476	826	\$102,066	36.0
Noncompeting					1,802	253,389	
Total						\$355,455	
1982							
Competing							
New	2,187	\$308,153	1,784	\$189,245	434	\$ 47,224	24.3
Renewal	730	174,573	706	117,099	323	50,186	45.7
Board Supplement	28	2,266	24	1,289	4	86	16.7
Subtotal	2,945	\$484,992	2,514	\$307,633	761	\$ 97,496	30.3
Noncompeting					1,797	260,853	
Total						\$358,349	

¹ Includes RO1 traditional grants, PO1 program projects, R23 new investigator research awards, and CREG/RFA's.

² Percent Funded: Number Awarded ÷ Number Recommended.

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