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SUSAN R. MCKENZIE Analyst, Life Sciences Science Policy Research Division

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I. Introduction

Federal support of cancer research was a subject of considerable interest in the second session of the 91st Congress and has become an area of significant legislative activity in the first week of the 92nd. Congressional interest in this area has been generated by reports of increasingly promising leads in the field of cancer research (particularly in the areas of leukemia chemotherapy and cancer viruses) and has been stimulated by controversy over fluctuations in the FY 1969-1971 appropriations to the National Cancer Institute, a division of the National Institutes of Health.

Concern in the 91st Congress over Federal priorities regarding health legislation in general and cancer legislation in particular led to: a) the passage of two cancer resolutions (H. Con. Res. 675 and S. Res. 376) reflecting the sense of the Congress that the conquest of cancer should be among the Nation's top priorities and authorizing an extensive and now-published study on the present status of cancer research; b) enactment of a public law (PL 91-515) designed to improve education, training, and research activities conducted by the Regional Medical Programs in cancer and other specified major diseases; and c) an unprecedented increase of approximately \$50 million in FY 1971 appropriations to the National Cancer Institute. In addition, the status-of-cancer report issued in November by a panel of experts appointed pursuant to S. Res. 376 called for a major reorganization of the Federal cancer effort into what would amount to a goal-directed national research program to be conducted under the aegis of an independent National Cancer Authority. 1/

Although several cancer bills and resolutions (including legislation based on the recommendations of the cancer panel) remained pending in the 91st Congress, most of these proposals have already been re-introduced in the 92nd. These and other new proposals await further consideration. In addition, the Administration's awareness of public concern about the cancer problem was indicated by President Nixon in his 1971 State of the Union message when he announced that he would ask for an appropriation of an extra \$100 million "to launch an intensive campaign to find a cure for cancer."

The information in this paper has been assembled in order to expedite responses to the many Congressional inquiries regarding Federal support of cancer research. The material is basically factual in nature and the paper provides only a brief review of progress in the field of cancer research and a cursory analysis of the various proposals for increased Federal activity in this area.

The subject matter has been divided into six categories. Information on cancer morbidity and mortality and a brief summary of man's progress against cancer is presented in Section II. The work of the National Cancer Institute, other Federal agencies which may be tangentially concerned with cancer research, and private non-profit organizations such as the American Cancer Society is discussed in Section III. Legislation

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^{1/} National Panel of Consultants on the Conquest of Cancer. National Program for the Conquest of Cancer. Senate Report No. 91-1402. Committee on Labor and Public Welfare. December, 1970.

and legislative proposals in the 91st Congress are enumerated and discussed in Section IV. Proposals introduced in the first week of the 92nd Congress are listed in Section V. As the intention of the paper is to present merely an outline of developments in cancer research and the Federal role in support of these activities, the reader may also wish to consult the reports and documents listed in Sections VI and VII.

II. Impact of Cancer

Over 16% of all deaths in the United States are caused by cancer. Cancer ranks second on the list of the Nation's five greatest killers: 2/

Cause of Death	Deaths in 1969
Cardiovascular Disease	1,008,990
Cancer	323,330
Cerebrovascular Disease (Stroke)	206,030
Accidents	113,150
Influenza and Pneumonia	70.120

According to present rates of incidence, cancer will strike over 52 million of the Americans now living and will claim over 34 million of these lives. The American Cancer Society reports that in 1971 alone, approximately 975,000 Americans will require medical care for this disease. 3/

Deaths from cancer have risen as follows over the past twelve years: 4/

Year	Deaths
60	267,627
61	273,502
62	278,562
63	285,362
64	289,577
65	296,588
66	303,736
67	310,983
68	317,000
69	323,000
70	329,000
71 est.	335,000

2/ Figures provided by the National Health and Lung Institute from the <u>Monthly Vital Statistics Report</u>; Provisional Statistics; Annual Summary for the United States. 1969. Vol. 18, No. 13, October 21, 1970.

<u>3</u>/ American Cancer Society, Inc. <u>'71 Cancer Facts and Figures</u>. 1971, p. 3.
<u>4</u>/ Figures provided by the National Center for Health Statistics from Vital Statistics of the United States.

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Although improved methods of detection and treatment have helped to stem the number of annual deaths from cancer, the rate of increase in these deaths is rising more rapidly than is the rate of increase in the size of the population. This upward trend may be partially accounted for by the increase in life expectancy and old age cancer -- ie. the longer one lives, the greater the likelihood that a malignancy may develop. When the annual number of cancer deaths is adjusted for this factor (age), the increases are not so striking. The American Cancer Society reports that the number of cancer deaths per population unit (ageadjusted) was 112 in 1930; 120 in 1940; 125 in 1950; and 129 in 1967. <u>5</u>/

The fact that an upward trend still remains can best be explained by the increase in deaths from lung cancer -- particularly among men. While cancer deaths in women have dropped 13% since 1936 (due mainly to wider use of the Pap test which allows early detection of cervical cancer), cancer deaths in men have risen 40% in the same period of time. <u>6</u>/ Mortality from lung cancer in males has increased more than 15 times in the past 40 years. Cigarette smoking is the major cause of lung cancer (making it a largely preventable disease) and the National Panel of Consultants on the Conquest of Cancer reports that cessation of smoking among the American people would eliminate an estimated 15% of all cancer deaths. <u>7</u>/

5/ American Cancer Society, Inc. op cit. p. 3. It is assumed that these figures are based on population units of 100,000.

6/ Ibid. p. 13.

 $\frac{7}{p}$ National Panel of Consultants on the Conquest of Cancer. op cit. p. 39 & 2.

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Age-adjusted death rates for most other types of cancer (except cancer of the ovary, cancer of the pancreas, and leukemia) appear to be levelling off. _8/

Leading cancer sites among Americans are skin cancer (with a predicted 115,000 new cases in 1971), cancer of the colon and rectum (75,000), cancer of the lung (71,000), and cancer of the breast (70,000). <u>9</u>/ Cure rates vary for different types of cancer and generally depend on whether the malignancy can be diagnosed and treated while it is still localized. Cure rates range from the very high (over 95% of those diagnosed with skin cancer are cured) to the very low (less than 10% of those diagnosed with lung cancer will survive).

Definite progress has been made in raising the overall cure rate for all types of cancer. In 1930, 1 in 5 cancer patients survived. Today, the cure rate is 1 in 3. According to the American Cancer Society, however, the cure rate could be brought to 1 in 2 with earlier and better use of the diagnostic methods and treatments already available. Over 106,000 cancer patients will probably die in 1971 who might have been saved by earlier and better treatment. <u>10</u>/

Information on the economic impact of cancer is incomplete. The Panel of Consultants on the Conquest of Cancer reports that an estimated \$1.5 billion was spent on medical care for cancer in 1969 and that

- 8/ American Cancer Society, Inc. op cit. p. 3.
- 9/ Ibid. p. 19.
- 10/ Ibid. p. 4.

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indirect costs of cancer -- such as those derived from loss of earnings and the like -- bring the figure to over \$15 billion for that year. 11/

A summary of man's progress against cancer over the past 35 years is presented in the following table from the American Cancer Society:

CATEGORY	1937	1971
Saved (alive fi ve years after treatment)	Fewer than one-in-five	One-in-three
Uterine cancer	Chief cause of concer death in women	Death rate cut more than 50%. Could be reduced much more.
Lung cancer	Mounting: no prospect of control	Still mounting: but upward of 75% could be prevented
Research support	Less than \$1,000,000	Approximately \$250,000,000
Cancer programs approved by American College of Surgeons	240 in U.S.A, and Canada	882 plus expansion of teaching, research, treatment conters
State control measures	Seven states	All 50 states
Chemotherapy	Almost no research	Major research attack has produced more than 25 useful drugs

Man's Progress Against Cancer 12/

11/ National Panel of Consultants on the Conquest of Cancer. op cit. p. 37.

12/ American Cancer Society, Inc. op cit. p. 2.

III. Support of Research

A. National Cancer Institute

Primary responsiblity for Federal support of cancer research lies with the National Cancer Institute (NCI), one of the ten National Institutes of Health (NIH) within the Department of Health, Education, and Welfare. While other Federal agencies such as the Atomic Energy Commission and the Veterans' Administration also conduct cancer research in conjunction with their own work, NCI underwrites the bulk of Federal expenditures in this area.

NCI was the first of the ten Institutes to be organized -- having been established by PL 75-244 in August, 1937. Since its origin, the Institute's appropriations have risen almost six hundred fold -- from \$400,000 in 1938 to approximately \$230,000,000 today. Funds appropriated to the Institute enable it to pursue its basic mission; support of research and training directed toward preventing, diagnosing treating and controlling cancer in man. In support of these objectives, NCI conducts in-house research within its own laboratory and clinical facilities; offers grants to individuals, universities, hospitals and other public or private non-profit organizations for lab and clinical studies; and initiates contracts with various commercial concerns for basic and applied research.

Overseeing the activities of the National Cancer Institute is a 15 member (12 official, 3 ex-officio) National Cancer Advisory Council. Created along with NCI by the 1937 National Cancer Institute Act, the Council makes general policy and program recommendations and reviews

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and recommends action on applications for research and training grants. It serves as a general advisor to the director of NIH regarding NCI's programs and policies.

Appropriations to the National Cancer Institute have consistently exceeded those to the other NIH research Institutes. Having risen fairly steadily since 1940, the Institute's appropriations rose sharply in the mid-fifties and began to level off in the mid-sixties. In FY 1969, the Labor-HEW appropriations bill carried an increase of \$2 million (1%) for NCI over FY 1968. In FY 1970, appropriations were increased ostensibly by \$5 million; but the final appropriations bill contained a provision which limited actual expenditures to 98% of this amount. As a result, actual appropriations to NCI fell below the FY 1969 level. The added impact of inflation on the purchasing power of the dollar -- particularly in the fields of health care and biomedical research --- further reduced the effective amount available to the Institute.

In response to questions of priorities -- raised primarily by those directly involved in cancer research -- the Congress increased the FY 1971 appropriations by approximately \$50 million over the adjusted FY 1970 level. Most of this increase was designated for support of research efforts aimed at attempting to isolate and identify possible cancer viruses -- an area which appears to show special promise for finding the causes of some types of cancer. 13/

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^{13/} Although no cancer-producing viruses have been isolated from man, almost 100 such viruses have been shown to produce cancer in other animal species. It is considered very likely that at least some types of cancer may be similarly produced in humans.

Administration estimates for FY 1972 include \$232,234,000 for the National Cancer Institute and an additional \$100,000,000 for cancer research initiatives. This latter sum would be allocated to the National Institutes of Health for distribution to pertinent institutes and agencies for cancer research.

Appropriations to NCI for 1961-1972 and the numbers and amounts of grants (usually for basic research) and contracts (usually for applied research) awarded through NCI for 1962-1970 are provided on pages 11 and 12, respectively.

<u>FY</u>	Budget Estimate to Congress: NCL	House <u>Allowance</u>	Senate <u>Allowance</u>	NCI Appropriations	Total NIH Appropriations	NCI as percent of Total NIH 15/
61	\$ 88,869,000	\$102,469,000	\$126,375,000	\$111,000,000	\$577,161,000	19
62	117,167,000	125,672,000	160,000,000	142,836,000	736,585,000	19 .
63	139,109,000	150,409,000	158,409,000	155,742,000	930,800,000	17
64	145,114,000	144,340,000	145,114,000	143,194,000	974,454,000	15
65	139,714,000	138,970,000	148,970,000	148,970,000	1,058,992,000	14
66	153,968,000	157,618,000	163,768,000	163,768,000	1,244,406,000	13
67	163,957,000	170,656,000	175,656,000	175,656,000	1,412,983,000	12
68	183,356,000	183,356,000	192,356,000	183,356,000	1,178,924,000	16
69	187,707,000	182,592,000	191,592,000	185,149,000	1,394,053,000	13
70	180,725,000	180,725,000	200,000,000	190,362,500 <u>16</u> /	1,509,727,000 <u>16</u>	/ 13
71	202,383,000	227,383,000	235,383,000	230,383,000	1,688,799,000	14

Federal Support of Cancer Research National Cancer Institute Appropriations: 1961-1972

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72 232,234,000 17/

14/ Figures in the above chart are taken or calculated from the following sources: Labor-HEW Hearings Before the Senate Committee on Appropriations (FY 1971, Part 5); NIH Almanac for 1970; Congressional Record, December 30, 1970, S 21510-21518; President's Budget for FY 1972.

15/ The number of Institutes within NIH has increased from 7 in 1961 to 8 in 1964 to 9 in 1966 to 10 in 1967.

- 16/ The FY 1970 Appropriations Bill contained a provision which limited actual expenditures to 98% of the appropriated funds and specified that no program's funds could be reduced by more than 15%. This provision effectively reduced the NCI appropriations to \$181,332,000 and the total NIH appropriations to \$1,421,622,000.
- 17/ The FY 1972 Administration Budget requests an additional \$100,000,000 for cancer research. The sum would be allocated to NIH for distribution to pertinent Institutes and agencies for this purpose. See p. 309 of the FY 1972 Budget.

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		RESEARCH GRAN	IS AWARDED	<u>19</u> / NIH	1		S EXECUTE	D 20/ NIII
<u>FY</u>	Number	<u>NCI</u> <u>Amount</u>	Number	<u>Amount</u>	<u>Number</u>	<u>NCI</u> <u>Amount</u>	Number	Amount
62	1,914	\$47,501,000	14,975	\$372,099,000	107	\$24,300,000	157	\$27,000,000
63	1,702	54,530,000	15 , 233	430,908,000	266	26,300,000	387	36,000,000
64	1,650	_ 55,735,000	15,242	497,924,000	316	30,300,000	488	40,200,000
65	1,514	56,531.,000	15,183	538,763,000	267	37,600,000	405	46,400,000
66	1,482	64,327,000	15,153	600,973,000	250	33,100,000	523	51,100,000
67	1,481	71,018,000	13,937	593,313,000	294	40,000,000	707	83,800,000
68	1,335	71,599,000	13,120	626,018,000	364	41,200,000	1085	97,400,000
69	1,228	73,003,000	12,435	627,581,000	367	41,400,000	1199	102,300,000
70	1,182	71,371,000	11,339	602,153,000	566	43,500,000	2106	105,300,000

Research Grants and Contracts Awarded Through NCI and NIH: 1962-1970 18/

18/ Figures for 1962-1969 are taken from the 1970 NIH Almanac; figures for 1970, were obtained from the information office at NIH.

Figures for dollar amounts of research grants are rounded off to the nearest thousand. $\frac{19}{20}$

Figures for dollar amounts of contracts are rounded off to the nearest hundred thousand.

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B. Other Organizations and Agencies

<u>Federal</u>. Although the National Cancer Institute provides the major Federal support of cancer research, some research is conducted by other agencies -- notably the Veterans' Administration and the Atomic Energy Commission -- who generally collaborate with NCI. In addition, the Regional Medical Programs, a division of HEW's Health Services and Mental Health Administration, provide some support of cancer research in conjunction with their activities. Since their basic mission is to improve the quality and delivery of the Nation's health care system, however, their work generally involves organization of regional education, training and demonstration projects rather than support of basic research.

In October, 1970, the enactment of PL 91-515 ("The Heart Disease, Cancer, Stroke and Kidney Disease Amendments of 1970") revised and expanded the scope of the Regional Medical Programs by extending for three years certain authorities granted under the Public Health Service Act. Included among the provisions of this legislation was authority

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to initiate contracts and to seek an additional three years' funding. The Programs' ability to collaborate at regional levels on research, training and educational programs in cancer and other major and related diseases was thus extended.

It should be noted that the Federal government does not have programs specifically designed to provide or pay for care of private cancer patients (other than those eligible for appropriate benefits from the Veterans' or Social Security Administrations). While some cancer patients may receive care through contact with the Regional Medical Programs projects, it is not presently feasible for the government to underwrite expenses for the care of all patients with cancer or other chronic diseases.

<u>Non-Federal.</u> The largest private organization supporting cancer research is the American Cancer Society, Inc.,with headquarters at 219 E. 42nd St., New York, New York 10017. A voluntary organization of over two million Americans, it provided an approximate \$24 million in support of cancer research in 1969-70. <u>21</u>/ The organization's financial support is derived primarily from the Cancer Crusade and secondarily from bequests and legacies. In addition to supporting research, the American Cancer Society also provides funds for education and community services.

21/ American Cancer Society, Inc. op cit. p. 29.

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A number of smaller organizations also supply funds for cancer research. Contributions from these groups -- such as the Damon Runyon Cancer Research Fund -- totalled an estimated \$5 million in 1969. <u>22</u>/ Numerous state and local programs also provide needed support.

22/ National Panel of Consultants on the Conquest of Cancer. op cit. p. 37.

IV. Legislation and Legislative Proposals: 91st Congress

Although no major cancer legislation was enacted in the 91st Congress, the passage of two resolutions set the stage for consideration of major legislation in the 92nd. H. Con. Res 675, passed unanimously on September 30, 1970, called for a national crusade for the conquest of cancer to be accomplished by 1976 (as an appropriate commemoration of the Nation's 200th anniversary). S. Res. 376 gained greater visibility for such a crusade by providing for a major cancer study which suggested one means by which such a commitment might be undertaken. Passed in April 1970, the resolution authorized the Senate Committee on Labor and Public Welfare, with the assistance of an advisory committee, to report to the Senate on the present status of cancer research and on the feasibility of coordinating and increasing Federal efforts to find a cure for cancer at the earliest possible time. Pursuant to that resolution, a panel of 26 consultants was designated to study the problem. On November 25, 1970, the Panel submitted an extensive report of its findings to the Senate Committee. 23/

Included in the Panel report is a proposal calling for the formation of a National Cancer Authority -- an independent goaloriented agency whose mission would be defined as the conquest of cancer at the earliest possible date. The proposal of such an agency -modeled after successful mission-oriented agencies such as the National Aeronautics and Space Administration and the Atomic Energy Commission --

23/ National Panel of Consultants on the Conquest of Cancer. op cit.

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reflects the Panel's feeling that "the progress that has been made in the past decade provides a strong basis for the belief that an accelerated and intensified assault on cancer at this time will produce extraordinary rewards." <u>24</u>/ Such an agency, the Panel concluded, would best be able to devise a coordinated and integrated national plan to capitalize on emerging research opportunities. The conquest of cancer would become a national goal in somewhat the same way that the moon landing became a national goal in 1961.

The recommendations of the Panel, if followed, would transfer the present functions of the National Cancer Institute from the National Institutes of Health to an independent National Cancer Authority. The Panel also recommends appropriations of \$400 million for the Authority for FY 1972 -- increasing to a level of \$1 billion in FY 1976. In addition, the report favors the formation of a National Cancer Advisory Board to advise and assist the National Cancer Authority. The Board would supercede the present National Cancer Advisory Council. The report concludes: "The [Panel] is unanimously of the view that an effective national program for the conquest of cancer should be promptly initiated and relentlessly pursued." 25/

Several additional proposals (including legislation based on the above recommendations) remained pending in the 91st Congress. While these bills and resolutions differed in a number of important aspects, they all appeared to have one common feature -- a proposed

- 24/ Ibid. p. 8.
- 25/ Ibid.

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increase in Federal participation in and support of the cancer research effort. The proposals took two basic approaches (and these same two approaches are reflected in most of the legislation introduced to date in the 92nd Congress): a) increasing appropriations for cancer research (presumably through the present National Cancer Institute); or b) establishing and funding the independent, mission-oriented agency proposed by the Panel of Consultants.

While it is not the intention of this paper to analyze or compare the various legislative proposals in this area, it is appropriate to make a few remarks regarding the possible implementation of these alternatives.

Those who favor the plan for an independent agency believe that preparation and implementation of a coordinated and systematic attack on the cancer problem would best enable us to capitalize on promising research leads and to produce more rapid and significant results. They also feel that funding of the magnitude needed for such an endeavor could not be effectively absorbed or utilized within the present organizational structure of the National Cancer Institute. Appropriations of the magnitude of \$1 billion, for example, would make NCI's funding level almost 50-60 times the present level of any of the other NIH research Institutes. In addition, the straight-line organization envisioned for the independent agency would also allow for more rapid dissemination of research results to those working in the field. The conquest of cancer is, they conclude, a realistic goal -- the attainment

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of which is now limited by lack of funds and lack of a coherent and targeted research plan. The organization of a National Cancer Authority would provide the opportunity to realize this goal and would give the cancer effort the sense of urgency needed to accomplish the task.

The main issue raised by this type of proposal involves the ongoing questions regarding the value of basic vs. applied ("goal-oriented") research. There is a feeling among many scientists that targeted research programs tend to stifle the "inspired idea" -- ie. research directed toward a pre-determined end or ends does not always allow for the type of accidental or creative idea which is frequently the basis for great discoveries in science. A mission-oriented agency with an emphasis on contracted work would, by definition, favor applied over basic research.

Along the same line, some authorities question whether the parallel being drawn between going to the moon and conquering cancer is valid. In the case of the moon shot, they point out, we had the technological capability necessary for the achievement of our goal. The problem was basically one of application of existing technology. In the case of cancer, we are less sure of such technological capability. Although there are several promising new leads in the field of cancer research, cancer is many diseases. Even if we were to find a cure for one type there is no guarantee that the findings would be applicable to any or all other types. The outcome of any biomedical research effort is, at best, unpredictable; and whether we have the scientific and technological capability to carry out a successful crash program to eradicate cancer is a question which remains to be answered.

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One other point raised with regard to such a proposal involves singling out cancer for this type of massive research program. While there seems to be some consensus regarding the probability of finding a cure for cancer and definite agreement regarding the desirability of eliminating the Nation's second greatest killer, it should be noted that the approach taken to solving the cancer problem will have a direct impact on funds and manpower aimed at controlling the other chronic deseases (such as cardiovascular disease -- the Nation's number one killer).

Most of the cancer proposals in the 91st Congress provided for an increase in appropriations for cancer research. The amounts which were proposed varied. The decision revolves around what amount or amounts can be utilized most effectively -- whether by the present National Cancer Institute or by an independent National Cancer Authority. There is no way to guarantee a direct correlation between the amount of money spent and the success of the research effort whether it be goal oriented or not. Increasing appropriations beyond the point where they can be utilized effectively may merely have the result of supporting a number of second-rate research projects, the results of which may require first-rate research in order to clarify the misconceptions created by bad scientific data. To date, however, lack of sufficient funding appears to have been at least one of the major obstacles to progress in cancer research. The nature of the legislation now before the 92nd Congress makes it appear likely that adequate funds will no longer be a limiting factor.

Summaries of the cancer bills and resolutions introduced in the . 91st Congress are provided on pages 21-25.

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BILL	DATE INTRODUCED	SPONSOR	SUBJECT	ACTION
H.R. 14284	10/9/69	Staggers (D.,W.Va.)	To support research and training in fields of heart disease, cancer, stroke and related diseases.	Referred to Committee on Interstate and Foreign Commerce
H.R. 15123	12/8/69	O'Neill (D.,Mass.)	Cancer Research Fund Act: To impose additional excise taxes on cigarettes in order to provide funds for cancer research.	Referred to Committee on Ways and Means
H.R. 15135	12/8/69	Cramer (R.,Fla.)	Same as digest of H.R. 14284	Referred to Committee I on Interstate and P Foreign Commerce
S. 3355	1/29/70	Yarborough (D.,Tex.) et al.	Heart Disease, Cancer, Stroke and Kidney Disease Amends.: To amend PHS Act to improve education and training in these and other major diseases.	Reported in Senate 8/11 S. Rept. 91-1090 Indefinitely postponed in Senate 9/9/70 H.R. 17570 passed in lieu
H.Con.Res. 526	3/4/70	Rooney (D.,N.Y.)	To express sense of Congress that conquest of cancer be a national crusade to be accomplished by 1976.	Referred to Committee on Judiciary
H.R. 16425	3/11/70	Madden (D.,Ind.)	Heart Disease, Cancer, Stroke and Kidney Disease Amends.: To amend PHS Act to improve education and training in these and other major diseases.	Referred to Committee on Interstate and Foreign Commerce

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BILL	DATE INTRODUCED	SPONSOR	SUBJECT	ACTION
S.Res. 376	3/25/70	Yarborough (D.,Tex.) et al	To authorize the Committee on Labor and Public Welfare to study research activities conducted to ascertain causes and develop cures to eliminate cancer.	Reported in Senate 4/15/7((no written report) Passed House 4/27/70 Reported in Senate 4/23/70 S. Rept. 91-792 Passed in Senate 4/27/70
H.Res. 906	4/9/70	Gallagher (D.,N.J.) et al	To call for a national commitment to cure and control cancer within this decade and to authorize annual approps. of no less than \$650,000,000 during that period.	Referred to Committee on Interstate and Foreign Commerce
H.Res. 907	4/9/70	Gallagher (D.,N.J.) et al	Same as digest of H.Res. 906	Referred to Committee ; on Interstate and Foreign Commerce
H.res. 918	4/15/70	Minshall (R.,Ohio)	To provide an annual appropriation of no less than \$1,000,000,000 for cancer research over the next decade.	Referred to Committee on Interstate and Foreign Commerce
H.R. 17570	5/11/70	Jarman (R.,Okla.)	Heart Disease, Cancer, Stroke and Kidney Disease Amends.: To amend PHS Act to extend and improve education and research in these and other related diseases.	Reported in House 7/13/70 H.Rept. 91-1297 Considered in House 8/12 Passed House 8/12 Considered in Senate 9/9 Passed Sen:(amend) 9/9 House agreed to Conf. Rept. 10/13 H. Rept. 91-1590 Senate agreed to Conf. Rept. 10/14 PL 91-515 10/30

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BILL	DATE INTRODUCED	SPONSOR	SUBJECT	ACTION
H.Res. 999	5/11/70	Murphy (D.,N.Y.)	Same as digest of H.Res. 906	Referred to Committee on Interstate and Foreign Commerce
H.R. 17670	5/18/70	Kuykendall (R.,Tenn.)	Same as digest of H.R. 16425	Referred to Committee on Interstate and Foreign Commerce
H.R. 17932	6/4/70	Hechler (D.,W.Va.)	Same as digest of H.R. 16425	Referred to Committee on Interstate and Foreign Commerce
H.Res. 1086	6/16/70	Gallagher (D.,N.J.) et al	Same as digest of H.Res. 906	Referred to Committee on Interstate and Foreign Commerce
H.Res. 1087	6/16/70	Gallagher (D., N.J.) et al	Same as digest of H.Res. 906	Referred to Committee on Interstate and Foreign Commerce
H.Res. 1088	6/16/70	Gallagher (D.,N.J.) et al	Same as digest of H.Res. 906	Referred to Commi t tee on Interstate and Foreign Commerce
H.Res. 1089	6/16/70	Gallagher (D.,N.J.) et al	Same as digest of H.Res. 906	Referred to Committee on Interstate and Foreign Commerce
H.R. 18164	6/22/70	Springer (R.II1.)	Same as digest of H.R. 16425	Referred to Committee on Interstate and Foreign Commerce
H.Res. 1124	6/30/70	Patten (D.,N.J.)	Same as digest of H.Res. 906	Referred to Committee on Interstate and Foreign Commerce

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BILL	DATE INTRODUCED	SPONSOR	SUBJECT	ACTION
H.Con.Res. 675	7/8/70	Rooney (D.,N.J.)	To express sense of Congress that conquest of cancer be a national crusade to be accomplished by 1976.	Discharged in House 7/15 Considered in House 7/15 Passed House 7/15/70 Reported in Senate 8/26 (no written report) Considered in Senate 8/28 Passed Senate (amend.)8/28 House agreed to amend.9/30
H.R. 18404	7/9/70	Whalley (R.,Pa.)	Same as digest of H.R. 16425	Referred to Committee on Interstate and Foreign Commerce
H.Res. 1201	9/9/70	Murphy (D.,N.Y.)	To provide an annual approp. of no less than \$100,000,000 over the next decade for the Vincent Thomas Lombardi national cancer research program.	Referred to Committee 1 on Interstate and 2 Foreign Commerce 1
H.Res. 1214	9/17/70	Murphy (D.,N.Y.) et al	Same as digest of H.Res. 1201	Referred to Committee on Interstate and Foreign Commerce
H.Res. 1232	9/30/70	Murphy (D.,N.Y.) & Freidel (D.,Md.)	Same as digest of H.Res. 1201	Referred to Committee on Interstate and Foreign Commerce
S. 4564	12/4/70	Yarborough (D.,Tex.)	Conquest of Cancer Act: To establish a National Cancer Authority in order to conquer cancer at the earliest possible time.	Referred to Committee on Labor and Public Welfare

BILL	DATE <u>INTRODUCED</u>	SPONSOR	SUBJECT	ACTION
H.R. 19918	12/7/70	Pepper (D.,Fla.)	Same as digest of S. 4564 •	Referred to Committee on Interstate and Foreign Commerce
H.R. 19924	12/8/70	Murphy (D.,N.Y.)	To establish Vincent Thomas Lombardi National Cancer Authority in order to conquer cancer at the earliest possible date.	Referred to Committee on Interstate and Foreign Commerce
H.R. 19966	12/16/70	Staggers (D.,W.Va.)	To establish a National Cancer Authority and to authorize international programs and joint ventures in order to conquer cancer at the earliest possible date.	Referred to Committee on Interstate and Foreign Commerce
H.R. 19978	12/18/70	Reid (R.,N.Y.)	Same as digest of H.R. 19918	Referred to Committee on Interstate and Foreign Commerce
H.R. 20007	12/22/70	Minish (D.,N.J.)	Same as digest of H.R. 19918	Referred to Committee on Interstate and Foreign Commerce

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V. Legislative Proposals: 92nd Congress

Many of the proposals now awaiting action in the 92nd Congress ` are similar to those left pending in the 91st (discussed in Section IV). Most propose the establishment of a National Cancer Authority and/or increased funding for cancer research efforts. In addition, President Nixon asked for increased funding and alluded to the conquest of cancer as a national goal in his January State of the Union message:

I will also ask appropriation of an extra \$100 million to launch an intensive campaign to find a cure for cancer, and I will ask later for whatever additional funds can effectively be used. The time has come when the same kind of concentrated effort that split the atom and took man to the moon should be turned toward conquering this dread disease. Let us make a total national commitment to achieve this goal. 26/

A summary of the bills and resolutions introduced in the first week of the 92nd Congress is presented on the following three pages.

26/ As quoted from the Washington Post, January 22, 1971.

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Cancer Bills In The 92nd Congress: Through January 29, 1971

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BILL	DATE INTRODUCED	SPONSOR	SUB JECT	ACTION
H.R. 235	1/22/71	Minish (D.,N.J.)	To establish a National Cancer Authority in order to conquer cancer at the earliest possible date.	Referred to Committee on Interstate and Foreign Commerce
H.R. 271	1/22/71	Murphy (D.,N.Y.)	To establish a Vincent Thomas Lombardi National Cancer Authority in order to conquer cancer at the earliest possible date.	Referred to Committee on Interstate and Foreign Commerce
H.R. 982	1/25/71	Peyser (R.,N.Y.)	Same as digest of H.R. 235	Referred to Committee on Interstate and Foreign Commerce
H.R. 1496	1/25/71	Price (R., Tex.)	To establish a National Cancer Authority and to authorize international programs and joint ventures in order to conquer cancer at the earliest possible date.	Referred to Committee on Interstate and Foreign Commerce
H.R. 1502	1/25/71	Randall (D., Mo.)	To establish the Federal Cancer Research Coordination Committee to coordinate and otherwise improve federally assisted cancer research activities.	Referred to Committee on Interstate and Foreign Commerce
H.Con.Res. 2	1/25/71	Rooney (D.,N.Y.)	To express the sense of Congr with respect to the conquest of cancer as a national crusade	ess Referred to Committee on Interstate and Foreign Commerce

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Cancer Bills In The 92nd Congress: Through January 29, 1971

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BILL	DATE INTRODUCED	SPONSOR	SUBJECT	ACTION	
H.Con.Res. 25	1/25/71	Gallagher (D.,N.J.) et al	To call for a national commitment to control and cure cancer within this decade.	Referred to Committee on Interstate and Foreign Commerce	÷.,
H.Con.Res. 26 - H.Con.Res. 30	1/25/71	Gallagher (D.,N.J.) et al	Same as digest of H.Con. Res. 25	All Referred to Committee on Interstate and Foreign Commerce	
H. Res. 92	1/25/71	Howard (D.,N.J.)	Same as digest of H.Con. Res. 25	Referred to Committee on Interstate and Foreign Commerce	,
H.Res. 103	1/25/71	Minshall (R.,Ohio)	To provide an annual appropriation for cancer research.	Referred to Committee on Interstate and Foreign Commerce	- 28 -
H.Res. 112	1/25/71	Murphy (D., N.Y.)	Same as digest of H.Con. Res. 25	Referred to Committee on Interstate and Foreign Commerce	
H.R. 2165	1/25/71	Kee (D., W.Va.)	Same as digest of H.R. 235	Referred to Committee on Interstate and Foreign Commerce	
H.R. 2222	1/25/71	Reigle (R., Mich.) et al	Same as digest of H.R. 235	Referred to Committee on Interstate and Foreign Commerce	
H.R. 2298	1/26/71	Hamilton (D., Ind.)	Same as digest of H.R. 235	Referred to Cormittee on Interstate and Foreign Commerce	

Cancer	Bills	In	The	<u>92nd</u>	Congress:	<u>Through</u>	January 29.	<u>1971</u>
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BILL	DATE INTRODUCED	SPONSOR	SUBJECT	ACTION	
S. 34	1/26/71	Kennedy (D.,Mass.) & Javits (R.,N.Y.)	Same as digest of H.R. 235	Referred to Committee on Labor and Public Welfare	
H.R. 2515	1/29/71	O'Hara (D.,Mich)	Same as digest of H.R. 1496	Referred to Committee on Interstate and Foreign Commerce	
H.R. 2603	1/29/71	Morgan (D., Pa.)	Same as digest of H.R. 1496	Referred to Committee on Interstate and Foreign Commerce	
H.R. 2648	1/29/71	Yates (D.,Ill.)	Same as digest of H.R. 1496	Referred to Committee on Interstate and Foreign Commerce	- 29

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VI. Recent Government Reports on Cancer Research

Two of the many recent Federal publications on cancer and cancer research are discussed below. These documents provide detailed information on the present status of cancer research.

A. <u>Progress Against Cancer: 1970</u>. A Report by the National Advisory Cancer Council; U.S. Department of Health, Education, and Welfare; 98 pp. For sale by the Superintendent of Documents; U.S. Government Printing Office; Washington, D.C. 20402. Price \$1.75.

Part I of this report discusses general progress against cancer with emphasis on recent outstanding research developments. Part II provides an in-depth discussion of research on chemical carcinogenesis -the production of cancer by chemicals. The report also provides a selected reading list and a list of the publications of the National Cancer Institute.

B. <u>National Program For The Conquest Of Cancer</u>. A Report of the National Panel Of Consultants on the Conquest of Cancer. Senate Report No. 91-1402; December 4, 1970; 150 pp. Available from the Senate Committee on Labor and Public Welfare.

The authorization for the report and a general discussion of its findings and recommendations are discussed in Section IV of this paper. The report is divided into two parts. Part I sets forth the Panel's findings and recommendations and deliniates the "means and measures necessary to facilitate success in the treatment, cure and elimination of cancer -at the earliest possible date." Part II provides extensive information on the status of current work in the field of cancer research and outlines areas which appear to show special promise for further study.

VII. Selected References To Sources of Detailed Information on Cancer

<u>Topic</u>

<u>Sources</u>

- A. Cancer Statistics
- B. National Cancer Institute

C. Status of Current Research and Areas Of Special Promise

D. Federal Expenditures for Cancer Research

- <u>171 Cancer Facts and Figures</u>. American Cancer Society, Inc. Hdqtrs: 219 E. 42nd St., New York, New York 10017 D.C. Branch: 1825 Constitution Ave., Washington, D.C. 20009.
- FY 1971 (or most recent) Labor-HEW Appropriations Hearings:

 a. Departments of Labor and Health, Education, and Welfare Appropriations for 1971: Hearings Before a Subcommittee on Appropriations; House of Representatives; 91-2; FY 1971; Part 3; pp. 175-309.
 - b. Senate Hearings Before the Committee on Appropriations: Departments of Labor and Health, Education, and Welfare Appropriations; 91-2; FY 1971; Part 5; pp. 2737-2807.
- 2. <u>Progress Against Cancer: 1970</u>. See Section VI of paper for reference.
- 3. <u>National Program For The Conquest of Cancer</u>. See Section VI of paper for reference.

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- 1. <u>National Program For The Conquest of Cancer</u>. See Section VI of paper for reference.
- 2. Most recent House and Senate Labor-HEW Appropriations Hearings (as above). See section in Hearings on special reports on research in various types of cancer.
- 3. Progress Against Cancer: 1970. (as above)
- 4. <u>171 Cancer Facts and Figures</u>. (as above)
- 1. Most recent Labor-HEW Appropriations Hearings in House and Senate (as above).
- 2. FY 1972 Federal Budget.
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