Working With NCI Divisions, Offices and Centers to Advance Cancer Research

Scientists at the Division of Cancer Prevention and the Center for Global Health collaborate to study cancers, nationally and internationally.

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According to recently released global cancer burden statistics, an estimated 18.1 million new cancer cases and 9.6 million deaths from cancer were expected in 2018. Cancer is a leading cause of morbidity and reduced life expectancy in almost all countries. International collaborations in cancer research allow US–based investigators to study cancers with significant morbidity and mortality globally; pursue scientific questions in cancer biology, etiology, prevention, and treatment that can be answered more expeditiously and efficiently by conducting studies in foreign countries; expand scientific understanding of the causation of cancer by studying unique presentations of cancers prevalent in some countries; learn from innovations in cost-effective cancer prevention, care, and treatment delivery approaches in these settings; and contribute to coordinated efforts for global cancer control. Underpinning these collaborations is the overarching purpose of advancing conduct of outstanding science and promoting training opportunities for researchers.

The Center for Global Health (CGH) works with colleagues across NCI divisions, offices, and centers (DOCs) to develop research and training programs that involve foreign populations. There are three ways in which CGH achieves this goal: providing scientific expertise in crafting the goals of the proposed research; providing expertise in regulatory processes include science administration and ethical issues that are central to conduct of global research; and by working the colleagues in contributing to the writing, review, and presentation of funding opportunity announcements to various internal and external committees of NCI.

An example of CGH collaboration with NCI DOCs is a recently announced funding opportunity announcement RFA-CA-18-018 led by the Division of Cancer Prevention (DCP) titled, “Prevention of HPV-related Cancers in HIV-infected individuals: United States-Latin American-Caribbean Clinical Trials Network: Partnership Centers (U54 Clinical Trial Required).” Program leaders in DCP conceptualized and developed this program idea in partnership with colleagues in CGH and the NCI Office of HIV/AIDS Malignancy (OHAM). Specifically, CGH staff provided inputs on the proposed

organizational structure of the program, critically reviewed concept drafts for scientific and programmatic content, advised on timelines, budgets, and funding mechanism considerations, and provided inputs and comments as this program concept was presented by DCP staff to NCI review committees — the internal Clinical and Translational Research Operations Committee (CTROC) and the Scientific Program Leaders (SPL) Committee, as well as the external NCI Board of Scientific Advisors (BSA). CGH also provided examples of similar global health programs administered by other NIH Institutes and Centers and international consortia as a reference to inform the development of program goals and objectives. Once awards are made, CGH will be able to facilitate communications with in-country U.S. embassies that might help advise on necessary regulatory approvals, as well as assist in other administrative and coordinating issues essential to research conduct, such as material transfer agreements.

CGH benefits from these internal collaborations as it helps us understand and contribute to scientific areas being prioritized by NCI divisions, offices, and centers, and allows us to make connections with program and administration staff so that future collaborations are facilitated. We look forward to continuing to work with NCI DOCs to advance global cancer research.

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