THE CANCER LETTER

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US Sues St. Luc Hospital For Grant Funds, Expenses Of Data Reanalysis, Investigation

The US government last week filed a suit in a Quebec court seeking $518,000 from St. Luc Hospital of Montreal as compensation for the expenses incurred as a consequence of scientific misconduct committed by St. Luc surgeon Roger Poisson.

The suit, filed last week, demands that St. Luc reimburse the US about $68,000 for collection of data on patients improperly enrolled in

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In Brief

CTRC Opens New Building With Ceremony For Survivors; Wistar Wins NASA Grant

CANCER THERAPY & RESEARCH CENTER dedicated its Burton and Miriam Grossman Cancer Center on June 4 with a ceremony recognizing cancer survivors. Survivors cut a huge ribbon that draped the building, and 100 butterflies—symbolizing hope and renewal—were released. The 86,000-square-foot building contains outpatient services, including radiation therapy, chemotherapy, breast imaging, patient education, outpatient surgery, and the Nordan Colon Research Laboratory, a basic science facility. . . . **WISTAR INSTITUTE** received a $5.4 million grant from the National Aeronautics and Space Administration to research the effect of zero-gravity on mammalian and human cells. Wistar scientists will conduct the research in alliance with **Univ. of Pennsylvania Medical Center** and **Univ. of Pennsylvania**. The four-year project is expected to provide more accurate analysis of how cells grow and develop in the human body. **Elliot Levine** will lead project. . . . **STOLEN PAPERS** showing the tobacco industry has long known of a link between smoking and cancer can be released, a judge said last week. **Univ. of California-San Francisco** received copies of the documents last summer in a package bearing the return address "Mr. Butts." Brown & Williamson, a Kentucky tobacco company, claimed the papers were stolen by a paralegal for its law firm, and demanded their return. San Francisco Superior Court Judge Stuart Pollack ruled that the university can release the documents, noting that most, if not all, of their contents appeared in the media and were the subject of Congressional hearings last year. According to reports, the material shows the tobacco industry knew of the dangers of smoking in the early 1960s and patented a critical step for making a safer cigarette, but later dropped that project. . . . **FRANK BAKER** was named the first director of the American Cancer Society's new Behavioral Research Unit. Under

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US Vs. St. Luc May Define Liability In Clinical Trials

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several protocols of the National Surgical Adjuvant Breast & Bowel Project.

On top of that, the government seeks $450,000 in costs of the investigations and the reanalysis of NSABP data conducted by NCI and other agencies following the start of the controversy.

The suit was filed May 30 on behalf of NCI in the Superior Court of Quebec. A spokesperson for St. Luc declined to comment on the litigation. The suit does not name Poisson as a defendant.

In interviews with **The Cancer Letter**, several observers described the case as highly unusual. To begin with, the cooperative agreement that supported research at St. Luc is a grant rather than a contract.

And when it comes to government grants, no case law exists in the US on recovering funds, observers said.

Thus, the US government is not only seeking to try a precedent-setting case, but it is doing so on foreign soil. Also, the extremely unusual decision by the government to litigate rather than to resolve the disagreement through diplomatic channels appears destined to make US vs. Hopital Saint-Luc a candidate for law school case studies.

Most importantly, the action may answer four questions that have caused great concern to clinical cancer researchers since the start of the NSABP controversy:

- What is the legal standing of a cooperative group?
- Is the institution that holds the headquarters grant liable for misconduct at member institutions?
- What is the liability of participating institutions for misconduct by Principal Investigators?
- Which of the parties should be liable for the costs of audits that may follow the finding of misconduct?

The suit alleges that St. Luc breached its agreement with NCI by failing to supervise Poisson's work.

Like most institutions involved in NCI-sponsored clinical trials, St. Luc received funding directly from the Institute. Between 1980 and 1991, the hospital received $1,032,957 for enrolling 1,511 patients in clinical trials in which Poisson acted as the PI.

Since scientific misconduct was found in cases involving 99 of those patients, the suit seeks 6.6 percent of the funds received by the hospital. That amounts to $68,175.

"In addition, because of the defendant's breach of its obligations..., plaintiff was required to conduct extensive investigations into the manner in which the hospital and Dr. Poisson carried out their activities... in order to determine the extent and methods of the misconduct," the suit said.

According to the suit, this undertaking resulted in further damages of $200,000 to the US government.

"In addition..., plaintiff was required to reanalyze the data which had been submitted to the NSABP in order to attempt to weed out, eliminate and minimize the damaging effect of the false or fabricated information," the suit said.

The US wants to recover another $250,000 for the reanalysis.

The plaintiff seeks to try the case under US laws, stating that "the documents setting out the rights and obligations of the parties were made in the [US] and are to be interpreted, governed and construed according to [US] laws."

Question Of Liability

According to documents obtained by **The Cancer Letter**, the question of liability has been lurking in the background of the NSABP controversy even before it was made public in March, 1994.

NCI first notified St. Luc officials of its intentions to recover the funds in a letter dated Feb. 3, 1994.

"Clearly, NCI is entitled to recover the amount of federal funds that supported Dr. Poisson's improper activities, as well as the amount of funds that supported research rendered useless by those improper activities," NCI's chief grants management officer

THE CANCER LETTER

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Leo Buscher wrote in a letter to Jean Leblanc, chief executive at St. Luc.

Buscher's letter stated that the government intended to claim compensation under the US Program Fraud Civil Remedies Act and the False Claims Act.

A week later, on Feb. 10, Buscher sent a similarly worded letter to the Univ. of Pittsburgh, the institution that houses the NSABP headquarters, requesting an accounting of Pitt's support for Poisson's research.

"As the awardee organization, the Univ. of Pittsburgh is legally and financially accountable for the awarded funds and for the performance of the activities supported under the... cooperative agreement," Buscher wrote to Michael Crouch, *director of Pitt's office of research.*

Both St. Luc and Pitt responded with outrage.

● "It has been well established... that [St. Luc] did not participate in any wrongful act, nor did it have knowledge of the events described in the above report," Leblanc wrote to NCI's Buscher on March 10. "In fact, [St. Luc] was an active participant in the inquiries and investigations... Please be advised that any attempt to recover funds from Hopital Saint-Luc will be vigorously contested in any court having jurisdiction."

● "We point out that it was the vigilance of Drs. [Bernard] Fisher [then chairman of NSABP], [Carol] Redmond [then the group's chief biostatistician] and Pitt colleagues that was responsible for the detection of the suspicious nature of the patient data being sourced by St. Luc's, and for reporting it to NCI," Pitt's Crouch wrote to Buscher in a letter dated March 3. "Clearly, the Univ. of Pittsburgh has not been a wrongdoer or even a silent bystander in this situation, *but an innocent and vigorous leader in uncovering* scientific misconduct."

Crouch's letter also stated that Pitt's payments to St. Luc amounted to $35,363.

Letter To Justice

The machinery for recovery of funds was set in motion on March 18, 1994, five days after The Chicago Tribune published a story about the potential implications of the misconduct finding in the Poisson case.

In a letter to the Dept. of Justice, Richard Riseberg, chief counsel of the Public Health Service, requested that Justice engage Canadian counsel "for legal action to recover the funds awarded by NCI to St. Luc Hospital for research conducted by Dr. Poisson."

A copy of the letter was obtained by **The Cancer Letter**.

"It is our understanding that an action could be brought under Quebec law against St. Luc and Dr. Poisson for breach of the cooperative agreement made with NCI," Riseberg wrote in a letter to David Epstein, director of foreign litigation of the commercial litigation branch at Justice.

"Damages would include single direct damages of the amount awarded under the cooperative agreement, and consequential damages such as the cost of the [HHS Office of Research Integrity] investigation and the cost of reanalyzing and republishing the data.

"It is also possible that action could be brought in Canada under the US False Claims Act for claims for payment made by St. Luc to the NCI based on falsified data.

"We also request that, in the event that NCI is unable to administratively recover funds from the Univ. of Pittsburgh, you determine whether any legal action could be brought against the university for funding St. Luc, or for lax monitoring of discrepancies.

"It is our understanding that you will investigate whether action may be brought for breach of the university's cooperative agreement with NCI, or for violation of the False Claims Act."

Option: Make Headquarters Pay?

It appears that early in the controversy, NCI and NIH officials considered the option of filing two simultaneous suits, one against St. Luc, and another against the Univ. of Pittsburgh.

This option was discussed in a March 28 memorandum from Philip Amoruso, director of the NCI Office of Administrative Management, to NIH legal advisor Robert Lanman.

"We... request a legal opinion of NCI's authority to seek from the Univ. of Pittsburgh full restitution of funds associated with the fraudulent activities performed at St. Luc's under the auspices of NSABP," Amoruso wrote. "The action would be simultaneous with the ongoing recovery action against St. Luc's in the events that recovery of funds from St. Luc's Hospital is unsuccessful."

The option to make the headquarters pay for the

problems at a member institution was not pursued, and no suit has been filed against Pitt by the government. However, the government has demanded that the university reimburse about $35,000 that had been transferred to Poisson and St. Luc, sources said.

"We've received the request, and we expect to resolve it in the broader context of all pending NSABP disputes," a Pitt official said to **The Cancer Letter** earlier this week. "We want to put it all to bed together."

Last week's suit against St. Luc was filed by the Montreal law firm of Ahern, Lalonde, Nuss, Drymer.

Dana-Farber Correction Plan Sent To State Authorities

Dana-Farber Cancer Institute has presented a plan to Massachusetts health authorities for correction of deficiencies in its clinical care and oversight.

The plan was submitted in response to a report from the Massachusetts Dept. of Public Health that cited problems in the institute's clinical systems.

"While in the aggregate, [the problems] are troubling, they are readily correctable. Many have already been corrected," Christopher Walsh, Dana-Farber president, said in a statement. "To ensure our patients' well being and safety, numerous safeguards were put into place immediately following our discovery in February of the tragic overdoses involving two Dana-Farber patients."

Dana-Farber officials said they intend to meet the standards set by the state and the Joint Commission on Accreditation of Healthcare Organizations.

Walsh said the institute's internal peer review committee formed last spring to investigate two deaths caused by chemotherapy overdoses at Dana-Farber has concluded its deliberations. The internal report, which is confidential, has been forwarded for further investigation by an external review committee, chaired by Vincent DeVita Jr., director of the Yale Comprehensive Cancer Center.

"We have already taken a number of aggressive steps in response to this internal effort and on-site surveys by the [Dept. of Public Health] and the Joint Commission," Walsh said.

The institute has begun a search for the director of pharmacy. The former director resigned effective e May 26.

A team established last April is analyzing pharmacy practice and operations. Safeguards, including a high-dose warning system on pharmacy computers, have been put in place to ensure that chemotherapy and other medications are dispensed appropriately.

In another change, Walsh resigned as chairman of biological chemistry and pharmacology at Harvard Medical School.

Walsh said his resignation, effective June 30, will allow him to devote more attention to enhancing clinical care at Dana-Farber.

In Brief

FDA-Certified Mammography Facilities Are Listed By CIS

(Continued from page 1)

Baker's direction, the unit will conduct psychosocial and behavioral research and help integrate the findings into ACS programs. Baker, a professor and director of health psychology at Johns Hopkins Univ., will assume the position on Sept. 1. . . . **ALBERT LOBUGLIO** was selected for the 1995 Distinguished Faculty Lecturer Award by the faculty of the Univ. of Alabama at Birmingham Comprehensive Cancer Center. LoBuglio has been the director of the center for the past 12 years. . . . **FDA-CERTIFIED MAMMOGRAPHY** facilities now may be located by calling the NCI's Cancer Information Serivice (1-800-4-CANCER). As part of FDA's implementation of the Mammography Quality Standards Act of 1992, the service will list all facilities that have been certified by FDA as capable of providing quality mammograms. To date, nearly 8,700 of approximately 10,300 facilities have been fully certified by FDA, and 1,600 have been provisionally certified while undergoing accreditation review. The CIS operates from 9 a.m.-8 p.m. *EDT*. . . . **RESEARCH VIA INTERNET:** The Levit Radiologic-Pathologic Institute of the Univ. of Texas M.D. Anderson Cancer Center offers access through the Internet system known as the World Wide Web to its extensive resources and databases. Access is available to detailed cases studies, information about recent findings in radiology and pathology, and color images of human anatomy in cross-sectional views. Through links to other information servers at M.D. Anderson, Web users may access cancer prevention tips and a catalog of M.D. Anderson greeting cards designed by young cancer patients. Patients may also research their disease and available treatment options.

The Levit Institute's server can be located through Web browser software such as Netscape or Mosaic. Users can enter the following Universal Resource Locator (URL): http://rpisun1.mda.uth.tmc.edu. . . .

NEW MEMBERS of the NCI Div. of Cancer Prevention & Control Board of Scientific Counselors: **Mary Daly**, Fox Chase Cancer Center; **Amelie Ramirez**, South Texas Health Research Center; **Ki Hong**, M.D. Anderson Cancer Center; **Phyllis Bowen**, Univ. of Illinois; and **Gil Omenn**, Univ. of Washington. . . . **DAMIAN CRANE** has replaced Nicholas Olimpio as administrative officer for DCPC. Olimpio recently retired. Crane was administrative officer for the NCI Div. of Cancer Treatment, Developmental Therapeutics Program.

Avon, NABCO Accepting Applications For Grants

The Avon Breast Health Access Fund has opened its fourth cycle for grants to community-based breast cancer programs.

The fund, established by Avon and the National Alliance of Breast Cancer Organizations, has awarded a total of $1.3 million to 69 organizations.

At least $500,000 is expected to be awarded in cycle four, with most grants in the range of $10,000 to $20,000.

Objectives of the awards are to support community programs that help women access breast cancer education and early detection services. The awards do not support the cost of medical services.

The application deadline is June 30. Funding decisions will be announced in September. For applications and information, contact Carol Noblitt at NABCO, 9 East 37th St., 10th Floor, New York, NY 10016, tel: 212/889-0606, fax: 212/689-1213.

Cancer-Related Meetings Listed For June, July, Future

June

Alternative Therapy for the Treatment of Cancer and AIDS—June 12, Oakland, PA. Contact: Carol Wisotzki, Univ. of Pittsburgh Medical Center, tel: 412/647-9542.

NCI Div. of Cancer Biology, Diagnosis & Centers Board of Scientific Counselors—June 12-13, Bethesda, MD. NIH Bldg. 31C Conf. Rm 6.

Cancer Genetics and Tumor Suppressor Genes—June 14-17, Hood College, Frederick, MD. Contact Margaret Fanning, Tel: 301/898-9266, FAX 301/898-9173.

NCI Div. of Cancer Etiology Board of Scientific Counselors—June 15-16, Bethesda, MD.

Oncology: The Year in Review—June 15-16, Chicago. Contact Northwestern Univ., Tel: 312/503-8533, FAX 312/503-0146.

NCI Div. of Cancer Treatment Board of Scientific Counselors—June 19-20, Bethesda, MD. NIH Bldg. 31C Conf. Rm

National Toxicology Program Board of Scientific Counselors Technical Reports Review Subcommittee—June 20-21, Research Triangle Park, NC. Open, 8:30 a.m. both days, Conference Center, Bldg 101, south campus. Contact: Dr. W. Eastin, NIEHS, tel: 919/541-7941.

Eleventh Annual Meeting on Oncogenes—June 20-24, Hood College, Frederick, MD. Contact Margaret Fanning, Tel: 301/898-9266, FAX 301/898-9173.

Pain Management—June 24, Annapolis, MD. Contact Amy Heaps, Univ.of Maryland Cancer Center, Tel: 410/328-8607, FAX 410/328-2578.

July

International Confederation of Childhood Cancer Parent Organizations—July 9-11, Crystal City, VA. Contact Candlelighters Childhood Cancer Foundation, tel: 301/657-8401.

Candlelighters Childhood Cancer Foundation 25th Anniversary Conference—July 12-16, Crystal City, VA. Contact CCCF, tel: 301/657-8401.

National Kidney Cancer Association Annual Convention—July 19-22, Washington, DC. Contact: NKCA, tel: 708/332-1051, fax: 708/328-4425.

Radiation Therapy Oncology Group Semi-Annual Meeting—July 20-23, Philadelphia, PA. Contact Nancy Smith, RTOG, 1101 Market St., Suite 1400, Philadelphia, PA 19107, tel: 215/574-3205.

International Congress of Immunology—July 23-29, San Francisco, CA. Contact: Secretariat, tel: 301/530-7010, fax: 301/530-7014.

International Conference on Head and Neck Cancer—July 28-Aug. 1, Toronto, Canada. Contact: Ruth Enquist, Tel: 507/285-1523, FAX 507/281-8328.

1995 Summer Mini-Symposium on Cell Cycle Regulation—July 28, Frederick, MD. Contact: Patti Hall, Foundation for Advanced Cancer Studies Inc., PO Box 705, Rising Sun, MD 21911, Tel: 410/658-2882; FAX 410/658-3799.

Future

International Society for Experimental Hematology—Aug. 27-31, Dusseldorf, Germany. Contact: CPO Hanser Service, PO Box 1221, D-22882, Hamburg-Barsbuttel, Germany, tel: 49-40-670-8820, fax: 49-40-670-3283.

Dietary Phytochemicals in Cancer Prevention and Treatment—Aug. 31-Sept. 1, Washington, DC. Contact: American Institute for Cancer Research, Secretariat, The Pearson Group, tel: 703/683-6334, fax: 703/683-6407.

International Conference on Prostate Cancer Early Detection and Control: What Should Be The Health Message?—Sept. 6-7, Atlanta, GA. Contact Centers for Disease Control, Steve Wyatt, chief, cancer prevention & control branch, tel: 404/639-3311.

DNA Topoisomerases in Therapy—Sept. 6-8, Amsterdam, The Netherlands. Contact: Secretariat, Amstelveenseweeg 601, c/o AZVU, PO Box 7057 MB Amsterdam, The Netherlands, tel: 31-(0)20-644-4500 or 644-4550, fax: 31-(0)20-644-4551.

International Congress on Hormones and Cancer—Sept. 16-20, Quebec City, Canada. Contact: Secretariat, Laval Univ. Medical Center, tel: 418/654-2144, fax: 418/654-2714.

Association of Community Cancer Centers National Oncology Economics Conference—Sept. 20-23, Marina del Rey, CA. Contact ACCC, Wanda Neal, Meetings, tel: 301/984-9496, fax: 301/770-1949.

Office Of Research Integrity Finds Misconduct In 3 Cases

The HHS Office of Research Integrity has made final findings of scientific misconduct in the following cases:

● **Terence S. Herman**, Harvard Medical School: ORI reviewed an investigation conducted by Harvard Medical School into possible scientific misconduct on the part of Herman while he was an employee of that institution. ORI concurred with the factual findings as set forth in the institution's report, and finds that Herman committed scientific misconduct by falsely reporting in a published article that research had been conducted according to a stated protocol when, in fact, Herman knew at the time that the protocol for tumor measurements had not been carried out exactly as described. The research was supported by grant awards from the National Cancer Institute and the National Center for Research Resources, NIH.

Herman accepted the misconduct finding as part of a Voluntary Settlement Agreement under which, for a period of three years, any institution which submits an application for PHS support for a clinical research project on which his participation is proposed or which uses him in any capacity on PHS supported clinical research must concurrently submit a plan for supervision of his duties. The supervisory plan must be designed to ensure the scientific integrity of Herman's research contribution. Herman also is prohibited from serving on any PHS committee for three years. He has agreed to submit a letter to the International Journal of Radiation Oncology, Biology, Physics requesting retraction of that portion of the article dealing with tumor response (*Herman, et al.*, A Phase I-II Trial of Cisplatin, Hyperthermia and Radiation in patients with Locally Advanced Malignancies. Int. J. Radiation Oncology Biol. Phys. 17:1273-1278; 1989).

● **Denise R. Conrad**, Univ. of Iowa: ORI reviewed an investigation conducted by the Univ. of Iowa into possible scientific misconduct on the part of Conrad, formerly a research assistant in the Dept. of Preventive Medicine, College of Medicine. ORI found that Conrad committed scientific misconduct by fabricating or falsifying data on questionnaires in biomedical research supported by PHS grant *R01* ES05653, "Residential Radon and Lung Cancer Case-Control Study." Conrad has accepted the ORI findings and agreed to a Voluntary Exclusion Agreement under which she is not eligible to apply for or receive federal grant or contract funds for a three-year period beginning April 10, 1995. The fabricated or falsified data did not appear in any publication.

● **Catherine Coyle**, ISOLAB Inc.: An investigation conducted by ISOLAB found that Coyle, a former laboratory technician, falsified and misreported the results of assays for fetal hemoglobin data generated for Johns Hopkins' Multicenter Study of Hydroxyurea in Sickle Cell Anemia in biomedical research supported by PHS funds under a cooperative agreement. Coyle admitted that she misrepresented data submitted to the study. There were no publications involved. Coyle executed a Voluntary Exclusion and Settlement Agreement in which she has agreed not to apply for federal grant or contract funds and will not serve on PHS committees for a three-year period beginning March 27, 1995.

NIH Revises K Series Awards For Career Development

NIH recently reviewed its career awards ("K" series) used to develop the research capabilities of clinicians and other scientists needed to carry out the nation's research mission in the biomedical and behavioral sciences.

The evaluation resulted in several changes:

- The total number of K mechanisms were reduced from 19 to six.
- Review criteria were refined to clarify the career development goals of the K award.
- K award applications will be assigned to initial review groups managed by the prospective funding institute or center to which the application has been assigned.

***Following are new* Program Announcements refecting these changes:**

PA-95-049

Title: **Mentored Research Scientist Development Award**

Application Receipt Dates: Feb. 1, June 1, Oct. 1

The Mentored Research Scientist Development Award (MRSDA) (K01) is for research scientists who need an additional period of sponsored research experience as a way to gain expertise in a research area new to the candidate or in an area which would demonstrably enhance the candidate's scientific career. It is expected that following this experience, the candidate will be able to pursue an independent and productive research career.

The MRSDA provides an intensive, supervised career development experience in one of the biomedical, behavioral, or clinical sciences. The proposed experience should be in a research area new to the applicant and/or one in which an additional supervised research experience will demonstrably enhance the candidate's scientific career. The experiences should permit the application of novel or highly promising interdisciplinary approaches to particular research problems. Candidates must justify the need for a three, four, or five year period of mentored research experience and must be able to provide a convincing case that the proposed period of support will substantially enhance his/her career and/or will allow the pursuit of a novel or promising approach to a particular research problem.

Candidates who have interrupted their careers because of illness or pressing family care commitments may apply if they can clearly demonstrate the potential for productive independent research and the need for an additional period of mentored research experience in order to accomplish an effective scientific reentry.

Similarly, faculty members at institutions with a substantial minority enrollment, who wish to enhance their research skills through a supervised research experience at a nearby research center, may also apply, if they agree to remain at their parent institution after completion of the award.

The MRSDA replaces four existing NIH career development mechanisms, including the Research Scientist Development Award (K01), the Minority School Faculty Development Award (K14), the Research Career Reentry Program (K17), and the Scientist Development Award (K21). Individuals who were eligible to apply for any one of these awards are now eligible to apply for a K01 award. This PA supersedes all previous K01, K14, K17, and K21 program announcements.

The NIH will no longer accept competing applications for the old K01, K14, K17, and K21 awards. Existing policies and provisions will remain in effect for current K01, K14, K17, and K21 recipients until completion of the non-competing years of their three to five year career development program.

Inquiries: Lester Gorelic, Div. of Extramural Activities, NCI, Executive Plaza North Rm 643, Bethesda, MD 20892, tel: 301/496-7344, fax: 301/402-4551, email: gorelicl@dea.nci.nih.gov. (This award is reserved exclusively for minority faculty development.)

PA-95-052

Title: **Academic Career Award**

Application Receipt Dates: Feb. 1, June 1, and Oct. 1

The Academic Career Award (K07) is used by the NIH Institutes and Centers to support individuals interested in introducing or improving curriculum in a particular scientific field as a means of enhancing the educational or research capacity at the grantee institution. This Academic Career Award (K07) supports two types of activities:

—Development. The K07 provides support for more junior candidates who are interested in developing an academic and research expertise in a particular field, as a way to increase the overall pool of individuals capable of research or teaching in the identified area. During the award, the candidate will become a successful academician. Teaching, curriculum building, research, and leadership skills are to be learned during the award. For junior candidates, a mentor is required.

—Leadership. The K07 also supports more senior individuals with acknowledged scientific expertise and leadership skills who are interested in improving the curricula and enhancing the research capacity within an academic institution. Support under this award will increase the visibility and research support or academic capacity for the given field of research within the academic medical/health and research community.

Inquiries: John Schneider or Andrew Vargosko, NCI Div. of Cancer Biology, Diagnosis & Centers, Executive Plaza North Rm 520, Bethesda, MD 20892, tel: 301/496-8580, fax: 301/402-4472, email: schneidj@dcbdcep.nci.nih.gov; or vargoska@dcbdcep. nci.nih.gov

PA-95-053

Title: **Mentored Clinical Scientist Development Award**

Application Receipt Dates: Feb. 1, June 1, and Oct. 1

The purpose of the Mentored Clinical Scientist Development Award (K08) is to support the development of outstanding clinician research scientists. This mechanism provides specialized study for clinically trained professionals who are committed to a career in research and have the potential to develop into independent investigators. The award supports a 3, 4, or 5 year period of supervised research experience that may integrate didactic studies with laboratory or clinically-based research. The proposed research should have both intrinsic research importance and be a suitable vehicle for learning the methodology, theories, and conceptualizations necessary for a well-trained independent researcher. Because of the focus on progression to independence, the prospective candidate should propose a period of study and development consistent with this goal and his or her previous research and clinical experience. The entire program should be comparable in scope and rigor to meeting the requirements for an advanced research degree.

This award replaces the Clinical Investigator Award (K08), the Physician Scientist Award (K11), the Dentist Scientist Award (K15), and the Scientist Development Award for Clinicians (K20). Individuals who were eligible to apply for one of these awards are now directed to apply for an MCSDA. This PA supersedes all previous K08, K11, K15 and K20 PAs and applications for these awards are no longer accepted. Existing policies will remain in effect for current K08, K11, K15 and K20 recipients until completion of the non-competing years of their program.

Inquiries: John Schneider or Andrew Vargosko, NCI Div. of Cancer Biology, Diagnosis & Centers, Executive Plaza North Rm 520, Bethesda, MD 20892, tel: 301/496-8580, fax: 301/402-4472, Email: schneidj@dcbdcep.nci.nih.gov; Email: vargoska@dcbdcep.nci.nih.gov

RFP Available

RFP NIH-ES-95-31

Title: **Evaluation Of The Potential Of 50/60 Hz Magnetic Fields In Promoting Breast Cancer In DMBA-Treated Female Sprague Dawley Rats**

The National Institute of Environmental Health Sciences is soliciting proposals for studies designed to evaluate the potential of 50 Hz magnetic fields to promote mammary gland carcinogenesis in Sprague Dawley rats initiated with dimethylbenzanthracene (DMBA). The purpose of a 13-week study will be to replicate the series of studies reported by Loscher, that 50 Hz magnetic fields have the potential to increase the breast cancer rate in DMBA-treated female Sprague Dawley rats. The animals will be exposed to four weekly intragastric doses (5 mg/animal) of DMBA and magnetic fields of specified intensities and frequencies. The purpose of a 26-week study will be to determine whether or not 50 or 60 Hz magnetic fields can promote cancer in a standard DMBA model. The animals will be exposed to one intragastric exposure (10 mg/animal) of DMBA followed by exposures to 50 and 60 Hz magnetic fields of specified intensities for 26 weeks. This project may have three options: a 13-week study, a 26-week study, and a combination study where the 13- and 26-week studies are run concurrently. This project will be separated in two phases. Phase 1 will be the development phase, during which will occur the procurement of equipment and materials for the construction/renovation of the exposure and monitoring systems and the development effort needed to determine that the system functions appropriately. Phase 2 will be the initiation/promotion studies where one of the three options will be exercised. It is estimated that Phase 1 will require approximately 1.04 professional person-years per contract year and 0.24 technical person-years per contract year. Phase 2 will require approximately 1.9 professional person years and 3.4 technical person years for the 13-week study and 2.9 professional person-years and 5.5 technical person-years for the 26-week study. The estimated period of performance is 17 months.

Contract Officer: Jo Ann Lewis, Contracts and Procurement Management Branch, NIEHS, 79 T.W. Alexander Dr., Bldg 4401 Research Commons, PO Box 12874, Research Triangle Park, NC 27709, tel: 919/541-7893, fax: 919/541-2712.

Program Announcement

PA-95-069

Title: **Cancer Surveillance Using Health Claims-Based Data Systems**

The NCI Div. of Cancer Prevention and Control invites investigator-initiated research project grant (R01) applications for research to investigate the utility of health claims information as a reporting source for measuring the national cancer burden. Utility is defined in terms of the completeness and accuracy of the health claims information to estimate population-based cancer incidence and survival rates, patterns of care, the role of cancer risk factors and effects of cancer therapies. Responses to this PA would initiate mechanisms to develop the capabilities of obtaining registry and related health claims-based data, develop algorithms for matching data as appropriate, develop mechanisms for protecting the privacy of individuals contained in the various databases, and develop methodologies for addressing the research objectives in this PA.

Inquiries: Kenneth Chu, Special Populations Studies Branch, NCI, Executive Plaza North Rm 240, Bethesda, MD 20892, tel: 301/496-8589, fax: 301/496-8576, Email: kc10d@nih.gov