for or whomas to ons

THE CANCER

P.O. Box 2370 Reston, Virginia 22090 Telephone 703-620-4646

Vol. 13 No. 35 Aug. 28, 1987

© Copyright 1987 The Cancer Letter Inc. Subscription: \$160 year North America, \$175 year elsewhere

Centers, Cancer Control Would Get Larger Shares of NCI Increase In House Bill; Grant Total Drops

Cancer centers and cancer control appear to have fared the best among NCI's major programs when the \$1.448 billion in the House appropriations bill, approved just before Congress (Continued to page 2)

In Brief

MSK Opens Campaign On Colorectal Cancer Early Detection; NIH Symposium Dedicates Cyclotron

"EARLY DETECTION: It's A Way of Life," is the theme of a nationwide public service print campaign launched last week by Memorial Sloan-Kettering Cancer Center. Purpose of the campaign is to encourage use of early detection tests for colorectal cancer. The ads, which MSK is asking the media to use, were developed in conjunction with the advertising agency, Wells, Rich, Greene Inc., which contributed its services. A toll free phone number, 1-800-DETECT 5, is included which the public can call for information about tests mentioned in the public service messages. . . . NIH'S NEW cyclotron facility with its positron emission tomography (PET) scanning capability will be dedicated Sept. 21. A scientific symposium starting at 8:30 a.m. will include presentations on use of PET for diagnosis and advancing treatment in neuropsychiatry, schizophrenia, brain tumors, epilepsy, Parkinson's disease and dementia. . . . NCI'S NEW Office of Program Operations & Planning, in the Office of the Director, has now been officially established. The assistant secretary of health for the Dept. of Health & Human Services approved it this month. OPOP is headed by Iris Schneider, who previously had the title of director of staff operations; it includes legislative liaison, planning and evaluation. The old Office of Program Planning & Analysis, which the late Louis Carrese ran with such distinction for so many years, has been abolished. . . . PROCEEDINGS of the workshop on new developments in dietary fat and fiber in carcinogenesis, held last year under sponsorship of the American Health Foundation and NCI, comprise the entire July issue of "Preventive Medicine," published by AHF. In the lead article, AHF President Ernst Wynder writes, "It is the totality of the evidence that links a high level of dietary fat to risk for breast and colon cancers. . . The key questions are, which fats and which fibers, and what amount of each, are of etiological and preventive significance?"

Phase 1 AIDS Vaccine Trial Will Involve 81 Persons At NIH

. . . Page 4

Cancer Letter
Takes Two Weeks Off
. . . Page 5

NCI Advisory Group,
Other Cancer Meetings
. . . Page 5

RFAs Available

. . . Page 8

Centers Budget Increased In House Bill, But Falls Short Of Requirement

(Continued from page 1)

left for its summer vacation, was allocated by the institute's executives. NIH approved the allocations last week.

Although this was only another round of estimating how the 1988 fiscal year funds will be spent, it does bring into a little better focus what NCI's constituents can expect. For some, it would be substantially better than 1987; for others, not much would change; and for a few (primarily, those counting on construction/renovation help), it would be a major step backward.

There are at least two more rounds remaining, however. The Senate has not yet written its version of the FY 1988 Labor-HHS-Education appropriations bill. That probably will be done immediately after Congress returns Sept. 9. The Senate Appropriations Committee, and its Labor-HHS-Education Subcommittee, traditionally have been more generous than the House in funding cancer programs.

The final round will come when the House and Senate conferees get together to settle differences in their respective bills. Sometimes those differences are split down the middle; on a few occasions, the Senate's higher figures for NIH have prevailed, thanks to some trading involving other elements of the bill favored by House members, and possibly also to some discreet lobbying.

The total in the big spending bill is not too far out of line with the President's budget, although NIH was substantially increased, so it does not seem that a veto is likely at this point.

The total of \$1.448 billion (one billion, 448 million) for NCI does not include \$93.9 million for AIDS research. When that is added, and the complete totals for both of \$1,448,411,000 and \$93,946,000 are included, NCI would receive \$1,542,357,000. That compares to \$1.402 billion in the current year, an increase of about \$140 million.

That is still about \$160 million under the bypass budget request of \$1.7 billion.

It is possible that the Senate will complete its bill and get to the conference before the end of the fiscal year, Sept. 30, but not likely. If a regular appropriations bill has not cleared Congress by then and signed by the President, interim funding through a continuing resolution will have to

be provided. That happens nearly every year and is disruptive when it extends too far into the fiscal year.

Whatever happens with the Senate bill, the cancer centers program seems certain to get a significant increase, although not enough unless the Senate comes up with more.

The program, nearly all of which goes into core grants. is getting at least \$94.4 million this year. The President's budget requested \$93.2 million, which was what had projected total in the appropriation. Late in the year, **NCI** reprogrammed \$1.2 million to keep some core grants alive that otherwise would have gone unfunded.

Core grants also have been funded only at 80-85 percent of the peer review recommended levels. The possibility still exists that additional money might be found and reprogrammed into the centers budget, to get the awards a little closer to the recommended levels.

Three new center core grants were awarded in FY 1987--Case Western Reserve, Univ. of Virginia and Cold Spring Harbor. Two are in the process of being phased out, making a net gain of one. The priority score payline was 173.

In the allocation of the House total, centers would get \$103 million, an increase of slightly more than 10 percent. That would be the largest single percentage increase of the major NCI programs.

NCI Director Vincent DeVita has been talking all year about how the centers program was in trouble, with a number of them in danger of not having their core grants funded because there was not enough money in the budget. Center directors have been hounding him all year, because of what they have perceived as a lack of visibility and concern for them at NCI.

The role of centers in the Year 2000 goals and their prominence in the bypass budget, which requested \$118 million for them, has been visible enough. The bypass budget has called for an increase in the number of centers by 50 percent within the next four years.

The centers asked Congress for the full amount in the bypass budget, and that it be guaranteed with a line item. Although the House bill did not earmark anything for centers, Rep. William Natcher's Labor-HHS-Education Appropriations Subcommittee was

listening, apparently. The committee report the increase it recommended be used for "a modest expansion" in the number of research centers supported

by NIH.

directed

While the increase was welcomed by those involved in the centers program, it fell short of being enough. To restore core grant funding to the peer review recommended levels, and to add two or three new centers, the entire \$118 million will be needed.

that some of

and prevention control Cancer allocated \$73,287,000 of the House funds, a substantial increase but again not enough.

With a host of chemoprevention, other prevention and nutrition studies awaiting funding, the approximate 10 percent increase (from \$67 million), the extra \$6 million will not go very far.

At least half of that increase will be needed to cover the built in escalation of second year funding for the Community Clinical Oncology Program. It most likely will not permit funding additional CCOPs, as requested by the Assn. of Community Cancer Centers when it asked for a line item and a total of \$20 million for the program.

It now is obvious that the last hope several of the highly regarded but unfunded CCOPs have of getting into the program in FY 1988 lies with the Senate.

One problem with cancer control funding has to do with the authorization limit. The National Cancer Act lists cancer control authorized spending separately; for 1988, it is \$83 million. That means the Senate can bump it up only \$10 million more.

Biggest single category in the NCI budget is that for basic research, as always. Listed under the heading of research project grants, almost all RO'ls and PO'ls. allocation from the House bill is \$702.962 million, up from \$646.2 million this year. That's a little less than 10 percent, less than the scientific community would like but better than it sometimes has been.

The number of competing grants NCI could award under the House bill would be 1.014, down from 1,060 this year. They would be funded at 6 percent under recommended levels, slightly more than the reductions negotiated in 1987.

NCI would fund an estimated 35 percent of approved competing grants, at a payline estimated at 170.

Here's how the allocations went for other

categories, by funding mechanisms, from the House approved total (the 1987 amounts in parenthesis):

National Research Service Awards--\$31.9 million (\$31.7 million).

<>R&D contracts--\$149.2 million (\$180.3) million). The 1988 figure does not include AIDS contracts while the 1987 total does. Most of the \$93.9 million in AIDS money which would go to NCI will be spent through contracts, although some might wind up in ROIs, with a larger amount in the intramural budget.

<>Intramural research--\$239.5 million (\$234.8 million). The 1988 figure does not include AIDS money.

research--\$81.6 <>Other million. comparable figure for 1987 was available. This category includes the following:

cooperative \$59.4 --Clinical groups, million (\$57.6 million).

--Research career program, \$7,868,000.

--Organ Systems Program, \$821,000 (same as '87, all of which supports the Organ Systems Coordinating Center).

--Clinical education, \$2.4 million.

--Minority biomedical reserch support, \$3,180,000.

--Instrumentation grants, \$3,621,000.

--Small grants, \$500,000.

-- Conference grants, \$500,000.

evaluation --Scientific (costs of peer review other advisory groups), \$3,318,000.

Still No Construction \$\$\$

the House specifically omitted Since construction funds from its bill, commenting the committee report that it did so because it was awaiting "clarification" on a number of points (The Cancer Letter, Aug. 7), the NCI allocation also left it out.

Again, the Senate is the last chance for salvaging NCI's research facilities program. It has probably gotten "the most bang for the bucks" of any extramural effort; enjoys widespread support throughout the cancer research community; is managed by a lean, expert staff at NCI; and historically has only detractor--the Office of Management & Budget. If the program is allowed to die, it will be because the constituents did not do a good job of taking their case to Congress.

There are still at least two weeks before the Senate Labor-HHS-Education Appropriations Subcommittee meets to mark up its bill. Some of the committee members are in their home states now during the recess and might be

reached there; in any case, messages sent now will reach them when Congress reconvenes.

Messages should be addressed to the individual senator, at the subcommittee, SD-186 Dirksen Senate Office Bldg., Washington, DC 20510.

Members of the subcommittee are:

Democrats--Lawton Chiles, Florida, chairman; Robert Byrd, West Virginia; William Proxmire, Wisconsin; Ernest Hollings, South Carolina; Quentin Burdick, North Dakota; Daniel Inouye, Hawaii; Tom Harkin, Iowa; and Dale Bumpers, Arkansas.

Republicans--Lowell Weicker, ranking minority member, Connecticut; Mark Hatfield, Oregon; Ted Stevens, Alaska; Warren Rudman, New Hampshire; Arlen Specter, Pennsylvania; James McClure, Idaho; and Pete Domenici, New Mexico.

Phase 1 AIDS Vaccine Trial Will Involve 81 Persons

A total of 81 persons is expected to be involved in phase 1 trials of the first experimental AIDS vaccine to go into clinical testing at the NIH Clinical Center.

The trial will include healthy homosexual men who are HIV negative and whose current and recent sexual behavior is considered "low risk." Participants should have had no possible exposure to HIV during the previous three months, and must agree to observe safe sexual practices. The study will also include a control group of 18 volunteers, including three with no history of risk behaviors.

Four groups of 15 volunteers will receive a dose regimen of either 10, 20, 40 or 80 micrograms. Patient groups will be added sequentially, beginning with the lowest regimen, with a new group added every 30 days.

After four weeks, five persons in each dose regimen will receive a booster identical to the primary dose of the vaccine, five will receive a half dose booster, and five will receive no booster.

An additional three persons with no history of risk behaviors will be immunized at the highest dose regimen in order to compare their responses to those of the study population.

The 18 person control group will receive only the control immunogen, keyhole limpet hemocyanin.

Clifford Lane, deputy clinical director of NIAID and a senior investigator in NIAID's

laboratory of immunoregulation, is the principal investigator of the study.

The vaccine was developed by MicroGeneSys, a West Haven, Connecticut firm. NIAID scientists provided the company with an infectious molecular clone of HIV from a North American HIV isolate, NY5, and a European isolate, LAV. The clone was constructed by Malcolm Martin, chief of NIAID's Laboratory of Molecular Microbiology and his colleagues.

The firm holds the patent on the vaccine, but will pay royalties to the government for its technical contributions.

MicroGeneSys isolated the envelope gene and modified it for placement into a biological system to produce the gene's product, a modified HIV envelope protein precursor, or modified gp160.

The vaccine is made by inserting a modified gene for the HIV envelope precursor protein, gp160, into the genome of a baculovirus, which serves as a vector. The recombinant baculovirus is grown in an insect cell tissue culture system. The modified gp160 protein expressed by the insect cells is used as the vaccine. Neither the complete HIV nor the baculovirus itself will be injected into volunteers.

NIAID scientists worked with the company in assessing antibody responses in animals inoculated with the protein, and facilitated toxicity and immunogenicity studies in chimpanzees.

Two chimpanzees were given doses of 40 and 80 micrograms, respectively, with the same doses given as boosters. Both chimps developed neutralizing antibodies, as well as good levels of circulating antibodies that are specific for the HIV envelope. The vaccine also elicited a very good T cell response in the chimps.

The investigators chose to study vaccine in healthy male homosexuals because profile immunological differs nificantly from that of the general pop-"We believe it is essential ulation. determine what the immune responses to the vaccine will be in persons in this group since they represent the population in the United States at greatest risk of being infected with HIV, and are ultimately the most likely group in the United States to receive a vaccine," an NIAID "backgrounder" on the study explained.

NIAID investigators expect to have sufficient toxicity data from the phase 1

trial within six months. When safety, immunogenicity and optimum dosage has been established in the phase 1 trial, testing can proceed to NIAID's Vaccine Evaluation Units, which could take up to one year.

Between 100 and 200 persons would be tested in phase 2 trials, for one year.

Phase 3 trials would involve a large population at high risk of becoming infected.

Although no serious adverse effects were noted at doses as high as 500 micrograms per animal, NIAID investigators are special precautions for the first people in each group to be inoculated. Those persons will have an i.v. running during the time of immunization and be observed in the clinic so that appropriate emergency intervention is immediately available.

Anticipated side effects include pain, redness, swelling at the site of injection, and perhaps a low grade fever, particularly when the booster injection is given. In addition, "there is a rare possibility of a more severe systemic reaction."

Individuals who wish to volunteer for the study should contact Margaret Megill at 301/496-7196.

Cancer Letter To Skip Next Two Weeks, Resume Publication Sept. 18

With Congress taking its month long summer recess, many NCI staff members on vacation and practically no advisory committee or board of scientific counselors meetings until September, the staff of The Cancer Letter has decided now is the time to take its annual vacation.

The Cancer Letter will not be published during the next two weeks. The next issue, Vol. 13 No. 36, will be published Sept. 18.

The office will be closed from Aug. 29 to Sept. 14, but the telephone answering machine will be working (hopefully) and will be checked daily. Messages requiring immediate attention will get an immediate response.

NCI Advisory Group, Other Cancer Meetings For Sept., Oct., Future

Brazilian Head and Neck Cancer Congress—Sept. 2-5, Sao Paulo. Contact Sociedade Brasileira de Cirurgia de Cabeca y Pescoco, Praca Amadeu Amaral 47, conjunto 82, Sao Paulo, Brazil, CEP 01323.

NCI Div. of Cancer Prevention & Control Board of Scientific Counselors Committee on Centers & Community Oncology-Sept. 3, NIH Bldg 31 Rm 9, 8:30 a.m.

Hormones and Cancer-Sept. 6-11, Hamburg. Contact Third International Congress, PO Box 302480/D-2000

Hamburg 36, Federal Republic of Germany.

<u>Japanese Cancer Assn.</u>--Sept. 7-9, Tokyo. 46th annual meeting. Contact Shozo Takayama, Director, National Cancer Center Research Institute 1-1, Tsukji 5-chome, Chuo-ku, Tokyo 104, Japan.

Upper Gastrointestinal Cancer--Sept. 9, Cleveland. Contact CME, Cleveland Clinical Educational Foundation, 9500 Euclid Ave. Rm TT3-301, Cleveland, OH 44106, phone (local) 444-5696; (Ohio) 800/762-8172; (elsewhere) 800/762-8173.

Chemotherapy Administration—Sept. 9, Philadelphia.
Contact Pauline Sherry, RN, Fox Chase Cancer Center,
Central & Shelmire Aves, Philadelphia 19111, phone 215/728-2576.

Comprehensive Approach To Cancer Care: Defining Your Role--Sept. 9-11, Denver. AHA education series. Contact Michelle Soto, Div. of Education, American Hospital Assn., 312/280-6229.

<u>DCPC Board of Scientific Counselors</u> Committee on Cancer Control Science-Sept. 10, NIH Bldg 31 Rm 2A52, 11 a.m.

International Society of Pediatric Oncology--Sept. 13-18, Jerusalem. 19th annual meeting. Contact Kenes, PO Box 50006, Tel-Aviv 61500, Israel.

<u>Cancer Nursing</u>-Sept. 14-16, Crystal Gateway Marriott, Arlington, VA. American Cancer Society 5th national conference. Contact Trish Greene, RN, MSN, ACS, 90 Park Ave., New York 10016.

<u>Home Intravenous Antibiotics</u>--Sept. 14, Cleveland. Contact CME, Cleveland Clinic Educational Foundation, 9500 Euclid Ave. Rm TT3-301, Cleveland, OH 44106.

Tumor Necrosis Factor and Related Cytotoxins-Sept. 14-18, Heidelberg. International conference. Contact Dr. George Gifford, Dept. of Immunology & Medical Microbiology, College of Medicine, Univ. of Florida, Box J-266, JHMHC, Gainesville 32610, phone 904/392-3311.

8th Asia Pacific Cancer Congress—Sept. 14-19, Seoul. Contact Secretariat, Dept. of Surgery, Seoul National University Hospital, 28 Yunkun-dong, Chongro-Ku, 110 Seoul, Republic of Korea.

7th Annual Soft Tissue Tumor Symposium--Sept. 14-16, New York City. Contact Steven Hajdu, MD, Memorial Sioan-Kettering Cancer Center, 1275 York Ave., New York 10021, phone 212/794-7999.

Towards 2000 III--Oncology Today--Sept. 15-16, Fox Chase Cancer Center, Philadelphia. Contact Peggy Conners or Janet Spause, Conference Coordinators, Fox Chase Cancer Center, 430A Rhawn St., Philadelphia 19111, phone 215/728-6900.

Viral Oncogenesis and Epidemiology-Sept. 15-18, Lyon. Contact European School of Oncology, Via Venezian 1, 20133 Milano, Italy.

DCPC Board of Scientific Counselors Prevention Committee--Sept. 15, Federal Bldg (7556 Wisconsin Ave., Bethesda), Rm B1-19, 9 a.m.

PET/SPECT--Sept. 16-17, Shoreham Hotel, Washington DC. Instrumentation, radiopharmaceuticals, neurology, physiologic measurement. Contact American College of Nuclear Physicians, Suite 700, 1101 Connecticut Ave NW, Washington DC 20036, phone 202/857-1135.

Current Concepts in Psycho-Oncology and AIDS-Sept. 17-19, New York City. Contact Roberto Fuenmayor, CME Office, Memorial Sloan-Kettering Cancer Center, 1275 York Ave., New York 10021, phone 212/794-6754.

<u>Cancer Management</u>—Sept. 18-19, Yale Univ., New Haven, CT. Contact American College of Surgeons, Cancer Dept., 55 E. Erie St., Chicago 60611.

Recent Advances in Cancer Management-Sept. 20-23, Hong Kong. EORTC symposium. Contact ICTS, Vere & Associates Inc., 17/F, Jubilee Commercial Bldg, 42-46 Gloucester Rd, Hong Kong.

Advances in Clinical Nutrition—Sept. 20-22, Pheasant Run Resort (near Chicago). American College of Nutrition 28th annual meeting. Includes sessions on nutrition and cancer. Contact Dr. Mildred Seelig,

Executive Director, American College of Nutrition, 345 Central Park ave., #4, Scarsdale, NY 10583, phone

Transrectal Ultrasound in the Diagnosis and Management of Prostate Cancer--Sept. 21-22, Westin Hotel Renaissance Center, Detroit. 2nd international symposium. Contact Diversified Conference Management, Renaissance PO Box 2508, Ann Arbor, MI 48106, phone 313/665-2535.

Role of Nutrition in the Origins of Disease-Sept. 22, Fairmont Hotel, San Francisco. 7th annual Bristol-Myers Symposium on Nutrition Research. Contact Helen Miller, Program Coordinator, Continuing Education, Univ. of California (Davis) School of Medicine, 2701 Stockton Blvd., Sacramento 95817, phone 916/453-4390.

Freestanding Radiation Therapy Centers: Opportunities and Challenges--Sept. 21-22, Ramada Renaissance Hotel, San Francisco. Contact Allen Meadors, PhD, Exeuctive Director, FACHE. Northwest Arkansas Radiation Therapy Institute, PO Box 289, Springdale, AR 72765, phone 501/361-2585.

Div. of Cancer Prevention & Control Board of Counselors--Sept. 21-22, Holiday Bethesda, MD, 9 a.m. each day, open.

Breast Cancer-Sept. 21-25, Pomeirio Castle, Como, Italy. Postgraduate course. Contact European School of Oncology, Via Venezian 1, 20133 Milano, Italy.

Oncology Nursing--Sept. 21-26, Ankara. UICC course. Assoc. Prof. Lale Atahan, Turkish Assn. for Research and Control, Atac Sok No. 21. Yenisehir, Ankara, Turkey.

PET/Cyclotron Facility Dedication and Symposium-Sept. 21, NIH Clinical Center, Masur Auditorium, 8:30 a.m.-4:30 p.m. Latest research efforts Center scanning. Contact Colleen Henrichsen, Clinical Communications, 301/496-2563.

Ljubliana, <u>Biobehavioral</u> Oncology--Sept. 22-25, Yugoslavia. 7th international symposium. Contact Secretariat EUPSYCA, Bergstrasse 10, 2900

Federala Republic of Germany.

<u>European Tumor Virus Group</u>--Sept. 22-25, Dresden. XVIIth meeting. Contact Prof. Dr. D. Bierwolf, Central Institute for Cancer Research, Academy of Sciences of GDR, Lindenberger Weg 80, 1115 Berlin, German Democratic Republic.

Developmental Therapeutics Contract Review Committee-Sept. 23-25, Bethesda Holiday Inn, open Sept. 23 8-8:30 a.m.

Management-Sept. 25-26, Baylor Univ. Medical Center, Dallas. Contact Cancer Dept., American College of Surgeons, 55 E. Erie St., Chicago 60611.

National Cancer Advisor Board Committee on Cancer Centers--Sept. 27, NIH Bldg 31 Rm 7, 6 p.m., open.

NCAB Committee on Organ Systems Programs--Sept. 27, NIH Bldg 31 Rm 8, 7:30 p.m., open.

National Cancer Advisory Board-Sept. 28-30, NIH Bldg 31 Rm 6. Open Sept. 28, 8:30 a.m.-adjournment, and Sept. 30, 8 a.m.-adjournment. Closed Sept. 29 for grant review.

NCAB Committee on Planning & Budget-Sept. 28, NIH

Bldg 31 Rm 7, 5 p.m., open.

NCAB Committee on Cancer Control & the Year 2000-

Sept. 28, NIH Bldg 31 Rm 4, 7:30 p.m., open.

NCAB Committee on Review of Contract Concepts & Budget for the Office of Director-Sept. 29, NIH Bldg 31 Rm 7, to follow adjournment of NCAB closed session,

NCAB Committee on AIDS-Sept. 29, NIH Bldg 31 Rm 7,

7:30 p.m., open.

Leukemia & Lymphoma: Challenges for the Future-Sept. 28-30, Nagoya. Contact Secretar Convention Service Inc., 1-45 Shirakabe, Secretariat, Nagoya 461, Japan.

<u>Cancer Nursing on a Continuum</u>-Sept. 29-Oct. 2, Westin Gallelria Hotel, Houston Oncology Nursing Office Conference Contact

Services, Box 131, M.D. Anderson Hospital & Tumor Institute, 1515 Holcombe Blvd., Houston 77030, phone phone 713/792-2222.

Fundamental Problems of Cancer Education--Sept. 29-Oct. 1, Lodz, Poland. Contact Organizing Comlinternational Symposium, 194, Piotrkowska Str., Committee. 368, Lodz, Poland.

American College of Epidemiology--Sept. 30-Oct. 2, New Orleans. 6th annual meeting, including scientific symposium on techniques of environmental risk assessment. Contact Dr. Curtis Mettlin, Secretary, American College of Epidemiology, Roswell Park Memorial Institute, 666 Elm St., Buffalo, NY 14263, phone 716/845-4406.

Assn. of Community Cancer Centers Fall Leadership Conference--Sept. 30-Oct. 2, Chicago. Topics include accreditation, freestanding reimbursement, centers, marketing and budgeting. Contact ACCC, 11600 Nebel St., Suite 201, Rockville, MD 20852, phone 301/984-9496.

Protection of Human Subjects in Cancer Research: Solutions to Dilemmas, Old and New-Oct. 1-2, San Antonio. Sponsored by NIH, FDA, Univ. of Texas Health Science Center and Southwest Oncology Group. Contact Pat Cote, IRB, Univ. of Texas Health Science Center, 7703 Floyd Curl Dr., San Antonio, TX 78284, phone 512/567-2350.

Div. of Cancer Treatment Board of Scientific Counselors-Oct. 1-2, NIH Bldg 31 Rm 10, open 8:30 a.m.-aproximately 5:30 p.m. Oct. 1 and 8 a.m.-adjournment Oct. 2. Closed 5:45 p.m.-adjournment Oct. 1.

<u>Cancer and Sexuality</u>-Oct. 2, Indianapolis. Contact ACS, Medical Affairs Dept., 1843 N. Meridian St., Indianapolis 46202, phone 317/923-2225.

VII National Cancer Congress-Oct. Cancer Institute. Contact Academic Div., National Calle 1 No. 9-85, Bogota, Colombia.

Head and Neck Carcinology-Oct. 1-2, Paris. Annual symposium. Contact Dr. J. Richard/Mrs. H. Lamadon, Head and Neck Surgery Dept., Institut Gustave-Roussy, 39, rue Camille-Desmoulins, 94805 Villejuif Cedex, France.

Hodgkin's Lymphoma-Oct. 2-3, Cologne. Recent advances in basic and clinical research. Contact Prof. Dr. V. Diehl, Med. Univ.-Klinik 1, J. Stelzmannstr. 9, 5000 Koln 41, Federal Republic of Germany.

Cancer of the Pancreas--Oct. 2-3, Velden, Austria. Diagnosis and treatment. Contact Dr. D. Manfreda, 9020 Abtlg., Landeskrankenhaus, Klagenfurt, Chir. Austria.

Conference--Oct. Cancer Care Regional Singapore. Contact Singapore Cancer Society, 15 Enggor St., 06-03 & 04 Realty, Centre, Singapore 0207.

Ultrasonic Examination of the Breast-Oct. 3-5, New international conference. Contact 5th Orleans. Dept. of Radiological (Irvine), 101 City Drive Catherine Cole-Beuglet, MD, Dept. Sciences, Univ. of California (Irvine), Cole-Beuglet, MD, South, Orange, CA 92668, phone 714/634-6175.

Behavioral Techniques and Relaxation in Treatment of Stress, Pain and Anxiety-Oct. 5-8, New York. Contact Lisa Griffin, Course Secretary, Memorial Sloan-Kettering Cancer Center, 1275 York Ave., New York 10021, phone 212/794-7019.

International Gynecologic Cancer Society--Oct. 5-8, Amsterdam. 1st meeting. Contact QLT Convention Services, Keizersgracht 792, 1017 EC Amsterdam, The Netherlands.

Turkish-French Cancer Days—Oct. 5-9
Hematologic malignancies. Contact Prof.
Director, Div. of Oncology, Hacettepe Un
of Medicine, Ankara, Turkey. 5-9, Univ., Faculty

Nutritional Status Assessment of the Individual--Oct. 6-7, New York. Contact Dr. G.E. Livingston, American Health Foundation, Food & Nutrition Council, PO Box 265, Dobbs Ferry, NY 10522, phone 914/693-2660. Multidisciplinary Course for Doctors and

Oct. 6-8, High Wycombe, UK. Contact Institute of Oncology Marie Cure Memorial Foundation, 28 Belgrave Square, London SW1X 8QG, UK.

Immunocytochemistry, Electron Microscopy and Molelcular Biology in Tumor Diagnosis--Oct. 6-10, Detroit. Workshop. Contact Vivan Powell, Secretary, Michigan Cancer Foundation, 110 E. Warren Ave., Detroit 48201.

Challenges of Oncology Nursing--Oct. 7-9, Cleveland. Contact Dept. of Continuing Education, Cleveland Clinic Educational Foundation, 9500 Euclid Ave. Rm TT3-301, Cleveland 44106, phone (in state) 800/762-8172; outside Ohio, 800/762-8173.

Sarcomas-Oct. 8-10, Tarpon Springs, FL. International symposium. Contact Dr. James Ryan, Dept. of Orthopedic Surgery, Wayne State Univ. School of Medicine, 4201 St. Antoine 7C, Detroit 48201, phone

Managing Your Cancer Program: You and Your Patients--Oct. 8-9, Hilton Head, SC. Workshop for physicians and health care administrators. Contact Cancer CarePoint, 2394 Mount Vernon Rd., Suite 200, Atlanta 30338, phone 404/399-1812.

AIDS and Associated Cancers in Africa-Oct. 8-9, Naples. 2nd international symposium. Contact Burson Marsteller, A. Lanzone, Piazza S. Allessandro 6, 20123 Milan, Italy.

<u>Enhancing Quality of Life</u>: Oncology Social Work Strategies--Oct. 9-10, Tampa. Contact Nancy Elkins, 813/972-8407.

<u>Cancer Biology and Immunology</u> Contract Review Committee--Oct. 9, NIH Bldg 31 Rm 9, open 9-9:30 a.m.

Cancer Management—Oct. 9-10, Univ. of Arkansas Medical Center, Little Rock, Contact Cancer Dept., American College of Surgeons, 55 E. Erie St., Chicago 60611.

Body Imaging--Oct. 10-18, Maui, Hawaii. 12th annual international conference. Contact Dept. of Radiology, Nu Med Regional Medical Center, 22141 Roscoe Blvd., Canoga Park, CA 91304.

<u>Lasers in Medicine</u>: Expanding Clinical Applications --Oct. 10, Alta Bates Hospital Auditorium, Berkeley. Contact Mary Grim, Medical Education Coordinator, Alta Bates Hospital, 3001 Colby St., Berkeley, CA 94705, phone 415/540-1420.

<u>Cancer Chemotherapy</u>-Oct. 11-14, Westin Galleria Hotel, Houston. 9th annual symposium. Contact Office of Conference Services, M.D. Anderson Hospital, 1515 Holcombe Blvd, Houston 77030, phone 713/792-2222.

Screening in Oncology--Oct. 13-16, Florence Contact Dr. D. Palli, M. Rosselli del Turco, CSPO, Viale Volta 171, 50131 Florence, Italy.

Metastasis-Oct. 14-16, Kiev. New approaches. Contact Prof. K.P. Balitsky, Institute for Oncol. Problems, Vasikovskaya Street 45, 252022 Kiev 22, USSR.

Les Tumeurs du Thymus-Oct. 15-16, Grenoble. Contact Unite de Concertation et de Recherche pour le Traitement des Affections Cancereuses, CHUBP 217 X, 38043 Grenoble Cedex, France.

<u>Cancer du Sein</u>--Oct. 15-17, Avignon, France. Contact Dr. Serin, Clinique Sainte Catherine, BP 859, 84000 Avignon.

<u>Doctor Involvement in Public Education</u> About Cancer --Oct. 15-17, Singapore. UICC workshop. Contact Singapore Cancer Society, 15, Enggor St., 06-03 & 04 Realty Centre, Singapore.

New Perspectives in Cancer Research—Oct. 15-18, Halkis, Greece. 1st international workshop. Contact J.G. Delinassios, Anticancer Research, 5, Argyropoulou St., Kato Patissia, Athens 11145.

<u>Cancer: A Molecular Perspective</u>—Oct. 16-17, San Antonio. Contact National Foundation for Cancer Research, 7315 Wisconsin Ave., Suite 332W, Bethesda, MD 20814, phone 301/654-1250.

American Society for Therapeutic Radiology and

Oncology--Oct. 19-23, Boston. 29th annual scientific meeting. Contact ASTRO, 1891 Preston White Dr., Reston, VA 22091, phone 703/648-8900.

<u>Scripps Cancer Symposia</u>—Oct. 19-21, Sheraton Harbor Island Hotel, San Diego. 11th annual Cancer Symposium and 7th annual Cancer Symposium for Nurses. Contact Nomi Feldman, Conference Coordinator, 3770 Tansy, San Diego 92121, phone 619/453-6222.

<u>Div.</u> of <u>Cancer Etiology</u> Board of Scientific Counselors--Oct. 22-23, NIH Bldg 31 Rm 10. Open Oct. 22, 1 p.m.-adjournment and Oct. 23 9 a.m.-adjournment.

Internacional de Curugia de Cabeza y Cuello-Oct.
22, Barcelona. XV symposium. Contact Dr. Olsina,
Unidad de Cirugia Oncologica del Hospital della Santa
Creu IS. Pau, SA Maria Claret, 167, 08025 Barcelona,
Spain

South African Society of Radiotherapists--Oct. 22-24, Mpekweni, South Africa. 11th national congress. Contact Prof. R. Sealy, Radiotherapy Dept., Groote Schuur Hospital, Observatory 7925, South Africa.

<u>Psychologie</u> <u>et Cancer</u>--Oct. 22-24, Marseille. Contact Dr. R. Fresco, Association Psychologie et Cancers, Institut Paoli-Calmettes, 232, Bd de Ste Marguerite, 13009 Marseille, France.

IX Congress of Radiation Oncologists of India--Oct. 22-25, Srinagar. Contact Dr. B. Sanyal, Dept. of Radiotherapy, Sher-I-Kashmir Institute of Medical Sciences, Srinagar 190 011 (J&K), India.

1st Uruguayan Congress of Oncology-Oct. 22-25, Montevideo. Contact Secretaria, Juan C. Blanco 3315, Montevideo, Uruguay.

President's Cancer Panel-Oct. 23, Univ. of Pittsburgh, Scaife Hall, Lecture Room 5, 8:30 a.m., open

Clinical Dosimetry in Radiotherapy--Oct. 23, London. Contact Institute of Physical Sciences in Medicine, 47, Belgrave Square, London SW1X 8QX, UK.

Models and Mechanisms in Chemical Carcinogenesis-Oct. 23, Alghero, Italy. 4th Sardinian international meeting. Contact Dr. R. Garcea, Istituto di Patologia Generale, Via P. Manzella 4, 07100, Sassary, Italy.

<u>Cancer Congress</u>--Oct. 24-26, Damascus. Contact Secretariat, Syrian Cancer Society, PO Box 4567, Damascus, Syria.

Magnetic Resonance Imaging--Oct. 26-28, NIH Clinical Center, Masur Auditorium. NIH consensus development conference. Contact Sharon Feldman Prospect Associates, 301/468-6555.

<u>Comprehensive Approach to Cancer Care</u>: Defining Your Role--Oct. 26-28, Orlando, FL. Repeat of program sponsored by American Hospital Assn. Sept. 9-11 in Denver.

<u>Pediatric Oncology</u>.-Oct. 27, London. Contact Institute of Oncology, Marie Cure Memorial Foundation, 28 Belgrave Square, London SW1X 9QG, UK.

<u>Jornadas Nacionales de Cancerologia</u>--Oct. 27-31, Morelia, Mexico. Contact Dr. Eduardo Arana, Secretario, Sociedad Mexicana de Estudios Oncologicos, Tepic 126, 40 piso, Apartado Postal 27-100, CP 06760, Mexico. DF.

<u>Update On Common Cancer</u> for the Primary Care Physician--Oct. 29-30, San Francisco. Contact Janet Johnson, Univ. of California, Extend Programs in Medical Education, Rm U-569, San Francisco 94143.

European Society for Medical Oncology—Oct. 30-Nov. 1, Lugano. 13th congress. Contact F. Cavalli, MD, Div. of Oncology, Ospedale San Giovanni, 6500 Bellinzona, Switzerland.

The Head and Neck Cancer Patient: Special Patients with Special Needs--Oct. 31, Cleveland. Contact Dept. of Continuing Education, Cleveland Clinic Educational Foundation, 9500 Euclid Ave., Rm TT3-301, Cleveland 44106, phone (local) 444-5696; (inside Ohio) 800/762-8172; (elsewhere) 800/762-8173.

FUTURE MEETINGS

Advanced Cancer in Later Years: A Nursing Challenge --Dec. 3, Hawthorne, NY. Workshop for nurses in nursing homes. Contact Sr. Patricia Sheridan, Coordinator, Continuing Professional Education, Calvary Hospital, 1740 Eastchester Rd., Bronx, NY 10461, phone 212/863-6900.

Advances in Hematologic Malignancies and Marrow Transplantation-March 5-12, 1988, Snowbird. Utah. Arizona Cancer Center 6th winter symposium. Contact Mary Humphrey, Conference Coordinator, Arizona Cancer Center, Univ. of Arizona College of Medicine, Tucson 85724, phone 602/626-2276.

<u>Leukemia: Molecular and Cellular Perspectives</u>--March 16-19, 1988, New Orleans. Leukemia Society of America fourth national symposium. Contact Louise Toglia, National Medical Programs Coordinator, LSA, 733 Third Ave, New York 10017.

<u>Cancer Pain</u>--July 14-17, 1988, Rye, NY. 2nd international congress. Contact Mary Callaway, Memorial Sloan-Kettering Cancer Center, 1275 York Ave., New York 10021.

RFAs Available

RFA 87-CA-33

Title: Application of chelate conjugated radiolabeled monoclonal antibodies specifically to diagnostic imaging

Application receipt date: Dec. 1

The Radiation Research Program of the Div. of Cancer Treatment is inviting applications. of research in the development and use of chelate radiolabeled monoclonal antibodies conjugated diagnostic imaging, staging and monitoring of cancer therapy.

There has been an impressive advancement in the understanding of factors involved in the in vivo targeting of biologically active molecules which bind to specific recognition sites on tissues. Considerable advances have been made in the area of new radiolabeling methodologies that leave the antibodies highly immunoactive. Much needs to be done however, to optimize radiochemical labeling techniques so that normal biologic activity of the tissues is minimized. There appear to be biologic issues which need to be settled. These probably are most amenable to the development of new quantitative methodologies, either using SPECT or PET for actually estimating the fraction of the dose of labeled antibody which reaches the tumor site in vivo. Such information has important implications, both for the improvement of diagnostic imaging capabilities as well as a better understanding of the biology of immunoconjugates of all types.

It is anticipated that approximately possibly five scientifically meritorious scientifically applications can be funded.

The concept from which this RFA was derived was approved by the DCT Board of Scientific Counselors at its winter meeting and was reported in the March 6 issue of The Cancer Letter.

Requests for copies of the complete RFA may be directed to Dr. Matti Al-Aish, Diagnostic Imaging Research Branch, RRP, DCT, NCI, NIH, Landow Bldg Rm 8C09, Bethesda, MD 20892, phone 301/496-9531.

RFA 87-CA-32

Title: Epidemiologic studies of HIV associated malignancies

Application receipt date: Dec. 1

The Extramural Programs Branch, Epidemiology & Biostatistics Program, Div. of Cancer, Etiology is inviting grant applications for epidemiologic studies to establish the incidence rates, natural history and etiology of malignancies in individuals at risk for human immunodeficiency virus (HIV) infection, using immunodeficiency virus (HIV) infection, using pathologic, biologic, virologic and immunogenetic probes.

The objective of this RFA is to encourge epidemiologic research into the etiology of HIV associated malignancies. Questions of interest include whether any epidemiologic risk factor patterns or laboratory analyses suggest a mechanism carcinogenesis in contrast to other clinical outcomes of HIV infection; the relationship between severity and expression of immune alteration in HIV infected individuals and development and progression of cancer; the effect of host factors such as histocompatibility antigen polymorphisms susceptibility to HIV related malignancies; the effect of HIV antigenic variation, and coinfection with related retroviruses or unrelated viruses, on the development of specific malignancies; the relationship of acquired immunodeficiency syndrome prophylaxis and treatments, and related immune alterations, to tumor development and progression; the latency period between exposure to initiating agents and development malignancy; and the effects of drug environmental exposures.

Investigations considered responsive to this RFA

include, but are not limited to:

*Epidemiologic studies, in the diverse groups at risk for HIV infection, comparing individuals who develop malignancies to those with other outcomes of HIV infection.

*Epidemiologic studies comparing individuals HIV associated tumors to those with nonepidemic tumors of the same pathologic type, including those occurring in other immunosuppressed states.

*Epidemiologic studies of malignancies occurring in individuals receiving treatment for AIDS with particular attention to treatment related immune alterations.

The mechanism of support for this RFA will be the traditional NIH research project grant. Responsibility for the planning, direction and executive of the proposed research will be solely that of the applicant. The total project period for applications submitted in response to this RFA should not exceed five years. Approximately \$2 million will be set aside in FY 1988 to fund applications which are submitted in response to this RFA. It is anticipated that at least four or five applications will be funded. This funding level is dependent on the receipt of a sufficient number of applications of high scientific merit. The earliest feasible start date for the initial awards will be July 1, 1988.

The concept from which this RFA was derived was approved by the DCE Board of Scientific Counselors at its last meeting and was reported in the July 10 issue of **The Cancer Letter**.

For copies of the complete RFA, contact Dr. Iris Obrams, Extramural Programs Branch, EBP, DCE, NCI, NIH, Landow Bldg Rm 8C16, Bethesda, MD 20892, phone 301/496-9600.

The Cancer Letter _Editor Jerry D. Boyd

Associate Editor Patricia Williams

Published forty-eight times a year by The Cancer Letter, Inc., P.O. Box 2370, Reston, Virginia 22090. Also publisher of The Clinical Cancer Letter. All rights reserved. None of the content of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means (electronic, mechanical, photocopying, recording or otherwise) without the prior written permission of the publisher. Violators risk criminal penalties and \$50,000 damages.