CRS Report for Congress

Received through the CRS Web

Cancer Research: Selected Federal Spending and Morbidity and Mortality Statistics

Judith A. Johnson Specialist in Life Sciences Science Policy Research Division

The table below shows federal spending at the National Institutes of Health (NIH) for research on selected cancer sites. Most cancer research at NIH is conducted by the National Cancer Institute (NCI); NCI amounts are indicated in parenthesis (non-add). The estimate for FY1999 is based on the President's request.

| Cancer | FY1994 | FY1995 | FY1996 | FY1997 | FY1998 | FY1999 |
|--------------|-----------|-----------|-----------|-----------|-----------|-----------|
| | Actual | Actual | Actual | Actual | Estimate | Estimate |
| Breast | \$306.1 | \$363.9 | \$381.9 | \$411.2 | \$432.8 | \$457.9 |
| | (267.6) | (308.7) | (317.5) | (332.0) | (348.6) | (366.0) |
| Cervical | 47.6 | 53.9 | 60.2 | 65.2 | 68.1 | 72.0 |
| | (42.3) | (45.5) | (51.6) | (55.8) | (58.0) | (61.2) |
| Colo-rectal | 87.7 | 102.4 | 105.5 | 123.4 | 130.0 | 141.3 |
| | (83.1) | (96.5) | (98.0) | (103.2) | (109.0) | (117.0) |
| Lung | 120.6 | 123.2 | 127.8 | 143.4 | 150.6 | 161.3 |
| | (106.4) | (113.9) | (119.4) | (132.4) | (139.0) | (149.0) |
| Ovarian | 36.9 | 39.1 | 42.2 | 48.0 | 51.0 | 54.1 |
| | (33.5) | (33.9) | (38.5) | (41.7) | (44.2) | (46.8) |
| Prostate | 69.2 | 85.5 | 92.7 | 104.8 | 113.6 | 122.1 |
| | (56.1) | (64.3) | (71.7) | (82.3) | (89.5) | (96.0) |
| Uterine | 8.9 | 13.6 | 14.0 | 15.8 | 16.7 | 17.6 |
| | (7.2) | (7.7) | (8.1) | (8.1) | (8.3) | (8.5) |
| NIH CA Total | \$2,345.7 | \$2,434.3 | \$2,570.6 | \$2,760.7 | \$2,941.2 | \$3,231.8 |
| (NCI Total) | (2,076.2) | (2,130.3) | (2,254.9) | (2,389.1) | (2,547.3) | (2,776.3) |

Table 1. NIH Research Funding On Selected Cancer Sites\$ in millions; NCI portion of NIH total is shown in parenthesis

Source: NIH budget office, 3/3/98; and, NCI budget office, 2/5/98. Amounts for the cancer sites do not add up to the totals. In addition to funding research on many other cancer sites, NIH supports basic cancer research on prevention, nutrition, epidemiology, carcinogenesis, tumor biology, immunology, as well as research on diagnosis, treatment and rehabilitation of cancer patients.

In recent years the Department of Defense (DoD) has received funding for breast cancer research from Congress: FY1992, \$25 million; FY1993, \$210 million; FY1994, \$25 million; FY1995, \$150 million; FY1996, \$100 million; and FY1997, \$100 million for the Army-managed peer-reviewed breast cancer research program, \$12.5 million for three other DoD breast cancer projects, and \$25 million for a Defense Health program on breast cancer (non-research). Therefore the total amount provided for breast cancer programs in FY1997 at DoD was \$137.5 million. Congress also provided a total of \$45 million for prostate cancer research program and \$7 million for prostate cancer research at the Walter Reed Army Medical Center in Washington, DC. The FY1998 DoD appropriation provides \$135 million for the peer-reviewed breast cancer research program and \$25 million for prostate cancer research and \$55 million for prostate cancer diagnostic imaging. For more information, see CRS Report 96-124, *Breast Cancer Research*, and CRS Report 97-783, *Prostate Cancer*.

The following table gives estimates for the number of new cancer cases and deaths expected in 1998 for selected sites. Because a comprehensive national cancer registry does not exist in the United States, there is no way of determining the exact number of new cancer cases diagnosed each year.¹ The estimates of new cancer cases shown in the table below are based on incidence rates obtained from NCI's Surveillance, Epidemiology and End Results (SEER) program. The SEER program collects cancer data from designated population-based cancer registries in various areas in the United States. The geographic areas covered by the SEER program represent about 10% of the U.S. population. The areas have been selected to provide a subset which represents the many diverse groups in the U.S. population.

| Cancer | New Cases | Deaths |
|------------------|-----------|---------|
| Breast (female) | 178,700 | 43,500 |
| Cervical | 13,700 | 4,900 |
| Colo-rectal | 131,600 | 56,500 |
| Lung | 171,500 | 160,100 |
| Ovarian | 25,400 | 14,500 |
| Prostate | 184,500 | 39,200 |
| Uterine | 36,100 | 6,300 |
| All Cancer Sites | 1,228,600 | 564,800 |

Table 2. Estimated New Cancer Cases and Deaths Selected Sites — U.S. 1998^a

^a Landis, S.H., et al. Cancer Statistics, 1998. *CA* — *A Cancer Journal for Clinicians*, v. 48, Jan./Feb. 1998. pp. 6-29.

¹ The Cancer Registries Amendment Act (P.L. 102-515), enacted on Oct. 24, 1992, C authorized \$30 million per year for 4 years to organize a national system of statewide cancer registries. The Centers for Disease Control and Prevention (CDC) spent an estimated \$22.3 million on this program in FY1997; FY1998 funding is at the same level. In FY1997, CDC provided grants to 48 states and D.C. The program will eventually collect incidence data on 93% of the U.S. population.