



International Cancer  
Research Partnership

# The Power of the ICRP

## Portfolio Analyses: Data Harmonization Across the International Cancer Research Program

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## History

- 1998: The NCI created the “Common Scientific Outline” (CSO) – a common language for classifying cancer research
- 2000: A group of US and UK funders started applying the classification system to their portfolios
- 2003: The first ICRP database was launched containing the data of all of the partners in a publicly-accessible format (minus \$ figures)
- 2010: Operations manager appointed. Data sharing agreements signed to allow access to full datasets – including spend figures
- 2012: ICRP’s new website with analytic tools and partner networking forum due to launch (<http://www.icrpartnership.org>)



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## Membership & Mission

### Our Mission

- ICRP's mission is to add value to cancer research efforts internationally by fostering collaboration and strategic coordination between cancer research organizations.

### About Us

- ICRP currently comprises two national partnerships, the NCRI(UK) and CCRA (Canada), 10 individual funders from the U.S. including NCI/NIH and 2 other European funders, totaling more than 50 funding organizations worldwide.
- ICRP plans to expand its membership significantly in Europe and beyond.



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Directors & managers from the following organizations attend our meetings:





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## Common Scientific Outline (CSO)

Partners use the a common language, the Common Scientific Outline (CSO), to classify their research. The CSO is structured into 7 major categories:

1. Biology
2. Etiology
3. Prevention
4. Early Detection, Diagnosis, and Prognosis
5. Treatment
6. Cancer Control, Survivorship, and Outcomes Research
7. Scientific Model Systems



## 1. Biology

1.1 Normal Functioning

1.2 Cancer Initiation: Alterations in Chromosomes

1.3 Cancer Initiation: Oncogenes and Tumor Suppressor Genes

1.4 Cancer

1.5 Resources

4. Early Detection

5. Treatment

6. Cancer Control

7. Scientific

The Partners

## 6. Cancer Control, Survivorship, and Outcomes Research

6.1 Patient Care and Survivorship Issues

6.2 Surveillance

6.3 Behavior

6.4 Cost Analyses and Health Care Delivery

6.5 Education and Communication

6.6 End-of-Life Care

6.7 Ethics and Confidentiality in Cancer Research

6.8 Complementary and Alternative Approaches to Supportive Care of Patients and Survivors

6.9 Resources and Infrastructure Related to Cancer Control, Survivorship, and Outcomes Research



## Capabilities of the ICRP database

The ICRP database contains information on more than 58,000 grants and can be used to answer such questions as:

- What are the **gaps** in cancer research?
- What are the **trends** in cancer research funding?
- What **types of projects** have been funded (e.g. Clinical, Research, Training)?
- What **research areas** are being funded (CSO)?
- What **types of cancer** are being funded?
- What is the funding profile **across different countries and organizations**?
- How can we **maximize our research efforts**?
- How can we foster **strategic collaborations** between funding organizations?



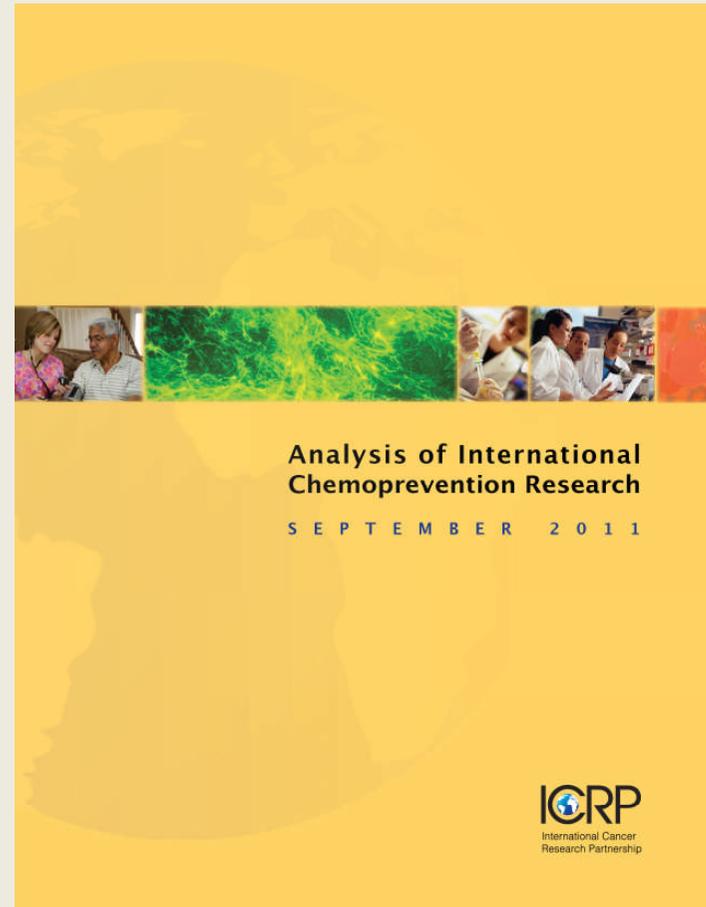
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# **Chemoprevention Joint NCI/CR-UK analysis 2009**



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- **NCI and UK's National Cancer Research Institute are members of ICRP**
- **Recently NCI and CR-UK collaborated on a report on chemoprevention in preparation for an international cancer research funders meeting**



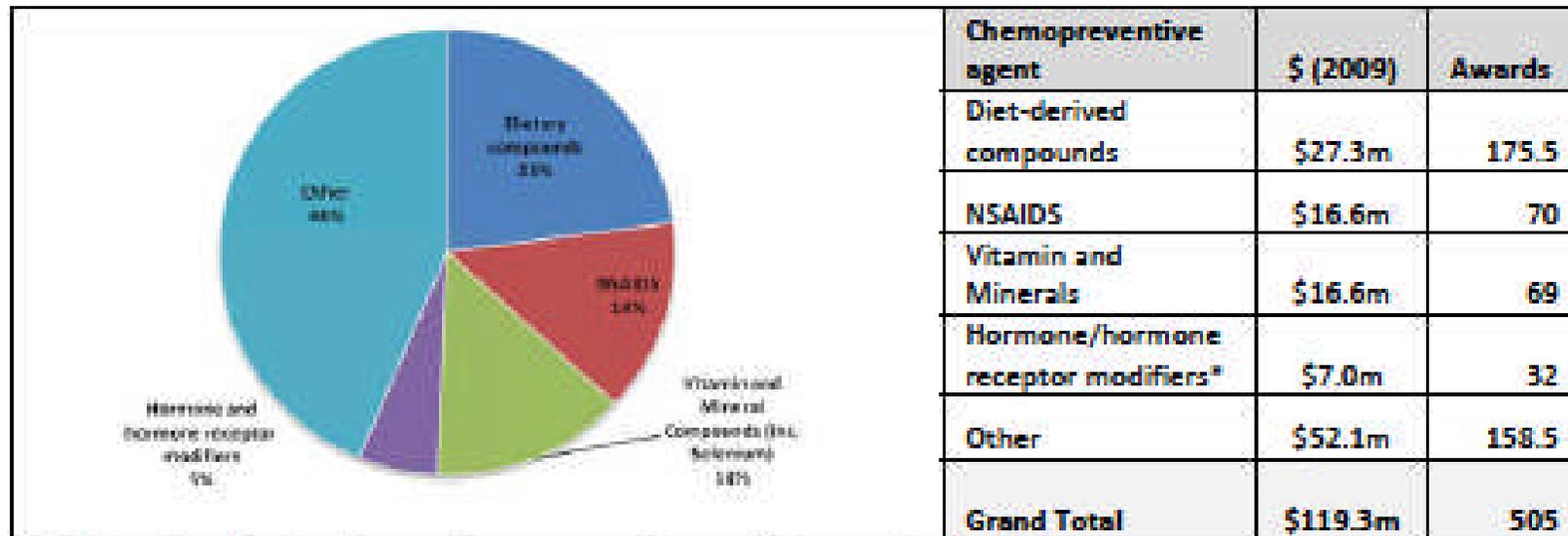


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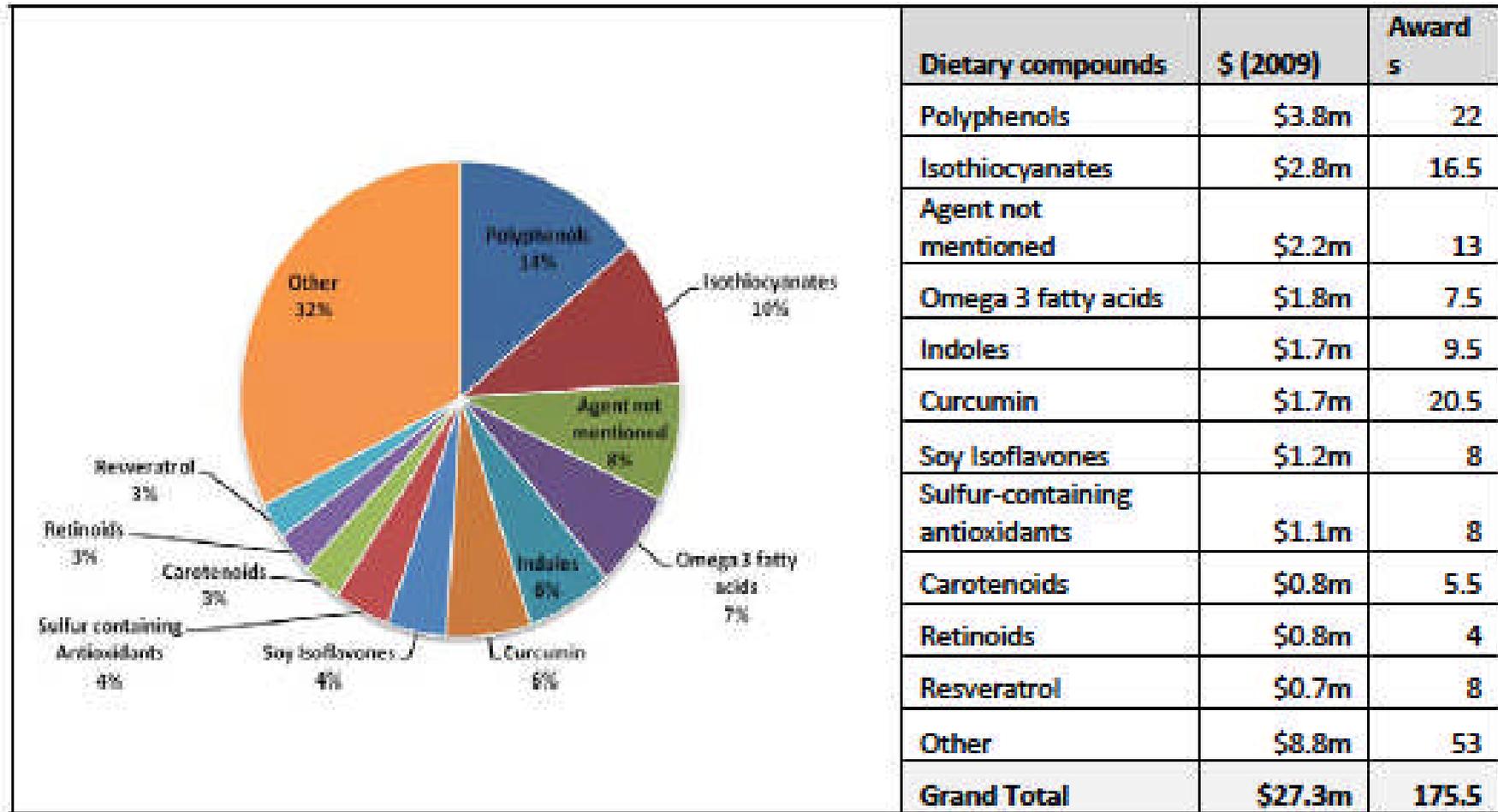
ICRP Partner <sup>4</sup>	N <sup>o</sup> of awards (2009 only)*	\$ (2009)	% of total
NIH/NCI	409	\$106,896,110	89.6%
NCRI	35**	\$4,026,755	3.4%
CDMRP(U. S. Department of Defense)	23	\$3,295,756	2.8%
Susan G. Komen for the Cure	20	\$2,916,703	2.4%
American Cancer Society	14	\$1,437,563	1.2%
KWF Kankerbestrijding / Dutch Cancer Society	2	\$229,551	0.3%
Avon Foundation for Women	1	\$300,000	0.2%
California Breast Cancer Research Program	1	\$202,732	0.2%
<b>Grand Total</b>	<b>505</b>	<b>\$119,305,170</b>	<b>100%</b>

*\*Please note that Canadian data is not available for this timeframe*

*\*\* CR-UK accounts for 16 of these awards, with an investment of \$1.9m*



\* Includes both selective oestrogen-receptor modifiers and anti-androgens





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	All ICRP Partners		NIH/NCI		Other	
	CY2009 (\$m)	% CY09	CY2009 (\$m)	% CY09	CY2009 (\$m)	% CY09
<b>Chemopreventive agent</b>						
Agent not mentioned	\$34.9m	29.3%	\$33.7m	31.6%	\$1.2m	9.3%
Dietary compounds	\$27.3m	22.9%	\$23.8m	22.3%	\$3.5m	27.9%
NSAIDS	\$16.6m	13.9%	\$14.3m	13.4%	\$2.3m	18.4%
Vitamin and Mineral Compounds	\$9.3m	7.8%	\$9.1m	8.5%	\$0.2m	2.0%
Selenium compounds	\$7.2m	6.1%	\$7.1m	6.6%	\$0.2m	1.3%
Hormone and hormone receptor modifiers	\$4.6m	3.9%	\$2.1m	1.9%	\$2.5m	20.3%
Other	\$5.6m	4.7%	\$5.1m	4.8%	\$0.5m	3.6%
Growth Factor and kinase inhibitors and enhancers	\$2.8m	2.4%	\$2.7m	2.6%	\$0.1m	0.9%
Anti-Androgens	\$2.1m	1.8%	\$1.9m	1.7%	\$0.2m	1.9%
Anti-infectious agents	\$2.8m	2.3%	\$2.4m	2.2%	\$0.3m	3.0%
Aromatase inhibitors	\$0.7m	0.6%	\$0.5m	0.5%	\$0.2m	1.5%
Ornithine decarboxylase Inhibitor	\$1.2m	1.0%	\$1.2m	1.2%	\$0	0.0%
Statins	\$1.2m	1.0%	\$1.0m	0.9%	\$0.2m	1.8%
PPAR gamma agonists	\$0.4m	0.3%	\$0.2m	0.2%	\$0.2m	1.5%
Rexanoids	\$0.7m	0.6%	\$0.6m	0.6%	\$0.1m	1.0%
BBIC	\$0.4m	0.4%	\$0.1m	0.1%	\$0.3m	2.4%
Combinations of agents*	\$0	0.0%	\$0	0.0%	\$0	0.0%
HDAC inhibitor	\$0.3m	0.3%	\$0.3m	0.3%	\$0	0.0%
P53 Suppressor/Gene Modulation	\$0.2m	0.2%	\$0.1m	0.1%	\$0.1m	0.9%
Metformin and other diabetes drugs	\$0.6m	0.5%	\$0.4m	0.3%	\$0.3m	2.3%
Target identification	\$0.2m	0.1%	\$0.2m	0.2%	\$0	0.0%
<b>Grand total</b>	<b>\$119.3m</b>	<b>100%</b>	<b>\$106.9m</b>	<b>100%</b>	<b>\$12,409,060</b>	<b>100%</b>



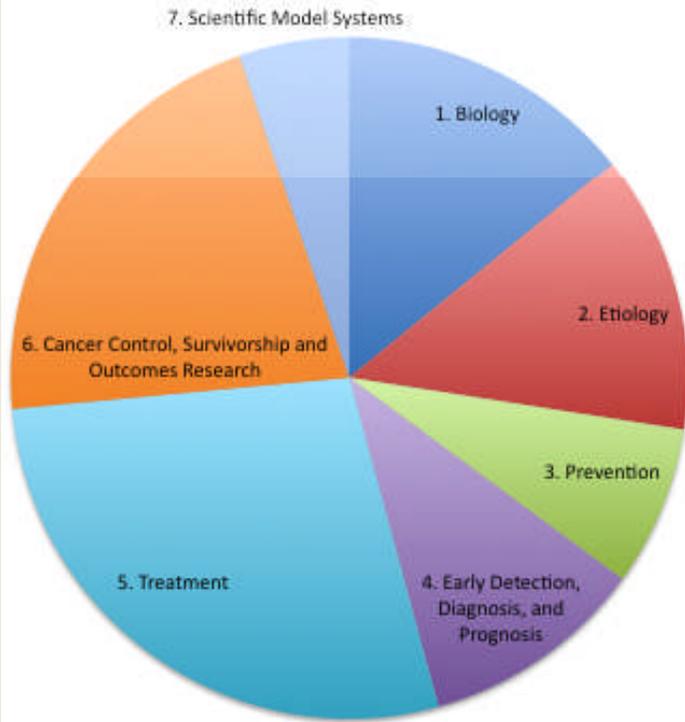
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# **BREAST CANCER AWARDS 2009**

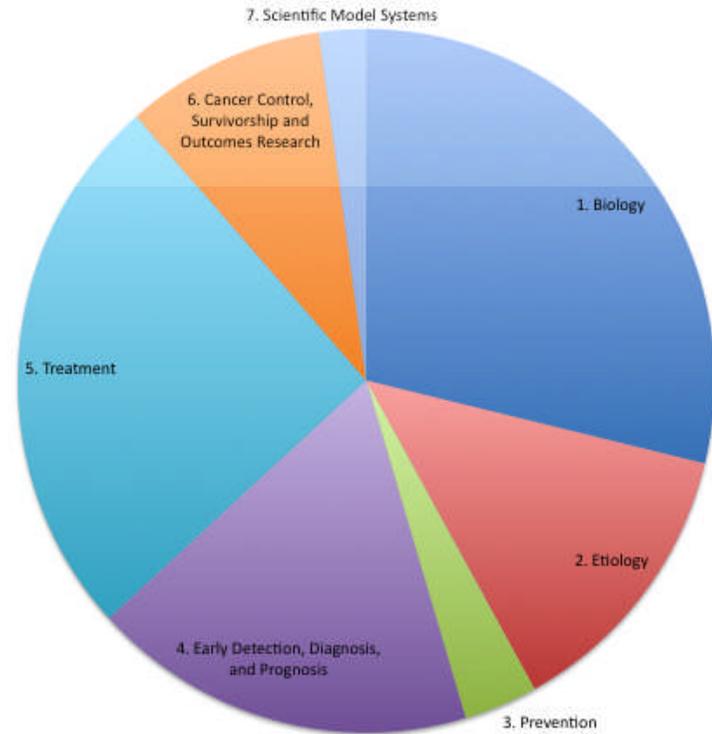


## Funding

**NCI**

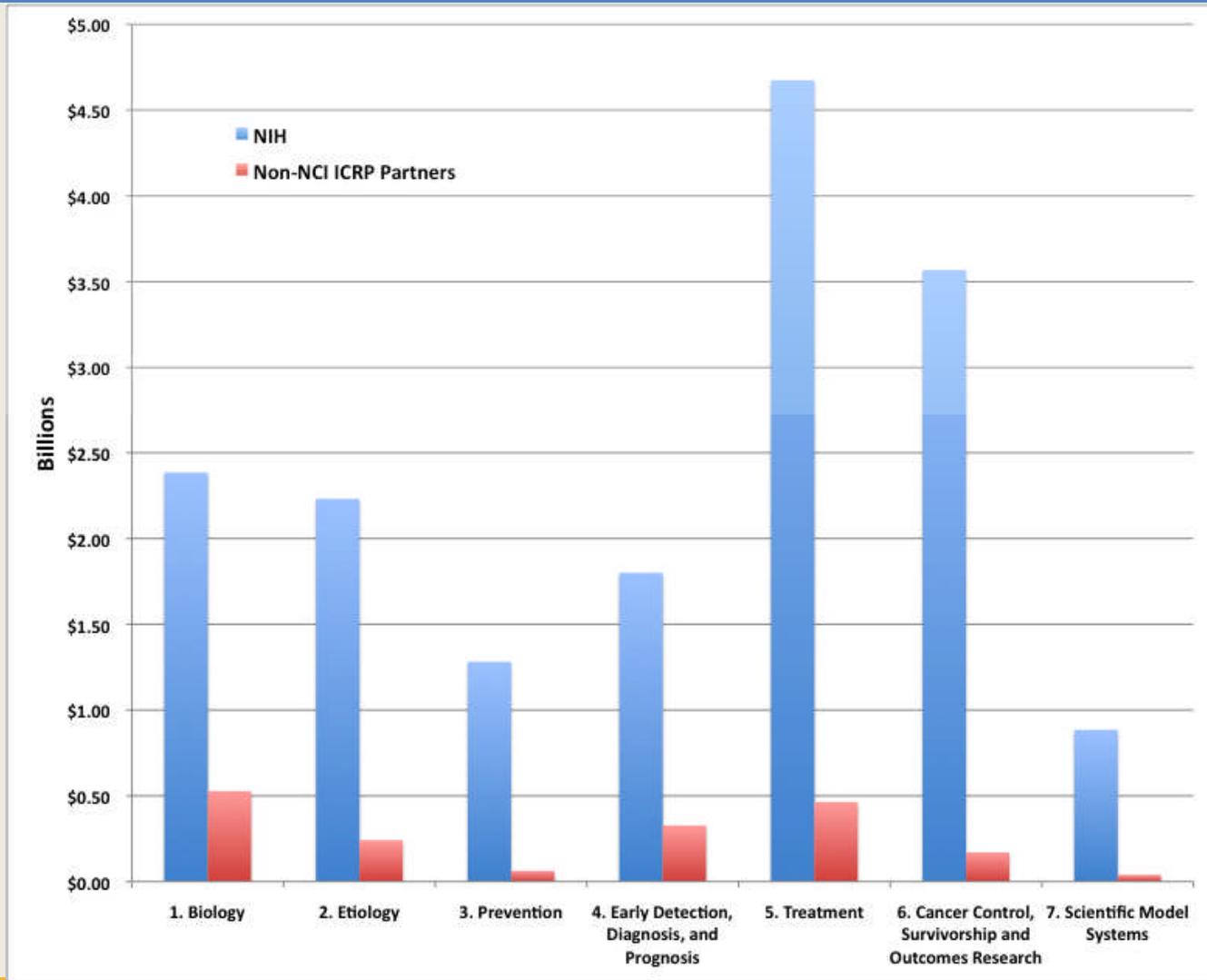


**Non-NCI ICRP Partners**





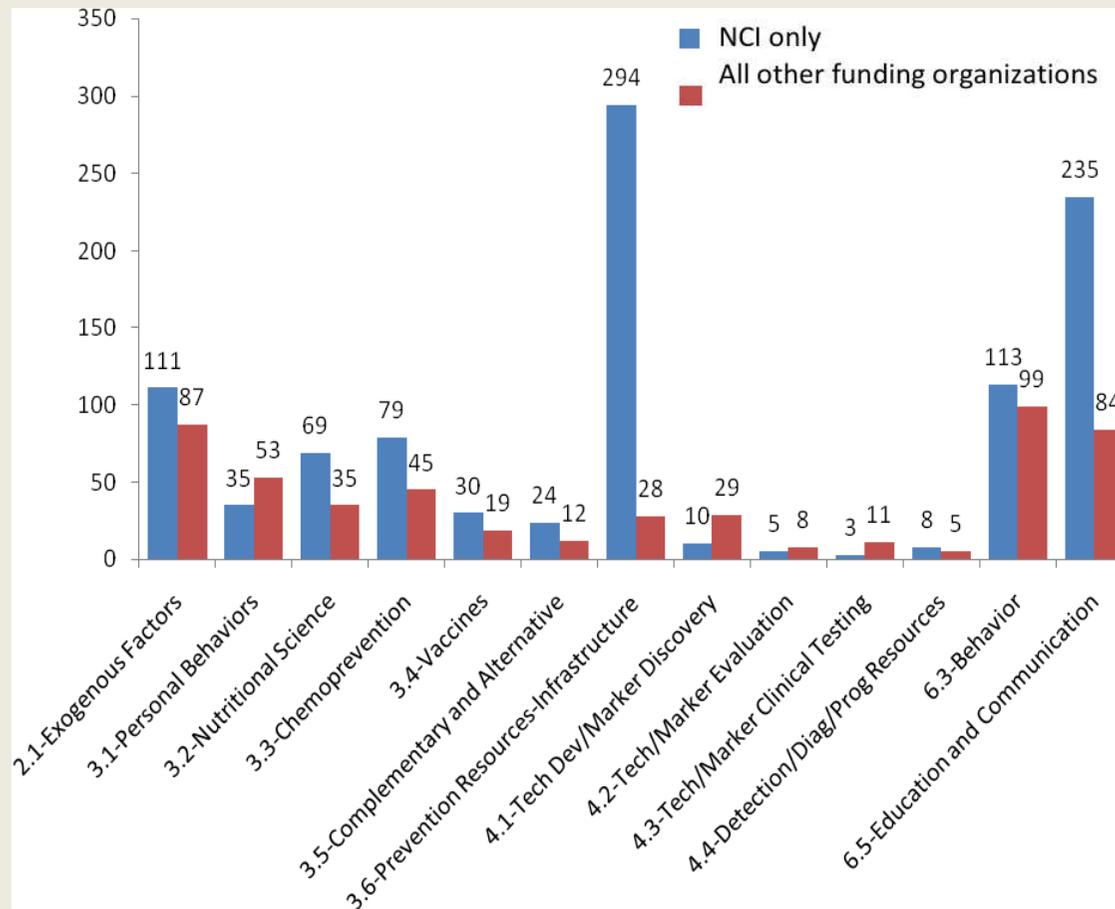
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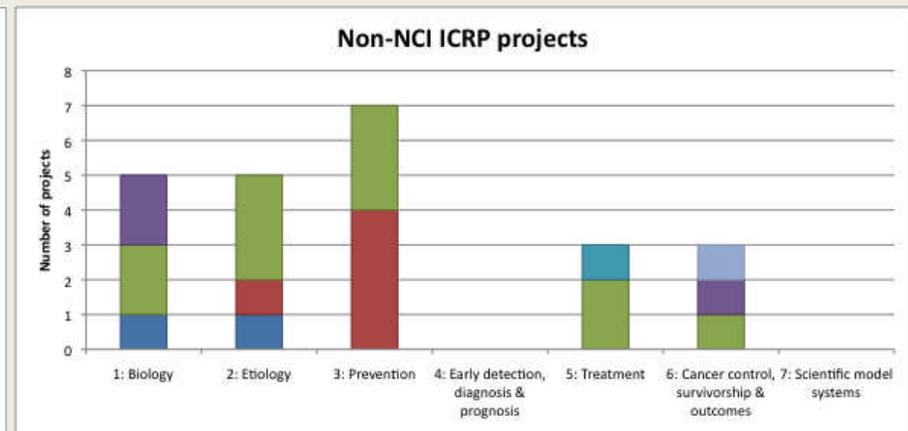
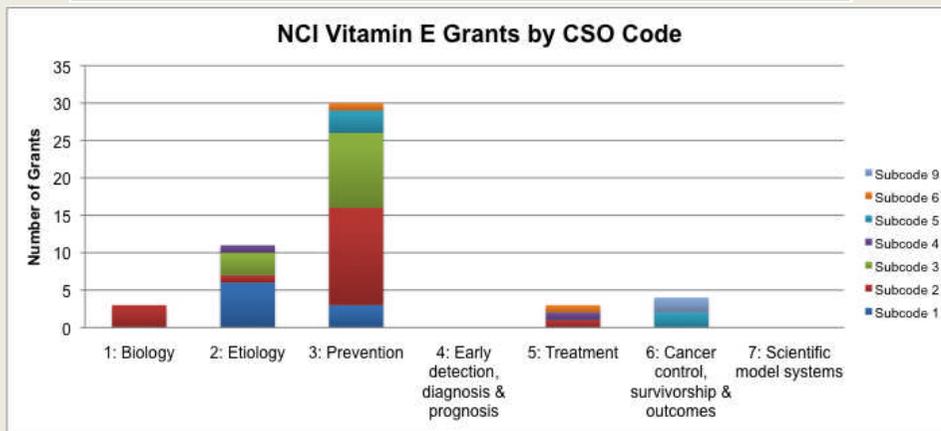
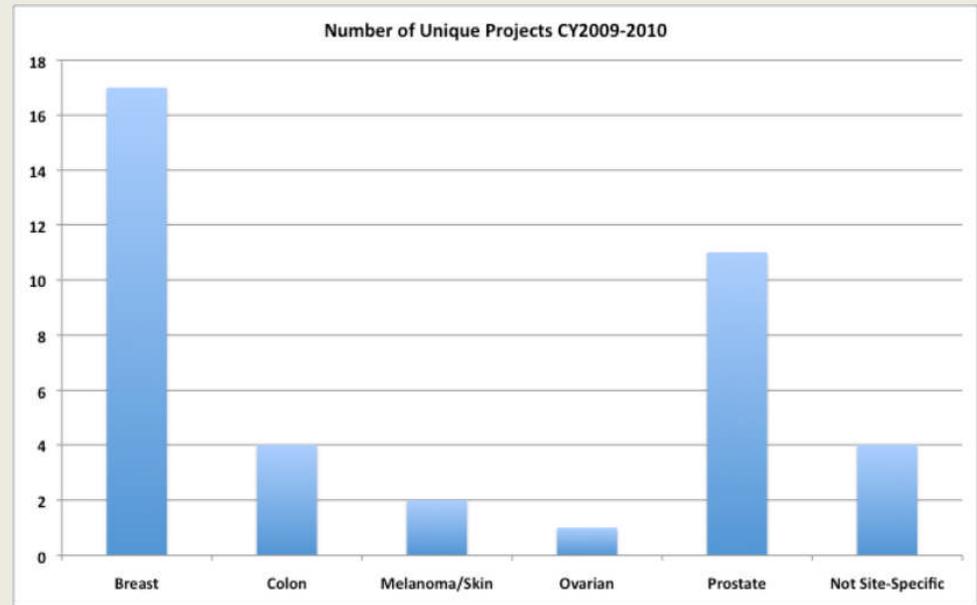
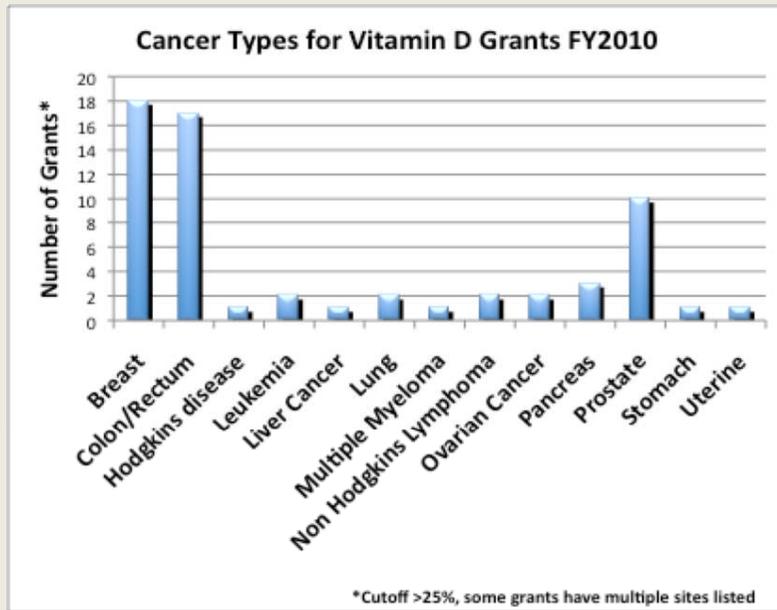
# Breast Cancer Prevention Awards FY2009





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# **Vitamin E Research FY2010**





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## Contact Us

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