Flynn Larsen of Chicago in Illinois, discuss an experiment. Beth Russell and Geoffrey Greene, PhD, co-director of the Ludwig Center at the University of Chicago in Illinois, discuss an experiment.

“Collaboration is an important part of the Ludwig model,” says McDermott. “We’re not restricted in how we use it, so we can be creative, innovative, and use as much ‘out-of-the-box’ thinking as we want to.”

Greene and his colleagues plan to use the funds to recruit senior investigators and fund new initiatives to bolster their effort to better understand the genesis, progression, and management of cancer metastasis. Other centers are focused on areas ranging from immunotherapy and stem cell research to cancer prevention and early detection.

**Budgets Up at NIH, NCI, and FDA**

After a fiscally challenging year, scientific and medical research will feel some budgetary relief with the new federal spending bill signed into law in mid-January by President Obama, totaling $1.1 trillion for fiscal year 2014. Under the new budget, the U.S. Food and Drug Administration (FDA) will receive $2.552 billion, $166 million more than its post-sequestration 2013 budget, a 7% increase. Funding for the NIH will increase by $1 billion to $29.9 billion, a 3.5% increase, and funding for the National Cancer Institute (NCI) will increase by $140 million to $4.923 billion, a 2.9% increase.

Sequestration, which amounted to a 5% reduction of the NIH FY2013 budget applied evenly across all programs, projects, and activities, had wide-ranging effects. According to NIH Director Francis Collins, MD, PhD, the cuts not only increased competition for new grants, making it harder for new investigators and new ideas to be funded, but also slashed funds from existing grants that were already operating on tight budgets.

For the FDA, the bill goes beyond the 5% reduction of NIH spending. Sequestration delayed FDA plans for new initiatives to bolster drug discovery and the recruitment and indefinitely postponed development of new centers. “Money that might have been used for new projects, new ideas, or for recruiting new investigators had to be diverted toward making up for the losses to existing labs,” says Benz.

The sequestration cuts of FY2013 came on top of budget cuts for the NIH and NCI that began in FY2011. Even without taking into account outright budget cuts, the NIH budget had not kept pace with biomedical inflation, an estimated increase in the prices of research equipment and supplies, in a decade. In January 2013, the NIH projected biomedical inflation levels of 2.7% for FY2014 and 2.9% for FY2015.

“Resources are constrained, but there is still a lot of federal and non-federal money being spent on cancer research,” says Benz. “It’s incumbent on us to find the best way to use existing funding to make the biggest impact on patients.”

**Report Links Smoking to Poor Cancer Outcomes**

Fifty years ago, the landmark 1964 report *Smoking and Health*, issued by U.S. Surgeon General Luther Terry, MD, first linked smoking to lung cancer. The latest report, issued in January by Acting Surgeon General Boris Lushniak, MD, MPH, and available at www.smokefree.gov, highlights successes of the resulting anti-tobacco movement and expands the long list of smoking-related health problems to include colorectal and liver cancers, diabetes, and rheumatoid arthritis, among others.

The comprehensive new report—the 32nd such document—is also the first to offer evidence documenting the harms of continued smoking for people with cancer. It notes that smoking increases all-cause mortality by at least 50% and cancer-specific mortality by 61% in cancer patients. Cancer survivors who
NEWS IN BRIEF

NOTED

• Woonsocket, RI–based CVS Caremark said that it will discontinue sales of tobacco products at its more than 7,600 CVS/pharmacy stores across the country by October 1, making the company the first national pharmacy chain to take this step in support of the health of its customers. “Put simply, the sale of tobacco products is inconsistent with our purpose,” said Larry Merlo, president and CEO of CVS Caremark. The move is expected to cost the company $2 billion in sales annually.

• The $1,000 human genome sequence is now a reality, according to San Diego, CA–based Illumina, Inc., making mass sequencing possible. The company’s CEO, Jay Flatley, introduced its HiSeq X sequencer, designed to process 20,000 genomes a year at a cost of $1,000 each, at the JP Morgan Chase & Co. health care conference in San Francisco, CA.

• Between 2005 and 2009, lung cancer incidence rates have dropped by 2.6% per year among men and 1.1% per year among women, according to a report from the Centers for Disease Control and Prevention. Among adults ages 35 to 44, the drop in incidence rates was even greater—6.5% per year among men and 5.8% per year among women. In all age groups, lung cancer incidence rates dropped more quickly among men than among women.

• Mylan Pharmaceuticals began marketing Hertraz (trastuzumab) in India. The drug is the world’s first biosimilar to Herceptin (Roche/Genentech).

• Due to insufficient enrollment, Aveo Oncology and Astellas Pharma have decided to discontinue a phase II trial of tivozanib in patients with locally recurrent or metastatic triple-negative breast cancer.

• In a study in the Annals of Oncology, researchers conclude that Europe may not have enough medical oncologists to keep pace with the rising toll of cancer (Ann Oncol 2014;25:525–8). The report shows that 12 countries, mostly in Western Europe, will probably have enough medical oncologists over the next 8 years, but researchers were not able to gather sufficient information from 15 other European Union members to assess their needs.

• In January, Acting Surgeon General Boris Lushniak, MD, MPH, released The Health Consequences of Smoking—50 Years of Progress, which commemorates the 50th anniversary of 1964’s Smoking and Health (above).

U.S. Surgeon General Luther Terry, MD (standing), summarizes the findings of the report Smoking and Health at a 1964 press conference. It was the first American report to conclude that smoking causes lung cancer and chronic bronchitis.

For more news on cancer research, visit Cancer Discovery online at http://CDnews.aacrjournals.org.
Report Links Smoking to Poor Cancer Outcomes

Cancer Discovery 2014;4:263-264. Published OnlineFirst February 13, 2014.

Access the most recent version of this article at:
doi:10.1158/2159-8290.CD-NB2014-017

Sign up to receive free email-alerts related to this article or journal.

To order reprints of this article or to subscribe to the journal, contact the AACR Publications Department at pubs@aacr.org.

To request permission to re-use all or part of this article, use this link http://cancerdiscovery.aacrjournals.org/content/4/3/263.2. Click on "Request Permissions" which will take you to the Copyright Clearance Center's (CCC) Rightslink site.