

National Cancer Institute



Application Catalog 2010

Cancer Prevention Fellowship Program

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health

Cancer Prevention Fellowship Program

APPLICATION DEADLINE: SEPTEMBER 1, 2009

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Website:

<http://cancer.gov/prevention/pob>

IMPORTANT DATES:

Application deadline: September 1
*All application materials must be
submitted by this date.*

One-day interview: October 22, 23, 2009

Notification: November 2009

Appointment starts: June 21, 2010

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Cancer Prevention Fellowship Program 2008



Row One: Tram Lam, Brid Ryan, Adeyinka Laiyemo, Kathryn Weaver, Amanda Black, Dana van Bommel, Jessica Faupel-Badger

Row Two: Sylvia Chou, Sharon Glynn, Genevieve Dunton, Joanne Watters, Jill Koshiol

Row Three: Erika Waters, Peko Tsuji, Paul Doria-Rose, Roycelynn Mentor-Marcel

Row Four: Yvonne Hunt, Elizabeth Hsu, Gwen Murphy

Row Five: Shahinaz Gadalla, Helen Sullivan, Goli Samimi, Salma Shariff-Marco, Gretchen Gierach

Row Six: Gerd Bobe, James McClain, Jonathan Wiest

Not Pictured: Rosemary Braun, Lisa Chu, Sanjeeve Balasubramaniam, Roberto Flores, Brandy Heckman, Paula Hyland, Corinne Leach, Shih-Wen Lin, Isaac Mwase, David Portnoy, Elizabeth Jill Ruder, David Wheeler, Stephan Woditschka, Tiffany Bates, Blanca Bonilla, Ellen Jaffe, David Nelson

DIRECTOR'S MESSAGE

Preventing cancer is one of the most important scientific and public health goals of the 21st Century. To achieve that goal, the Nation needs leaders: scientists and health professionals trained in the principles and practice of cancer prevention and control. At the National Cancer Institute (NCI) the Cancer Prevention Fellowship Program (CPFP) provides state-of-the-art training in cancer prevention and control.

The centerpiece of the CPFP is mentored research at the NCI. With input from senior scientific mentors and from program scientific staff, each fellow develops original scientific projects and reports findings at scientific meetings and in leading journals. The primary goal is for each fellow to develop an independent research program in cancer prevention.

Research opportunities for Cancer Prevention Fellows reflect the broad origins and applications of many biomedical sciences relevant to public health and clinical medicine. Opportunities exist for basic science laboratory studies, clinical studies, epidemiologic studies, intervention trials, and studies of the biological and social aspects of health behavior. Examples of specific research opportunities and individual mentors at the NCI are found in this catalog and on our website. Further, an initiative of the NCI and the Food and Drug Administration (FDA) affords fellows the prospect of applying research in drugs, biologics, or medical devices to the field of cancer prevention.

The CPFP also offers an opportunity for fellows to receive a Master of Public Health (M.P.H.) degree at any 12-month accredited program in the United States. Other educational activities include

the NCI Summer Curriculum in Cancer Prevention, weekly seminars, and professional development workshops.

Our program is regularly evaluated and growing. Our alumni can be found across the country taking the lead at cancer centers, universities, government agencies, research firms, policy organizations, and in clinical practice. Many former fellows now act as mentors, assisting those who are following in their footsteps.

As Director of the CPFP, I am committed to providing a comprehensive postdoctoral program that is flexible enough to permit individual creativity and resourceful enough to provide opportunities for meaningful discoveries. Structured to promote a collaborative spirit of fellowship, the program recruits diverse applicants. We work hard to provide an equitable and competitive application process. We believe that the CPFP provides a solid foundation upon which fellows can build knowledge and experience and become leaders.

On behalf of all of us who are committed to eliminating death and suffering from cancer—patients, physicians and nurses, researchers, other scientists, and the general public—I urge you to join us in this endeavor. Please read the eligibility requirements and submit your application. We look forward to hearing from you.

David E. Nelson, M.D., M.P.H.

*Director, Cancer Prevention Fellowship Program
National Cancer Institute*



Program Description

Overview

The overarching goal of the CFPF is to provide a strong foundation for scientists and clinicians to train in the field of cancer prevention and control. As part of the program, we offer training toward an M.P.H. degree at an accredited university during the first year, followed by mentored research with investigators at the NCI. Outstanding opportunities for cutting-edge research in the basic, quantitative, social and behavioral sciences, and in clinical cancer prevention have been the hallmarks of the CFPF since its inception in 1987. Furthermore, a partnership between the NCI and FDA provides opportunities for prevention research in drugs, biologics, and medical devices. Other educational opportunities are provided throughout the fellowship to complement the research training, including the NCI Summer Curriculum in Cancer Prevention; the Molecular Prevention Laboratory; the NCI Cancer Prevention and Control Colloquia Series; and the weekly Fellows' Research Meeting. Additional leadership and professional development training opportunities are available with the NCI and elsewhere. These aspects of the program, as well as eligibility requirements, application procedures, selected bibliography of current and former fellows' recent publications, and a glimpse at life in the Washington, D.C. area are described in this catalog. Additional information about the CFPF can be found on our website at <http://cancer.gov/prevention/pob>.

Master of Public Health

One of the unique features of the CFPF is the opportunity to receive formal, academic training in public health. By pursuing an M.P.H. degree, fellows learn about the current role of cancer prevention in public health and understand cancer prevention in the historical context of public health. The M.P.H. provides individuals with a strong foundation in the quantitative sciences of epidemiology and biostatistics. Fellows who already possess an M.P.H. degree, a Dr.P.H. degree, or a Ph.D. degree in biostatistics or epidemiology typically come directly to the NCI to begin their research.

Once accepted into the CFPF, each fellow is responsible for arranging admission to a university offering an M.P.H. program that can be completed in 12 months or less. The NCI will pay the tuition, fees, book allowance, and fellow's stipend during this year. It is expected that all M.P.H. requirements will be completed by the start of the NCI Summer Curriculum in Cancer Prevention.

Fellows pursuing an M.P.H. degree are required to remain in the CFPF for a period twice the length of time of the M.P.H. training or to reimburse the Government the cost of the training and expenses. For example, attending a 12-month M.P.H. program requires a 24-month payback.

It is the fellow's responsibility to check with the university about admission, courses, and GRE requirements, as well as to ensure that the M.P.H. can be completed within the one-year time frame. Typically, universities require mathematics, biology, and chemistry courses at the undergraduate level; a current (usually within 5 years) GRE score; and completion of the TOEFL (for foreign education) before acceptance into an M.P.H. program. The MCAT is the equivalent GRE requirement for physicians. To obtain information about the GRE, call (609) 771-7670; write to the Graduate Record Examination, P.O. Box 6000, Princeton, NJ 08541-6000; or visit the website <http://www.gre.org>.

Listed below are examples of one-year accredited M.P.H. programs (as of February 2009) with their application due dates. Cancer Prevention Fellows have graduated from the universities marked **.

For additional and updated information on M.P.H. programs, refer to the Association of Schools of Public Health website <http://www.asph.org>.

- Harvard University** (December 15)
- Johns Hopkins University** (December 1)
- Tulane University** (January 5)
- Uniformed Services University of the Health Sciences** (January 15)
- University of Kansas Medical Center (March 31)
- University of Minnesota** (Priority December 15; Final April 15)
- University of Southern Mississippi (April 15)
- Virginia Commonwealth University (December 15)
- Yale School of Public Health (January 15)

Mentored Research

Under the shared guidance of an individual NCI preceptor and the CFPF scientific staff, fellows will develop original research projects in cancer prevention and control. An overview of the preceptorships is provided in this catalog (refer to *Preceptorships* section), and a more complete listing is provided on our and other NCI websites.

<http://cancer.gov/prevention/pob>

<http://ccr.cancer.gov/>

<http://cancercontrol.cancer.gov/index.html>

<http://dceg.cancer.gov/>

Collaboration with investigators throughout the NCI is encouraged. Research opportunities include, but are not limited to:

- Biomarker development
- Chemoprevention studies
- Clinical cancer prevention research
- Effectiveness and outcomes research
- Epidemiology (clinical, environmental, genetic, molecular, nutritional)
- Ethics and evidence-based decision making (theoretical and practical studies)
- Health disparities and special populations
- Laboratory-based research (chemoprevention, molecular biology and genetics, nutritional science)
- Screening and early detection
- Social and behavioral research
- Statistical methodology (biometry and bioinformatics)

Additional Research Opportunities

IRELAND-NORTHERN IRELAND-NCI CANCER CONSORTIUM

The NCI has formed a multilateral partnership with Ireland and Northern Ireland to promote cooperation in all aspects of cancer research, treatment, and prevention. As part of this Ireland-Northern Ireland-NCI Cancer Consortium, the CFPF is open to applicants from Ireland and Northern Ireland. It is intended that individuals applying through the Consortium will pursue careers in cancer prevention in Ireland or Northern Ireland upon completion of the fellowship.



“The CFPF is an outstanding program—recognized throughout the U.S. and further afield as a standard of excellence. As Fellows we are afforded extraordinary freedom to explore opportunities across disciplines and fields within the NCI, all with the unwavering support of the CFPF staff. I know of no program like it for quality of training and mentoring offered as well as camaraderie between Fellows.”

Gwen Murphy, Ph.D., M.P.H.,
Current Fellow, Cancer Prevention
Fellowship Program

The program provides M.P.H. training in Ireland or Northern Ireland (year 1), the Summer Curriculum in Cancer Prevention, and mentored research at the NCI (years 2–4). If the applicant already possesses an M.P.H. degree and a primary degree in a health-related discipline or a Ph.D. in epidemiology or biostatistics, the fellowship will typically begin directly at the NCI (years 1–3).

To be eligible to apply through the Consortium, the applicant must:

- Possess a doctoral degree (M.D., Ph.D., J.D., or equivalent) or expect to complete the degree requirements by the start date of the fellowship. Assurance that all requirements will be completed must be supplied in writing by the chair of the dissertation committee (e.g., Ph.D. candidates) or dean of the school (e.g., M.D. candidates).
- Be an Irish citizen of the Republic of Ireland, UK citizen of Northern Ireland, or a citizen of the European Union (EU) currently employed on the island of Ireland. Proof of citizenship (birth certificate or passport) and proof of employment in Ireland or Northern Ireland is required.
- *For Northern Ireland applicants:* Be employed by the Health and Social Care (HSC) Research and Development Office of Northern Ireland; by voluntary, not-for-profit organizations in Northern Ireland involved in health or social care provision; by Queens University, Belfast or by University of Ulster. Applicants must be eligible to acquire a J-1 visa from the relevant U.S. Embassy or Consulate. It is the responsibility of the applicant to ensure that he/she will, in principle, satisfy the visa requirements before submitting an application.



"The opportunities for scientific training and professional growth provided by the Cancer Prevention Fellowship Program are limitless."

Amanda Black,
Ph.D., M.P.H.,
Current Fellow,
Cancer Prevention
Fellowship Program

The Consortium will provide funds to attend an interview at NCI, if invited; M.P.H. training in Ireland/Northern Ireland; stipend; move to the U.S. and return; health insurance; and one scientific meeting per year while at the NCI.

Prior to applying to the CFPF through the Consortium, applicants must contact the Health Research Board or HSC Research & Development Office (refer to *Consortium Contact Information*) to ensure that eligibility criteria are satisfied. Applicants should allow sufficient time to obtain

approval through the Consortium prior to the September 1, 2009 application deadline.

Consortium Contact Information

Health Research Board

Sallyann O' Brien, Ph.D.
Project Officer
Research Infrastructure and
Special Initiatives Unit
Health Research Board
An Bord Taighde Sláinte
73 Lower Baggot Street
Dublin 2, Ireland
Telephone 353 1 2345 211
Fax 353 1 613 0179
Email saobrien@hrb.ie

HSC Research & Development Office

Dr. Nicola Armstrong
Programme Manager
12-22 Linenhall Street
Belfast BT2 8BS, Northern Ireland
Telephone 44-28-90553617
Fax 44-28-90553674
E-mail nicola.armstrong@rdo.n-i.nhs.uk

NCI-FDA JOINT TRAINING IN CANCER PREVENTION

Cancer Prevention Fellows are eligible to participate in the NCI-FDA joint training in cancer prevention initiative. This component of the CFPF provides training in cancer prevention and in the development and approval processes of drugs, biologic agents, devices, or nutritional products. The program's interdisciplinary training will enable scientists to more rapidly move novel chemopreventive agents and early detection methods from the laboratory to the community.

Background and Rationale. In 2003, the NCI Director and the FDA Commissioner joined forces to more rapidly identify effective cancer preventive agents and cancer treatments, thereby accelerating the process of introducing new agents into the clinic. Arising from this joint commitment was an initiative to train postdoctoral scientists and clinicians in research in cancer prevention, drug development, and regulatory review. Research training opportunities exist in several centers at the FDA in the areas of biologics (Center for Biologics Evaluation and Research (CBER)), drugs (Center for Drug Evaluation and Research (CDER)), medical devices and imaging (Center for Devices and Radiologic Health (CDRH)), and nutrition science and policy (Center for Food Safety and Nutrition (CFSAN)).

The NCI-FDA joint training in cancer prevention initiative will provide the opportunity for fellows to participate in all the activities of the CFPF at the NCI and in research and product development and regulatory review at the FDA. Combining training in public health, cancer prevention, and product development and regulatory research will allow individuals to develop expertise across three disciplines. This offers the possibility of developing novel agents and products, designing and implementing clinical trials in chemoprevention and early detection, and advancing the nutritional sciences.

Research Opportunities. General categories of research topics include:

- Cancer risk of drug, device, and gene therapy products
- Cellular substrates in vaccine development
- Clinical trial design and analytic methodology
- Development and selection of biomarkers and clinical endpoints in clinical trials
- Development of chemopreventive agents
- Genetic toxicology and cancer prevention
- Genomic and proteomic approaches to early detection of cancer
- Molecular and genetic approaches in product development
- Nutrition science and policy
- Screening and early detection
- Vaccination and cancer prevention

Further information is available at

<http://iotftraining.nci.nih.gov/prevent.html>.

CLINICAL CANCER PREVENTION RESEARCH

Clinicians have the opportunity to participate in multidisciplinary research, the hallmark of the CFPF, in order to help bridge the gap between clinical and pre-clinical cancer prevention science.

Background and Rationale. Clinical research is fundamental to the practice of cancer prevention. Over the past decades, with advances in the basic sciences, innovations in bioengineering, and findings from epidemiologic studies, the multidisciplinary field of cancer prevention has flourished. Through clinical research, the application of these discoveries has led to the identification of effective chemopreventive agents, novel early detection technologies, and recognition of individuals at high risk of developing cancer. Additionally, clinical intervention trials, as exemplified in the nutritional and behavioral sciences, have yielded successful cancer prevention strategies.

The design, implementation, analysis, and interpretation of clinical prevention studies is a relatively new research area for which few clinicians are adequately trained. The opportunity now exists within the CFPF for postdoctoral clinicians, including physicians, nurses, psychologists, and pharmacists, to combine formal training in clinical research methodology with their clinical acumen and interest in cancer prevention.

Research Opportunities.

General categories of research topics include:

- Behavioral intervention research
- Biomarker development
- Clinical studies in high-risk populations
- Clinical trials of chemopreventive agents
- Design and analysis of prevention trials
- Epidemiology (clinical, molecular, genetic, nutritional, environmental)
- Ethical issues in clinical prevention
- Ethics and evidence-based clinical decision making (theoretical and practical studies)
- Evaluation and outcomes research of clinical prevention practices
- Health disparities and special populations research
- Laboratory-based research (chemoprevention studies, molecular biology and genetics, molecular carcinogenesis, nutritional science)
- Nutritional intervention studies
- Screening and early detection trials
- Studies of genetic susceptibility and cancer



"The CFPF is a superb training program. It has given me the opportunity to work with leading researchers across various disciplines and to capitalize on the immense data resources at the NCI. Most importantly, the program has offered me the support and freedom to pursue my own research interests."

Paul Han, M.D., M.A., M.P.H.,
Fellow Alumnus,
Division of Cancer Control and
Population Sciences, NCI

Master in Clinical Investigation

Fellows pursuing clinical cancer prevention research or participating in the NCI-FDA joint training in cancer prevention may elect to obtain a master's degree in clinical investigation (M.S.) or public health (M.P.H.).

Once accepted into the CFPF, each fellow is responsible for arranging admission to an accredited university offering a master's program that can be completed in 12 months or less. The NCI will pay the tuition, fees, book allowance, and fellow's stipend during this year. It is expected that all master's degree requirements will be completed by the start of the NCI Summer Curriculum in Cancer Prevention.

Fellows pursuing a master's degree are required to remain in the CFPF for a period twice the length of time of the master's training or to reimburse the government the cost of the training and expenses. For example, attending a 12-month M.S. program requires a 24-month payback.

Located to the right are some of the accredited institutions currently offering a one-year master's program in clinical investigation (as of February 2009), the degree offered, and the application due date. Individuals wishing to attend an institution not listed below should contact the CFPF staff prior to application to the master's degree program. It is the responsibility of each fellow to ensure that the master's degree training can be completed within the one-year time frame.

Boston University School of Medicine

M.A. in Clinical Investigation (April 15)

Columbia University School of Public Health

M.S. in Biostatistics:

Clinical Research Methods Track (January 5)

Duke University Medical Center

M.H.S. in Clinical Research (December 15)

Harvard School of Public Health

M.P.H. in Clinical Effectiveness (February 1)

NIH Warren G. Magnuson Clinical Center/ Duke University Medical Center

M.H.S. in Clinical Research (March 1)

Stanford University Clinical Research Training Program

M.S. in Clinical Epidemiology (January 13)

The Johns Hopkins Schools of Medicine and Public Health

M.H.S. in Clinical Investigation (March 1)

University of Alabama at Birmingham

M.S.P.H. in Clinical Studies (January 30)

University of Minnesota School of Public Health

M.S. in Clinical Research (December 15)

University of Virginia

M.S. in Health Evaluation Sciences:
Clinical Investigation Track (March 1)



**2008 Annual Advances Keynote Speaker
and CFPF Scientific Staff**

Row 1: Jackie Lavigne, Ph.D., M.P.H., Patricia Ganz, M.D.,
Jessica Faupel-Badger, Ph.D., M.P.H.,

Row 2: Jonathan Wiest, Ph.D., David E. Nelson, M.D., M.P.H.

NCI Summer Curriculum in Cancer Prevention

Principles and Practice of Cancer Prevention and Control Course. This four-week summer course provides specialized instruction in the principles and practice of cancer prevention and control. It focuses on concepts, methods, issues, and applications related to this field. Participants will gain a broad-based perspective in terms of available resources, scientific data, and quantitative and qualitative methods. The course is divided into the following modules:

- Introduction to the Cancer Problem
- Cancer Prevention:
An International Perspective
- Application of Cancer Prevention Methods
- Diet and Cancer Prevention
- Behavioral Science and
Community Interventions
- Ethics, Law, and Policy in Cancer
Prevention and Control
- Epidemiology, Prevention, and
Control of Site-Specific Tumors
- Annual Advances in Cancer Prevention
- Health Disparities and Cancer
Prevention in Diverse Populations
- Occupational Cancer
- Disseminating Scientific Knowledge

Molecular Prevention Course. This one-week course on molecular aspects of cancer prevention follows the *Principles and Practice of Cancer Prevention and Control* course. It provides a strong background in the molecular biology and genetics of cancer and an overview of basic laboratory approaches applied to cutting-edge research in the fields of molecular epidemiology, chemoprevention, biomarkers, and translational research. The following topics will be presented:

- An Overview of Carcinogenesis
- Oncogenes, Tumor Suppressor Genes,
and Other Cancer-Related Genes
- Animal Models for Cancer Prevention Studies
- Methylation as a Target for Chemoprevention
- Xenobiotic Metabolism and
Cancer Susceptibility
- Hormonal Carcinogenesis
- The Immune System as a Target for
Vaccine and Prevention Approaches
- Cancer from a Biosystem Perspective
- The Role of Inflammation in Cancer
- New Approaches to Imaging Cancer Processes
- Application of Genomics and Proteomics
to Cancer Prevention Research
- Microarray Approaches in Cancer Prevention
- Molecular Epidemiology: The Integration of
Molecular Markers into Population Studies

Annual Advances in Cancer Prevention Lecture.

A special keynote lecture became part of the NCI Summer Curriculum in Cancer Prevention in 2000. The lecture is held the last week of July at Lister Hill Auditorium, National Library of Medicine, Bethesda, Maryland. The keynote speaker, date, and time will be announced on our website.



In 2008, Patricia Ganz, M.D., Professor of Health Services in the School of Public Health, Professor of Medicine in the David Geffen School of Medicine at UCLA and Vice Chair of the Department of Health Services, Los Angeles, CA,

presented, "Cancer Survivors: Charting an Agenda for Research, Treatment, and Quality of Care."



In 2007, Barnett S. Kramer, M.D., MPH, Associate Director for Disease Prevention and Director of the Office of Medical Applications of Research in the Office of Disease Prevention, Office of the Director, National

Institutes of Health, Bethesda, MD, presented "Cancer Prevention: Distinguishing Strength of Evidence from Strength of Opinion."



In 2006, Frank L. Meyskens, Jr., M.D., Professor of Medicine and Biological Chemistry; Director, Chao Family Comprehensive Cancer Center; Senior Associate Dean of Health Sciences, University of California, Irvine,

CA, presented "The Promises and Perils of Clinical Chemoprevention: 1980–2030."



In 2005, John Potter, M.B.B.S., Ph.D., Senior Vice President and Division Director, Fred Hutchinson Cancer Research Center, Seattle, WA, presented "What We Know and Don't Know About Colorectal Neoplasia."



In 2004, Waun Ki Hong, M.D., American Cancer Society Professor; Samsung Distinguished University Chair in Cancer Medicine at the University of Texas M. D. Anderson Cancer Center, Houston, TX, presented "Convergence

of Molecular Targets for Cancer Prevention and Therapy."



In 2003, Elio Riboli, M.D., Sc.M., M.P.H., Chief, Unit of Nutrition and Cancer at the International Agency for Research on Cancer, Lyon, France, presented "Cancer Prevention: A European Perspective."



In 2002, Leslie Bernstein, Ph.D., AFLAC, Inc., Chair in Cancer Research; Professor, Preventive Medicine; and Senior Associate Dean, Faculty Affairs at Keck School of Medicine, University of Southern California,

Los Angeles, CA, presented "Cancer Prevention: Opportunities for Action."



In 2001, Frederick P. Li, M.D., Chief, Cancer Control Program, Division of Cancer Epidemiology and Control, Adult Oncology Department at Dana-Farber/Harvard Cancer Center, Boston, MA, presented

"The Identification and Care of Those at Highest Risk of Cancer."



In 2000, Bernard Levin, M.D., Professor of Medicine at the University of Texas M. D. Anderson Cancer Center, Houston, TX, presented "Cancer Prevention: What is the Future?"

The Faculty. NCI Summer Curriculum in Cancer Prevention faculty consists of approximately 85 leading scientists at NCI, NIH, other government agencies, academia, cancer centers, and public and private organizations throughout the United States. The faculty is listed on our website <http://cancer.gov/prevention/pob>. The courses are designed to provide an interactive training experience to allow participants to develop a thorough knowledge of the activities in cancer prevention and control.

Eligibility. *Both courses are open to physicians, scientists, and other health care professionals who have an interest in cancer prevention and control. Acceptance into the CFPF is not necessary for participation in either course. Individuals from cancer centers, universities, health departments, industry, U.S. Federal Government, and from across the United States and around the world have previously attended.*

Recommended prerequisite courses are epidemiology, biostatistics, and cancer biology. Preference is given to individuals with a doctoral degree and/or relevant experience in cancer prevention and control. There is no cost to register or to participate in either course. Room, board, and transportation expenses are the responsibility of the participant. The NCI Office of International Affairs (OIA) has a limited amount of funding available for individuals from developing countries. International participants interested in financial support should contact the OIA by February 15.



Molecular Prevention Course Participants 2008

Dates/Times/Location. *The Principles and Practice of Cancer Prevention and Control* course is four weeks long and usually offered from July through early August. The *Molecular Prevention* course is a one week course usually offered in early August.

Both courses are held in Rockville, Maryland. Lectures are scheduled Monday through Friday, 8:30 am–2:30 pm (occasionally lecture times will vary).

Registration. Registration is required due to space limitations. The registration period ends February 15. Preference is given to individuals with a doctoral degree or relevant experience in cancer prevention and control. To register, please e-mail, fax, or mail your request to the Program Coordinator (refer to *Contact Information*, located to the right). The following information is required:

- Curriculum vitae (include complete work address, telephone, fax, and e-mail)
- Letter of nomination from the director of your institute or department on official letterhead
- Course title (e.g., *Principles and Practice of Cancer Prevention and Control* course, *Molecular Prevention* course, or both courses)

Registrants will be notified of their status after all materials have been received and reviewed.

Additional Requirements for International Participants Applying for Funding. Please send the following in addition to the 3 documents requested:

- Copy of doctoral degree, and/or Dr.P.H. and M.P.H. degrees (in original language with English translation, if necessary)
- Letter stating your proficiency in written and spoken English

Limited funding for living expenses may be available for applicants from low, middle, and upper-middle income countries, or institutions in resource poor settings, who register for both courses (The *Principles and Practice of Cancer Prevention and Control* course and the *Molecular Prevention* course), or just the 4-week course (The *Principles and Practice of Cancer Prevention and Control* course). Funding will not be provided for the 1-week *Molecular Prevention* course alone.

Registration will close on February 15 for International participants. This is to allow ample time for visa processing and other logistical requirements. Applicants will be notified about their funding level by the Director, Office of International Affairs, NCI.

Contact Information:

Program Coordinator
NCI Summer Curriculum in Cancer Prevention
6120 Executive Boulevard (EPS)
Suite 150E, MSC 7105
Bethesda, MD 20892-7105
Telephone (301) 496-8640
Fax (301) 480-2669
E-mail cpfpcoordinator@mail.nih.gov

For further information, please visit our website <http://cancer.gov/prevention/pob>

If you are a person with a disability and require any assistive device, services, or other reasonable accommodation to participate in these activities, please contact the CPFP Office at (301) 496-8640 at least one week in advance of the lecture date to discuss your needs.

Other Program Components

MOLECULAR PREVENTION LABORATORY COURSE

Along with participation in the Summer Curriculum in Cancer Prevention, all fellows at the NCI take part in the *Molecular Prevention Laboratory* course, a hands-on laboratory experience that is open only to Cancer Prevention Fellows. The course provides fellows, especially those with limited laboratory experience, tangible reference points for understanding laboratory applications commonly used in cancer prevention research. The course consists of brief explanatory lectures interwoven with laboratory demonstrations. Each exercise is designed to provide instruction in laboratory techniques that are frequently referenced in the Summer Curriculum in Cancer Prevention lectures.



Molecular Prevention Laboratory Course

Left to Right: Salma Shariff-Marco, Ph.D., M.P.H., Adeyinka Laiyemo, M.B.B.S., M.P.H., Roycelynn Mentor-Marcel, Ph.D., M.P.H., Sharon Glynn, Ph.D., M.P.H.

ANNUAL CANCER PREVENTION FELLOWS' SCIENTIFIC SYMPOSIUM

In September 2002, the CFPF held its First Annual Cancer Prevention Fellows' Scientific Symposium. This inaugural event set the stage for the subsequent yearly symposia held each fall just prior to the start of the Cancer Prevention and Control Colloquia Series. The Symposium is an occasion to bring together the senior fellows, those fellows who have recently arrived at the NCI, and the CFPF staff for a day of scientific exchange in the area of cancer prevention. The event provides an opportunity for fellows to discuss their projects, ideas, and potential future collaborations. Fellows spearhead the planning of the Symposium, including the development of the program agenda and special workshops, and the selection of invited speakers.

FELLOWS' RESEARCH MEETINGS

Between September and June, Cancer Prevention Fellows and CFPF scientific staff attend the weekly Fellows' Research Meeting, where fellows formally present their research. Fellows' preceptors and invited guests are welcome to attend. Periodically, career and professional development topics are also presented.

CANCER PREVENTION AND CONTROL COLLOQUIA SERIES

Following the Fellows' Research Meeting, fellows attend the Cancer Prevention and Control Colloquia Series. These seminars feature leading scientists in the field of cancer prevention and control. Each fellow has the opportunity to invite prominent investigators in his/her discipline to present at these NCI-sponsored lectures.



"I'm amazed with the research opportunities offered by the CFPF at NCI. The resources and support services are phenomenal and the experts are often just down the hall. It's even possible to apply for grants outside of NCI as a Principal Investigator which is a truly unique perk of this training program."

Beth Dixon, Ph.D., M.P.H.,
Fellow Alumna,
New York University

hiring and promotion decisions. Since the Grants and Grantsmanship Workshop was first offered in January 2000, CFPF fellows have successfully competed for peer-reviewed grants, including NCI Intramural Research Awards, Department of Defense Research Program grants, private foundation grants, and NCI K07, K22, and K99/R00 Career Development Awards.

GRANTS AND GRANTSMANSHIP WORKSHOP

The CFPF provides formal training in grantsmanship through a Grants and Grantsmanship Workshop offered each year. In addition to providing didactic and practical experiences in the grants process, a major goal of the workshop is to facilitate successful applications for research funds for all interested fellows. This training is designed to prepare each fellow for a critical next step in his or her career in which demonstrated ability to develop and organize ideas into a well-written proposal will be a major determinant in

LEADERSHIP AND PROFESSIONAL DEVELOPMENT TRAINING

The foundation for success in the field of cancer prevention is based on leadership skills, professional excellence, and mastery of one's scientific discipline. Within the CFPF, our goal is to help fellows maximize their individual potential for leadership and scientific contribution to the field of cancer prevention through a series of professional development activities. These activities are designed to prepare individuals for the transition from postdoctoral fellows to successful, independent scientists and professionals in cancer prevention.

We have organized the professional development activities to address the needs of fellows at the beginning, middle, and end of the fellowship. At the beginning, once fellows have completed their master's program, activities focus on identifying the best research experiences and on learning successful approaches to securing such opportunities. Other activities include designing a personal plan for productivity and time management. For those who are mid-way through the fellowship, activities focus on methods to enrich their training experience further through learning how to design a long-term independent research agenda, and by developing "professional polish." To help those approaching the end of the program, activities prepare fellows for attaining their first professional position. Fellows learn where to find jobs in cancer prevention and control and how to prepare applications for such positions.

To meet the individual needs of fellows, professional development activities consist of structured workshops, seminars, and personal meetings, including:

- Interviewing and Negotiating
- Networking and Effective Communication
- Presentation Skills
- Scientific Writing
- Setting Goals, Planning Priorities, and Managing Time

In addition, new activities are being developed to further expand the portfolio of professional development training.

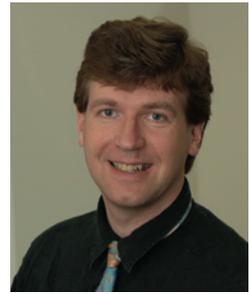
ADDITIONAL TRAINING

Fellows may also participate in academic courses in subject areas relevant to cancer prevention and control. These courses are typically offered by schools of public health, departments of preventive medicine and epidemiology, the federal government, and other organizations. Such training will be considered in cases where regulations permit and where the learning experience is expected to significantly enhance the trainee's research capabilities.

FIELD EXPERIENCES

Fellows may choose to pursue field experiences at institutions outside the NIH that are currently engaged in cancer prevention research, cancer surveillance, cancer control applications, or other related activities.

These experiences, usually at local institutions, are typically brief and require prior approval by the CFPF.



"The CFPF provides the unique opportunity to do transdisciplinary research, grow professionally, and balance work and private life"

Gerd Bohe, Ph.D., M.P.H.

Current Fellow,
Cancer Prevention
Fellowship Program

Program Information

Eligibility

To be considered for the CFPF, you must meet the following eligibility requirements:



“The fellowship offers a unique opportunity to integrate social and lab-based sciences with population based approaches. The public health training provided by CFPF has allowed me to enhance and broaden my research in psychoneurology and physical activity. The opportunities for collaboration have also been phenomenal. I have seen no other post-doctoral position that equals the CFPF in terms of training, access to outstanding mentorship and research opportunities, as well as important levels of independence and autonomy.”

Ashley Wilder Smith, Ph.D., M.P.H.,
Fellow Alumna,
Division of Cancer Control
and Population Studies, NCI

DOCTORAL DEGREE

You must possess an M.D., Ph.D., J.D., or other doctoral degree in a related discipline (e.g., epidemiology, biostatistics, ethics, philosophy, or the biomedical, nutritional, public health, social, or behavioral sciences). Foreign education must be comparable to that received in the United States.

Applicants currently enrolled in accredited doctoral degree programs that have not yet fulfilled all degree requirements will be considered for entry into the program, with the understanding that all requirements will be completed before the start of the CFPF. Assurance to this effect must be supplied in writing by the chair of the dissertation committee (e.g., Ph.D. candidates) or the dean of the school (e.g., M.D. candidates).

Applicants must have less than five years of relevant postdoctoral training at the time of appointment.

CITIZENSHIP

You must be a citizen or permanent resident of the United States at the time of application (September 1). The I-551 stamp in a passport is acceptable; “Employment Authorization” documents are not acceptable.

Applicants applying through the Ireland-Northern Ireland-NCI Cancer Consortium should refer to the *Ireland-Northern Ireland-NCI Cancer Consortium* section for guidelines.

Stipends and Benefits

Stipends. Each stipend will be determined by the individual's degree and years of relevant postdoctoral experience. Fellows entering the program with no prior postdoctoral experience will start at approximately \$46,200. Stipend levels increase with the number of years of postdoctoral experience. Annual increases may be given. Specialty competitive allowances are given for degrees in epidemiology or biostatistics, for J.D.s or M.D./Ph.D.s, and for board-certified M.D.s engaged in patient care. Stipends are subject to change depending on federal guidelines.

Health Insurance and Leave. Fellows will receive individual or family health insurance and paid federal holidays, annual leave, sick leave, and family leave.

Travel and Relocation. The NCI may cover the cost of relocation expenses up to a maximum of \$3,000 (i.e., travel, shipment of household goods, and temporary storage, if necessary) for the fellow and his/her dependents for one move to the area where M.P.H. training will be pursued *or* to the Rockville, Maryland area. Reimbursement will be in accordance with prevailing government regulations. No return travel is authorized.

Expenses are provided for travel to meetings and training each year for each fellow, excluding the M.P.H. year.

Selection and Interview

All complete applications submitted by eligible candidates by the application deadline will be reviewed by members of the CFPF Scientific Education Committee. This Committee is comprised of scientists from different divisions within the NCI, the FDA, and an *ad hoc* member from outside the NCI with expertise in the field of cancer prevention and control. Those applicants judged to be highly qualified will be notified in October 2009 and invited for a one-day interview. The interviews will be held October 22, 23, 2009 in Rockville, Maryland. Applicants will be notified of their status shortly thereafter.

Start and Duration of Appointment

Start of Appointment. For individuals entering the CFPF directly (e.g., not pursuing M.P.H. training), the start date is June 21, 2010. For individuals obtaining an M.P.H. or equivalent degree during the first year, the appointment begins with the start of the master's program. All fellows entering the program are expected to attend the CFPF Orientation in Rockville, Maryland, which is held during the last week of June.

Duration of Appointment. The initial appointment will be for 1 year and may be renewed on a yearly basis. The typical duration is 4 years (year 1: master's degree; years 2 through 4: NCI Summer Curriculum in Cancer Prevention and mentored research). If a master's degree is obtained during the first year of the program, the fellow is required to remain in the CFPF for a period twice the duration of the master's training period. All renewals are contingent upon total duration of stay at the NIH, which cannot exceed 5 years for a non-tenured appointment nor exceed 8 years for any type of doctoral-level position.

Guidelines for Application

Application Materials

The following application materials are required, as described below:

Personal Statement of Research Goals. In narrative form, describe your research interests and goals and how these relate to the field of cancer prevention and control. Please also provide insight into your short- and long-term career goals, and explain how the CPFPP will help you in achieving those goals. Limit your personal statement to two typed, single-spaced pages and use 12-point font and 1 inch margins (approximately 1,000 words).

Curriculum Vitae. Please refer to *Information to Include in Curriculum Vitae* in this section.

Letters of Reference. Four current and original letters of reference must be sent directly to the director of the CPFPP by individuals in the scientific/academic community who have knowledge of your scientific accomplishments, motivation, and skills. Letters must be received by September 1, 2009. Please visit our website for instructions.

Academic Transcripts. Copies of all graduate and undergraduate transcripts (and translations, if applicable) must be uploaded directly to the CPFPP website.

Other Documentation. Permanent residents of the United States must submit proof of eligibility for citizenship. The I-551 stamp in a passport is acceptable; "Employment Authorization" documents are *not* acceptable.

Individuals applying through the Ireland-Northern Ireland-NCI Cancer Consortium must submit proof of citizenship (birth certificate or passport) and proof of employment (refer to *Ireland-Northern Ireland-NCI Cancer Consortium* section).

Information to Include in *Curriculum Vitae*

- Applicants are encouraged to use their current curriculum vitae and to add any necessary information.
- Please include your name and a page number on each page of the curriculum vitae.
- Some of the information requested below will not be applicable to all individuals.
- Please do not print or type your information on this page.

Date Prepared

Personal Information

- Name (First middle last)
- Gender (*optional*)
- Race (*optional*)
- Date of birth
- Place of birth (city, state, country)
- Home address
- Work/school address
- Telephone (*if more than one telephone number is provided, please indicate preferred contact*)
- Fax
- E-mail (*if more than one e-mail address is provided, please indicate preferred contact*)

Citizenship

- Country of citizenship
- U.S. permanent resident number, if applicable
- *Individuals applying through the Ireland-Northern Ireland-NCI Cancer Consortium:*
Please indicate citizenship, country where currently employed, and application tracking number (refer to website for details)

Education *Please list all colleges and universities attended and any other relevant training. Include the following information for each institution:*

- School, department, city and state, country
- Dates attended, academic major, degree, year degree awarded/expected

Work Experience *Please list current and past employment. Include the following information for each position:*

- Title, employer's name, address, and telephone
- Dates of employment, hours per week
- Brief description of duties and accomplishments

Other Information *Please note that the items requested below may not be relevant to all applicants.*

- Board certification
- Committee memberships
- Grants awarded
- Honors and awards
- Patents
- Peer-review service
- Professional licenses
- Professional society memberships
- Scientific presentations
- Teaching

Research Interests *Please provide a few key words that describe your research interests.*

Bibliography *Please list all publications and indicate whether they are "published," "in press," "submitted," or "in preparation." Please list full-length manuscripts and abstracts separately.*

How to Submit Application Materials

If you are interested in applying to the CFPF and meet the eligibility requirements (refer to *Eligibility* section), you must submit your application online through our website.

APPLYING ONLINE

Personal Statement of Research Goals and Curriculum Vitae. Please access the CFPF application on our website and link to the *Application* page. You will be asked to create a personal account that only you can access through a unique user name and password. You will then be requested to provide some general information and to upload your personal statement of research goals and *curriculum vitae*. Information entered online can be saved as the application is completed and edited up until you submit the application. The application must be submitted on or before September 1, 2009.

Letters of Reference, Academic Transcripts, and Other Documentation. Four letters of reference should be uploaded to the website by the referees. Academic transcripts and other documentation materials should be uploaded to the CFPF website by the applicant. Please see website for instructions. All application materials must be submitted on or before September 1, 2009.

Direct further inquiries to:

Program Coordinator
Telephone (301) 496-8640
Fax (301) 480-2669
E-mail cpfpcoordinator@mail.nih.gov
<http://cancer.gov/prevention/pob>

Selection for these positions will be based solely on merit, with no discrimination for non-merit reasons, such as race, color, gender, national origin, age, religion, sexual orientation, or physical or mental disability. NIH provides reasonable accommodations to applicants with disabilities. If you need reasonable accommodation during any part of the application and hiring process, please notify us. The decision on granting reasonable accommodation will be handled on a case-by-case basis.

THE NIH/NCI IS AN EQUAL OPPORTUNITY EMPLOYER

Application Deadline
September 1, 2009

Preceptorships



"Being a part of the CPFP has given me unique research and career development opportunities not readily available at other teaching or research institutions. I have found the CPFP to be an outstanding and well-structured program that has fully equipped me with the skills needed to successfully conduct cutting-edge research to help reduce the burden of cancer through prevention. I will continue to serve as a strong advocate for this program of excellence!"

Roycelynn Mentor-Marcel,
Ph.D., M.P.H.,
Current Fellow,
Cancer Prevention
Fellowship Program

The major activity for Cancer Prevention Fellows is mentored research, traditionally involving one or more of the following areas: laboratory-based cancer prevention research, epidemiologic research (including molecular epidemiologic studies and prevention trials), behavioral science research, clinical prevention research, prevention-related policy research, ethics of prevention and public health research, and quantitative or qualitative methodologies in cancer prevention and control research. All fellows are expected to develop original scientific projects and to report their findings at scientific meetings and in leading journals. Preceptors who serve to guide and enrich each fellow's experience are selected from skilled investigators across all NCI divisions, participating FDA centers, or local academic institutions. To date, nearly one hundred NCI staff members have served as preceptors.

AN EXPANDED LISTING OF PRECEPTORS and their areas of expertise are published on our website <http://cancer.gov/prevention/pob>.

Preceptorships are selected through a matching process. During their first summer onsite at NCI, fellows spend time meeting with potential preceptors. A mutual agreement is reached between the preceptor and the fellow on the research that will be completed during the fellowship. A research proposal for the initial project is then prepared for approval by the preceptor and the CFPF scientific staff. Whereas the CFPF has all administrative responsibility for each fellow, the preceptor provides scientific supervision. Preceptors are responsible for arranging for office space, supplies, and equipment; encouraging presentations and publications at local and national meetings; and providing supplemental travel funds for research-related activities.

Listed below are some of the NCI divisions, programs, laboratories, branches, and offices from which Cancer Prevention Fellows may select their preceptors. A listing of preceptors from the FDA is available on the website, <http://iotftraining.nci.nih.gov/prevent.html>—NCI-FDA Joint Training in Cancer Prevention.



“The CFPF allowed me to explore diverse interests and work closely with many of the great minds in epidemiology and biostatistics, an opportunity that I would not have had in a traditional postdoctoral position.”

Pam Marcus, Ph.D., M.S.,
Fellow Alumna, Division of
Cancer Prevention, NCI

Division of Cancer Prevention

The Division of Cancer Prevention (DCP)'s mission is to plan, direct, implement, and monitor cancer research and training that is focused on early detection, cancer risk, chemoprevention, and supportive care. DCP projects address the need to identify where a person is in the process of carcinogenesis, and to determine ways to actively intervene to stop it from becoming invasive cancer. Varied approaches are supported, from pre-clinical discovery and development of biomarkers and chemoprevention agents, including pharmaceuticals and micronutrients, to Phase III clinical testing. Programs are harmonized with other NCI divisions, NIH institutes, and federal and state agencies. Additional information can be found at <http://prevention.cancer.gov>.

FOUNDATIONS OF PREVENTION RESEARCH GROUPS

The **Basic Prevention Sciences Research Group**, in collaboration with trans-NCI programs dedicated to systems biology research, is developing systems approaches to cancer prevention in areas such as drug development and carcinogenesis modeling. The focus is to integrate fundamental research of NCI intramural and extramural research divisions with that of the Division of Cancer Prevention.

Acting Chief: John Gohagan, Ph.D.

The **Biometry Research Group** engages in independent and cooperative research studies on cancer epidemiology, prevention, screening, and diagnosis using methods of mathematical and analytic statistics. In addition, the BRG conducts independent and collaborative studies in biostatistical and epidemiologic methodology and in mathematical modeling of processes relevant to cancer prevention activities.

Chief: Philip C. Prorok, Ph.D.

The **Cancer Biomarkers Research Group** promotes and supports research to identify, develop, and validate biological markers for earlier cancer detection and risk assessment. The group integrates basic and clinical science studies along with computational, statistical, and epidemiologic approaches, for a comprehensive and understanding of biomarkers. It coordinates the Early Detection Research Network.

Chief: Sudhir Srivastava, Ph.D., M.P.H.

The **Chemopreventive Agent Development Research Group** conducts research to identify and develop agents to prevent, reverse, or delay early, preinvasive cancer. Activities include preclinical efficacy and safety testing; development of animal models; development of markers for agent mechanisms of action and effects in carcinogenesis; clinical Phase 1 safety, pharmacokinetic, and dose ranging studies; and preparation of Investigational New Drug applications to the FDA.

Chief: Vernon E. Steele, Ph.D., M.P.H.



Worta McCaskill-Stevens, M.D., M.S.,
Preceptor, Community
Oncology and
Prevention Trials
Research Group,
Division of Cancer
Prevention, NCI

The **Community Oncology and Prevention Trials Research Group** invests community physicians in clinical trials, via the Community Clinical Oncology Program, and is involved in all aspects of the design and implementation of NCI's large cancer prevention clinical trials. The group also reviews and approves all Cooperative Group cancer control and prevention clinical trials.

Chief: Lori M. Minasian, M.D., F.A.C.P.

The **Early Detection Research Group** identifies and ascertains the effectiveness of both the operating characteristics and the impacts on mortality, and the immediate and downstream risks of molecular and imaging cancer detection technologies and practices. It systematically assesses the value of cancer screening and early detection tests and technologies by establishing their ability to reduce cancer mortality.

Chief: Christine D. Berg, M.D.

The **Nutritional Science Research Group** plans, develops, directs, and coordinates external research programs in diet and nutrition, including micronutrients as modifiers of cancer risk and tumor behavior, to help establish a comprehensive understanding of the precise role of bioactive food components. Projects focus on determining how specific genes or molecular targets are influenced by either essential or non-essential nutrients. Research is aimed at identifying people who will benefit, and people who might be placed at risk from dietary intervention strategies.

Chief: John A. Milner, Ph.D.

ORGAN SYSTEMS RESEARCH GROUPS

The efforts of the **Breast and Gynecologic Cancer Organ System Research Group** are specifically directed at reducing the incidence, morbidity, and mortality of breast and gynecologic cancers. This is accomplished through planning, supporting, and conducting research and clinical trials that develop interventions for risk assessment, screening, early detection, and prevention of breast and gynecologic cancers.

Chief: Karen A. Johnson, M.D., Ph.D., M.P.H.

The primary mission of the **Gastrointestinal and Other Cancer Research Group** is to improve the public's health by preventing gastrointestinal, dermatologic, endocrine, hematolymphoid, and treatment-induced malignancies. Staff collaborate with the public, academia, industry, and regulatory agencies to better identify persons at risk for cancer, and to develop novel interventions that reverse or retard carcinogenesis. The group investigates mechanisms of promising investigational agents and delivery systems that target preneoplasia.

Chief: Asad Umar, D.V.M., Ph.D.



Eva Szabo, M.D.,
Preceptor, Lung and
Upper Aerodigestive
Cancer Research
Group, Division of
Cancer Prevention, NCI

The **Lung and Upper Aerodigestive Cancer Research Group**

promotes and supports research targeting the early detection and prevention of cancer arising within the lung and upper aerodigestive tract. Collaborative research is conducted with extramural and intramural NCI staff, with emphasis on Phase II clinical trials of novel chemopreventive agents in individuals at

high risk for cancers at these sites. Optimization of trial design, identification/validation of surrogate endpoint biomarkers, and integration of new imaging modalities into chemoprevention trials are ongoing research priorities.

Chief: Eva Szabo, M.D.

The **Prostate and Urologic Cancer Research Group** promotes and supports extramural basic and applied research that focuses on the prevention of prostate and urologic cancers. The group plans, develops, implements, and monitors chemoprevention clinical trials that employ pharmacologic, biologic, genetic, immunologic, and vaccine interventions. The overall goal is to evaluate and validate new technologies that identify premalignant lesions, and to develop novel chemopreventive agents to reduce cancer incidence.

Chief: Howard Parnes, M.D.

Division of Cancer Control and Population Sciences

The Division of Cancer Control and Population Sciences (DCCPS) aims to reduce the risk, incidence, and death from cancer, as well as enhance the quality of life for cancer survivors. It conducts and supports an integrated program of the highest quality in cancer genetic, epidemiologic, behavioral, social, and surveillance research. The division's funded research aims to understand the causes and distribution of cancer in populations, to support the development and implementation of effective interventions, and to monitor and explain cancer trends in all segments of the population. Further information can be found at <http://dccps.nci.nih.gov>.

Director: Robert Croyle, Ph.D.

OFFICE OF THE DIRECTOR

The mission of the **Research Dissemination and Diffusion** team is to reduce cancer incidence, morbidity, and mortality through promoting adoption, reach, and impact of evidence-based interventions across the cancer control continuum from primary prevention to end of life care. It seeks to bring together resources to stimulate and support both dissemination and diffusion of cancer control research, and to close the gap between research discovery and program delivery by getting evidence-based information and interventions into use.

Acting Deputy Director: Robert T. Croyle, Ph.D.



Julia Rowland, Ph.D.,
Preceptor, Office of
Cancer Survivorship,
Division of Cancer
Control and Population
Sciences, NCI

long- and short-term physical, psychological, social, and economic effects of cancer, and its treatment among pediatric and adult survivors of cancer and their families.

Director: Julia H. Rowland, Ph.D.

APPLIED RESEARCH PROGRAM

The Applied Research Program plans, conducts, and supports research related to evaluating patterns and trends in cancer-related risk factors, health



Rachel Ballard-Barbash,
M.D., M.P.H.,
Preceptor, Applied
Research Program,
Division of Cancer
Control and Population
Sciences, NCI

The mission of the **Office of Cancer Survivorship** is to enhance the quality of life and to improve the length of survival of all persons diagnosed with cancer, and to minimize or stabilize adverse effects experienced during cancer survivorship. The office conducts and supports research that both examines and addresses the

behaviors, economics, outcomes, health services and patient-reported outcomes; moreover the program determines the influence of those factors at the individual, societal, and systems level on patterns and trends in measures of cancer burden, including incidence, morbidity, mortality, and survival.

Associate Director:
Rachel Ballard-Barbash,
M.D., M.P.H.

The **Health Services and Economics Branch** supports, conducts, and coordinates research on the dissemination of effective cancer-related health services into community practice. The branch studies demographic, social, economic, and health system factors as they relate to providing preventive, screening, diagnostic, and treatment services for cancer. The ultimate purpose of this research is to improve cancer outcomes, reduce cancer-related health disparities, and reduce the burden of cancer to patients, their families, and society.

Chief: Martin Brown, Ph.D.

The **Outcomes Research Branch** conducts, coordinates and sponsors research to measure, evaluate, and improve patient-centered outcomes of cancer care delivery across the cancer care continuum. The branch is particularly interested in morbidity and mortality outcomes, patient symptoms and health-related quality of life (HRQOL), patient experience of and satisfaction with health care, and social and economic consequences of cancer care.

Chief: Steven Clauser, Ph.D.

The **Risk Factor Monitoring and Methods Branch** is responsible for monitoring cancer-related risk factors among the general U.S. population and among selected population subgroups defined by gender, age, race, and ethnicity; developing and improving the methods of assessing such risk factors; and providing data to assist in formulating public policies addressing these factors.

Chief: Susan Krebs-Smith, Ph.D.

BEHAVIORAL RESEARCH PROGRAM

The Behavioral Research Program initiates, supports, and evaluates a comprehensive program of research ranging from basic behavioral research to research on the development, testing, and dissemination of disease prevention and health promotion interventions in areas such as tobacco use, screening, dietary behavior, sun protection, and health communication.

Acting Associate Director: Robert Croyle, Ph.D.



**Stephen Taplin,
M.D., M.P.H.,**

Preceptor, Applied
Research Program,
Division of Cancer
Control and Population
Sciences, NCI

research agenda for cancer screening.

Acting Chief: Stephen Taplin, M.D., M.P.H.

The **Basic and Biobehavioral Research Branch** promotes, sponsors, and supports biobehavioral and basic (social, cultural, behavioral) research and training. This research attempts to identify the mechanisms, principles, and theoretical underpinnings of cancer-related behavior and behavior change across all ages, racial and ethnic groups, socioeconomic strata, and cancer diagnoses. The branch seeks to understand behavior and behavior change in its social, cultural, and economic context, including how basic and biobehavioral research relates to cancer health disparities.

Chief: Paige Green McDonald, Ph.D., M.P.H.

The **Applied Cancer Screening Research Branch**

plans, implements, and maintains a comprehensive research program to develop effective strategies for promoting cancer-screening methods known to reduce cancer morbidity and mortality.

The branch employs interdisciplinary teamwork and collaboration with appropriate organizations and constituencies to establish a national

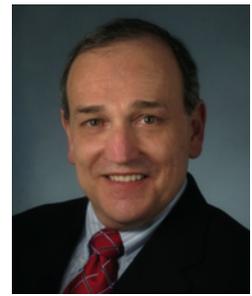
The **Health Communication and Informatics Research Branch** plans, develops, and coordinates important new research on risk communication, health communications and informatics relevant to cancer prevention and control. The branch coordinates research using both traditional means of communication, as well as new digital interactive media and other new media to reach at-risk populations. It acquires and disseminates health communication knowledge to stimulate sophisticated training of health communication scholars, research professionals, and public health practitioners.

Chief: Bradford Hesse, Ph.D.

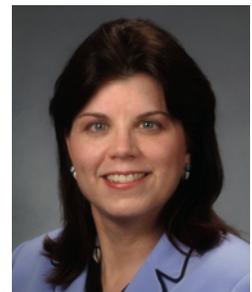
The **Health Promotion Research Branch**

supports research on behavioral prevention, which includes diet, physical activity, energy balance, virus exposure, and sun exposure. It provides leadership in these areas by focusing research efforts on effective clinical, environmental, and community-based intervention strategies. It synthesizes and disseminates findings, recommendations, and priorities of successful strategies in behavioral change prevention interventions to target organizations and individuals. The branch solicits input from and communicates regularly with the extramural community to refine methodology and evaluate effectiveness.

Chief: Linda Nebeling, Ph.D., M.P.H., R.D.



Bradford Hesse, Ph.D.,
Preceptor, Health
Communication and
Informatics Research
Branch, Division
of Cancer Control
and Population
Sciences, NCI



**Linda Nebeling,
Ph.D., M.P.H., R.D.,**
Preceptor, Health
Promotion Research
Branch, Division
of Cancer Control
and Population
Sciences, NCI



"I realized that to do what I wanted in tobacco control research, I needed additional training, some protected time for research, and opportunities to meet people in my area of interest. I was provided with all three of these—and then some—at the NCI CFPF."

Ted Marcy, M.D., M.P.H.,
Fellow Alumnus,
University of Vermont

The **Tobacco Control Research Branch** was established to provide a focal point for tobacco control research within the division. The branch plans, develops, implements, and maintains a broad spectrum of basic and applied research in the behavioral, social, and population sciences on the prevention and cessation of tobacco use among both youth and adults. The mission is to reduce cancer incidence and mortality

caused by tobacco use through a comprehensive research program.

Chief: Cathy Backinger, Ph.D., M.P.H.

EPIDEMIOLOGY AND GENETICS RESEARCH PROGRAM

The Epidemiology and Genetics Research Program manages a comprehensive program of grant-supported, population-based research to increase our understanding of cancer etiology and prevention. Its mission is to increase our understanding of the determinants of cancer and cancer-related outcomes in human populations by using an epidemiologic approach. The branch seeks to facilitate movement of discoveries in the basic sciences and improved technologies to studies in human populations, discoveries about the determinants of cancer and cancer-related health outcomes after cancer into clinical and public health practice. The program seeks to aid the movement of scientific knowledge from clinical and public health to human studies and basic biology.

Acting Associate Director: Deborah Winn, Ph.D.

The **Methods and Technologies Branch** plans, directs, and coordinates research related to epidemiologic methods to address research issues, and to translate technological approaches developed in the context of other research endeavors to the development of biomarkers of risk susceptibility and cancer epidemiologic settings.

Chief: Mukesh Verma, Ph.D.

The **Modifiable Risk Factors Branch** plans, develops, and coordinates epidemiologic research in the etiology of cancer in human populations relating to factors that may be modifiable, such as nutrition, physical activity and energy balance, infectious diseases, and physical and chemical agents.

Chief: Britt Reid, D.D.S., Ph.D.

The **Host Susceptibility Factors Branch** plans, develops, and coordinates a comprehensive program of epidemiologic research in the etiology of cancer in human populations related to host (i.e., personal) susceptibility factors. These include genetic, epigenetic, immunological and hormonal biological pathways, and social, cultural, and race/ethnicity elements factors.

Chief: Elizabeth Gillanders, Ph.D.

The **Clinical and Translational Epidemiology Branch** plans, develops, and coordinates a comprehensive program of epidemiologic research in human populations related to clinical factors that influence development of cancer among persons with underlying diseases and conditions and progression, recurrence, new primary cancers, and mortality from cancer among cancer survivors. This program includes research to study differences in cancer susceptibility and risk in individuals and populations, and the multiple environmental and genetic factors that jointly contribute to development of cancer among persons with underlying diseases and conditions and progression, recurrence, new primary cancers, and mortality from cancer among cancer survivors with the ultimate goal of elucidating cancer development and progression among people with these health conditions.

Acting Chief: Deborah Winn, Ph.D.

SURVEILLANCE RESEARCH PROGRAM

The role of the Surveillance Research Program is to monitor emerging trends in our national cancer burden, track the impact of cancer on the U.S. population, and provide information that will enable researchers to generate hypotheses and address questions about observed changes over time. Research within the program is developing innovative methods for the analysis and understanding of cancer statistics and outcomes of cancer control research.

Associate Director: Brenda Edwards, Ph.D.

The **Cancer Statistics Branch** conducts and supports research and developmental activities related to the surveillance of cancer patterns in the United States and monitors progress against cancer. It provides the nation with data collection systems and reliable descriptions of cancer data generated by those systems, principally the Surveillance, Epidemiology, and End Results (SEER) program of cancer registries, which is a population-based cancer surveillance system of almost 2 million cancer cases. The branch also manages a large portfolio of SEER Special Studies, which are investigations that extend the scientific usefulness of the core SEER dataset.

Chief: Dave Stinchcomb, M.A./M.S.C.S.

The **Statistical Research and Applications Branch** plans, conducts, and supports statistical research, modeling, collaboration, and consultation related to cancer surveillance and the cancer control missions of the National Cancer Institute. Research within the branch is targeted at improving and developing statistical methods and models for use in the analysis and presentation of population-based cancer statistics, as well as in the broader areas of cancer surveillance and cancer control research.

Chief: Eric J. (Rocky) Feuer, Ph.D.

Division of Cancer Epidemiology and Genetics

The Division of Cancer Epidemiology and Genetics (DCEG) is the primary focus within the NCI for population-based research to discover the genetic and environmental determinants of cancer and new approaches to cancer prevention. Intramural and collaborative interdisciplinary studies are conducted on the distribution, causes, and natural history of cancer, and the means for its prevention. Further information can be found at <http://dceg.cancer.gov>.

EPIDEMIOLOGY AND BIOSTATISTICS PROGRAM

The Epidemiology and Biostatistics Program conducts independent and collaborative epidemiologic and biostatistical investigations to identify the distribution, characteristics, and causes of cancer in human populations.

The **Biostatistics Branch** is responsible for (1) providing expert consultation and active collaboration on study design and analysis of epidemiologic studies; (2) developing statistical, computational, and other methods needed for conduct and analysis of epidemiologic studies; and (3) leading selected epidemiologic studies.

Chief: Nilanjan Chatterjee, Ph.D.

The **Hormonal and Reproductive Epidemiology Branch** conducts research aimed at identifying groups at high risk of cancer, clarifying the natural history of various cancers, understanding interactive effects of genetic and environmental factors on cancer risk, and elucidating biologic mechanisms of carcinogenesis. To define risk factors for hormonally related tumors, we assess reproduction and other factors, measure endogenous hormones, identify hormonal correlates of risk factors for these diseases, and investigate conditions associated with marked hormonal perturbations. A major area of research also focuses on defining the role of the human papillomaviruses in the etiology of genital tumors.

Chief: Louise A. Brinton, Ph.D.



“The Cancer Prevention Fellowship Program fosters an environment that is supportive both scientifically and personally. The CFPF provides Fellows with the flexibility to work with scientists from across all of the NCI Divisions and Branches.”

Joanne Watters, Ph.D., M.P.H.
Current Fellow, Cancer Prevention Fellowship Program

To clarify the role of nutrition in the etiology of human cancer, the **Nutritional Epidemiology Branch** carries out a wide range of interdisciplinary investigations, including observational epidemiologic studies, experimental epidemiologic studies (clinical trials), and metabolic studies. The branch integrates biospecimen collection in its studies to explore the physiologic, cellular, and molecular processes linking

nutrition and cancer. It emphasizes the ‘exposure’ side of nutrition research, with studies of dietary patterns, intake biomarkers, food composition databases, and dietary measurement error. ‘Nutrition’ is conceived broadly, comprising dietary factors, body size and body composition, and physical activity and energy balance.

Chief: Arthur Schatzkin, M.D., Dr.P.H.

The **Occupational and Environmental Epidemiology Branch** conducts studies to identify causes of cancer, with a focus on occupational and environmental exposures. Interdisciplinary case-control, cohort, and transitional studies include quantitative exposure assessment and collection of biologic samples to identify and characterize risk factors and mechanisms of action.

Chief: Debra T. Silverman, Sc.D.

The mission of the **Radiation Epidemiology Branch** is to identify, quantify, and understand the risk of cancer in populations exposed to radiation, alone or in combination with other agents. Because models of the carcinogenic effects of radiation exposure are relevant to other exposures, the studies of radiogenic tumors contribute to overall understanding of the biologic basis of carcinogenesis.

Chief: Martha Linet, M.D., M.P.H.

The **Infections and Immunoepidemiology Branch** believes that health will be improved greatly through the discovery and understanding of infections associated with human cancers. The mission of the branch is to conduct research that will clarify substantially whether and how infections relate to human cancers and associated conditions, to discover new viruses, and to train and facilitate others in such research.

Chief: Allan Hildesheim, Ph.D.

HUMAN GENETICS PROGRAM

The **Clinical Genetics Branch** integrates clinical observations into an interdisciplinary approach involving clinical, genetic, epidemiologic, statistical, and laboratory methods to define the role of susceptibility genes in cancer etiology; translates molecular genetic advances into evidence-based management strategies (including screening and chemoprevention) for persons at increased genetic risk of cancer; identifies and characterizes phenotypic manifestations of genetic and familial cancer syndromes; counsels individuals at high risk of cancer; investigates genetic polymorphisms as determinants of treatment-related second cancers; and pursues astute clinical observations of unusual cancer occurrences that may provide new clues to cancer etiology.

Chief: Mark H. Greene, M.D.

The **Genetic Epidemiology Branch** designs and conducts interdisciplinary clinical, epidemiologic, genetic, and laboratory studies of persons, families, and populations at high risk of cancer. These investigations identify genes and exposures conferring cancer predisposition and explore the combined effects of predisposition, and specific exposures. As part of this effort, the branch maintains a familial cancer registry and biospecimen repositories. Families participating in specific studies receive counseling about their risk of cancer and about screening or intervention options.

Chief: Margaret A. Tucker, M.D.

The **Laboratory of Translational Genomics** develops new approaches to the study of the genetic basis of cancer and its outcomes. The lab seeks to understand the genetic basis of SNP markers validated in large scale, genome-wide association studies (GWAS). Specifically, the laboratory uses integrated approaches to identify and validate common SNPs and ancestral haplotypes, which could be used to dissect the genetic basis of disease susceptibility.

Chief: Stephen Chanock, M.D.

Center for Cancer Research

The Center for Cancer Research (CCR) is composed of many different programs, laboratories, and branches and has over 250 principal investigators. These investigators conduct cutting-edge basic and clinical research on the discovery of causes and mechanisms of cancer for the prevention, diagnosis, and treatment of cancer and other diseases. Further information can be found at <http://ccr.nci.nih.gov>.

The **Experimental Immunology Branch** carries out basic research in immunology. It consists of 10 independent research laboratories, a flow cytometry facility, and a digital microscopy facility, all focused on multiple aspects of basic immunology.

Chief: Alfred Singer, M.D.

The **Laboratory of Cancer Prevention** investigates the molecular basis of cellular processes that, when perturbed, can lead to cancer induction and progression. Discovery and characterization of molecular targets for cancer prevention and intervention is a common area of interest throughout the lab.

Chief: Nancy H. Colburn, Ph.D.



Nancy Colburn, Ph.D.,
Preceptor, Laboratory
of Cancer Prevention,
Center for Cancer
Research, NCI

The **Molecular Targets Development Program** provides leadership for converting CCR's basic science advances into drug leads, bioprobes, and reagents for molecular target evaluation. The program exploits chemical and biodiversity repositories, including the NCI Natural Products Repository, for molecularly targeted lead discovery.

Chief: James B. McMahon, Ph.D.

The **Cell and Cancer Biology Branch** conducts investigations into the molecular mechanisms of cellular transformation, tumorigenesis, and metastasis, with the goal of applying this knowledge towards prevention of and intervention in human carcinogenesis.

Chief: Kathleen Kelly, Ph.D.

The **Laboratory of Cancer Biology and Genetics** conducts an integrated research program designed to elucidate the cellular and tissue changes associated with specific stages of carcinogenesis; to define the molecular mechanisms involved; and to develop rational approaches for cancer prevention. Studies are performed *in vivo* in experimental animals, *in vitro* in cell and organ culture, and on tissues and cells obtained from human volunteers and cancer patients.

Chiefs: Stuart H. Yuspa, M.D. and Glenn Merlino, Ph.D.

The primary focus of the **Transgenic Oncogenesis Group** of the Laboratory of Cancer Biology and Genetics is to determine molecular mechanisms involved in prostate and mammary tumorigenesis using transgenic mouse approaches. A primary goal is to define what molecular events are involved in tumor progression, and how this information may be used for targeting novel therapies to prevent cancer development or inhibit tumor progression.

Chief: Jeffrey Green, M.D.

The research in the **Laboratory of Cellular Oncology** focuses on normal and abnormal growth regulation, protein trafficking, cell signaling, gene regulation by retroviruses, and papillomaviruses. Current investigations include studies of myeloid leukemia, p53 regulation, E-cadherin, and regulation of Arf family proteins. The papillomavirus research is concerned with mechanisms of virus assembly, cell transformation by the viral oncogenes and their protein products, the epidemiology and natural history of papillomavirus infection, and the development of a vaccine against genital papillomavirus infection and cervical cancer.

Chief: Douglas R. Lowy, M.D.

The **Laboratory of Comparative Carcinogenesis** is a chemical carcinogenesis laboratory devoted to investigating mechanisms of action of carcinogenic agents. Its principal research emphases are currently on cell signaling during the neoplastic change, perinatal carcinogenesis, lung tumorigenesis and tumor promotion, developmental renal biology, carcinogenic metals, and nitric oxide and the pharmacologic potential of nitric oxide-generating compounds.

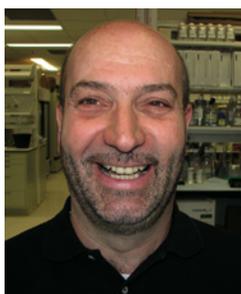
Chief: Larry K. Keefer, Ph.D.

The **Laboratory of Human Carcinogenesis** conducts investigations to assess: (1) mechanisms of carcinogenesis, including the cellular functions of tumor suppressor genes and oncogenes; (2) experimental approaches in biological systems for the extrapolation of carcinogenesis data and mechanisms from experimental animals to humans; and (3) molecular epidemiology of human cancer risk.

Chief: Curtis C. Harris, M.D.



Curtis Harris, M.D.,
Preceptor, Laboratory of
Human Carcinogenesis,
Center for Cancer
Research, NCI



Stefan Ambs, Ph.D.,
Preceptor, Laboratory of
Human Carcinogenesis,
The Breast and Prostate
Unit, Center for Cancer
Research, NCI

The **Breast and Prostate Unit** of the Laboratory of Human Carcinogenesis investigates the relative contribution of genetic and environmental factors to human breast and prostate cancer causation.

Head: Stefan Ambs, Ph.D.

The **Laboratory of Metabolism** conducts research in the areas of chemical carcinogenesis, mammalian development and gene control, and cell cycle control. It is composed of six sections focused on the study of: carcinogen metabolism, endocrinology, cell cycle regulation, high-mobility chromatin-associated proteins, gene regulation, and cytochrome P450s.

Chief: Frank Gonzalez, Ph.D.

The **Laboratory of Molecular Immunoregulation** performs fundamental research studies of the role of cytokines in inflammation, immunity, hematopoiesis, and cancer. Scientists engage in the discovery and development of new cytokines by studying the regulation of cytokine production at the gene level, the action of cytokines on target cells, and cytokine regulation of pathophysiological processes.

Chief: Joost J. Oppenheim, M.D.

The **Laboratory of Tumor Immunology and Biology** conducts research in the areas of tumor immunology, mechanisms of tumor cell-immune cell interactions, and immune mechanisms. The laboratory functions as an integrated translational research program with the goal of designing and developing new immunotherapies and immunologic strategies for cancer treatment and prevention.

Chief: Jeffrey Schlom, Ph.D.

The **Laboratory of Experimental Immunology** conducts studies on biological response modification and the application of these studies to cancer therapy. Basic science approaches utilize cellular, biochemical, and molecular techniques to study the regulation of cell-mediated immune effector mechanisms, cytokine gene expression and function, biochemistry of receptor-mediated signaling in leukocytes, and the biology of growth factors.

Chief: Giorgio Trinchieri, Ph.D.

The **Mammary Biology and Tumorigenesis Laboratory** conducts research on development, differentiation, and tumorigenesis in the mammary gland. The goal of the laboratory is to utilize multidisciplinary approaches encompassing areas, such as endocrinology, molecular genetics, stem cell biology, growth factors, oncogenes, cell signaling, and animal model systems, to understand the pathobiology of breast cancer.

Chief: Barbara Vonderhaar, Ph.D.



Barbara Vonderhaar, Ph.D.,
Preceptor, Laboratory
of Mammary Biology
and Tumorigenesis,
Center for Cancer
Research, NCI

The **Medical Oncology Branch** functions:

(1) To develop novel therapeutic research strategies for the treatment of cancer and to test those strategies by conducting clinical research in medical oncology; (2) To provide clinical care to adult cancer patients enrolled in research protocols; and (3) To train physician-scientists in a laboratory-to-clinic translational research setting to promote the development of their expertise in medical oncology research, and to support their certification by the American Board of Internal Medicine.

Chief: Giuseppe Giaccone, M.D.

The **Signal Transduction Section** in the Medical Oncology Branch is a multidisciplinary group that studies signaling pathways that contribute to lung tumorigenesis. Current efforts are focused on the role of the Akt/mTOR pathway. Ongoing areas of investigation include the development of novel Akt inhibitors, the development and utilization of genetically engineered and carcinogen-driven mouse models of lung cancer, and the implementation of clinical protocols with pathway inhibitors for patients at high risk to develop lung cancer.

Head: Philip Dennis, M.D.

Members of the **Mouse Cancer Genetics Program** make use of molecular mouse genetics as a primary tool to better understand the fundamental processes underlying mammalian development or human disease.

Director: Terry A. Van Dyke, Ph.D.

The **Laboratory of Protein Dynamics and Signaling** investigates mechanisms that regulate the fundamental cellular processes of differentiation, proliferation, survival, apoptosis, and tumorigenesis. Research is predicated on the concept that understanding normal cellular function and human disease requires a solid mechanistic comprehension of crucial signaling pathways, their points of intersection and divergence, as well as differential regulation by dynamic alterations in critical regulatory proteins.

Chief: Allan M. Weissman, M.D.

Office of the Director, NCI

The **Office of Cancer Complementary and Alternative Medicine** coordinates and enhances the activities of the NCI in the arena of complementary and alternative medicine (CAM), to increase the amount of high-quality cancer research in this field. The office promotes and supports research within CAM disciplines and modalities as they relate to the prevention, diagnosis, and treatment of cancer, cancer-related symptoms, and side effects of conventional treatment. Further information can be found at <http://cancer.gov/cam>.

Director: Jeffrey D. White, M.D.

NCI planning and priority setting through the **Office of Science Planning and Assessment (OSPA)** involves the integration of input from individuals at NCI on our advisory boards in other government agencies and in research, professional, and advocacy organizations. OSPA staff provide guidance and coordination for these efforts, working alongside NCI leaders and staff to articulate priorities, develop strategies and plans, and communicate them to stakeholders and the public. Further information can be found at <http://planning.cancer.gov/index.shtml>.

Acting Director: Margaret Ames, Ph.D.

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Post-Fellowship Employment

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The University of Texas at Brownsville and
Texas Southmost College

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National Institute on Alcohol Abuse
and Alcoholism
National Institute of Child Health
and Human Development
National Institute of Dental and
Craniofacial Research
National Institute on Nursing Research
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NCI, Division of Cancer Control
and Population Sciences
NCI, Division of Cancer Epidemiology
and Genetics
NCI, Division of Cancer Prevention
NCI, Division of Cancer Treatment
and Diagnosis
NCI, Division of Extramural Affairs
NCI, Office of Deputy Director for
Extramural Science
NCI, Office of Science Planning
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Life Outside the NCI

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Near the NIH campus, downtown Bethesda supports a diverse selection of more than 180 restaurants offering cuisine from all over the world.

Fifteen to 20 minutes away, Washington, D.C. offers magnificent monuments and world-class museums. The National Gallery of Art and the museums of the Smithsonian Institution are only the most obvious; smaller museums such as the Phillips Collection and the Corcoran Gallery of Art should not be overlooked. Other sightseeing opportunities such as the National Zoo, the Kennedy Center for the Performing Arts, the folk festivals, the cherry blossoms that bloom every spring, the numerous parades, and the many other worthwhile sightseeing adventures that are nearby. Washington has professional football, baseball,



basketball, and hockey teams. Washington's best known outdoor recreational area, Rock Creek Park, offers a spacious and beautiful landscape that is much appreciated and heavily used by bicyclists, runners, and picnickers.

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