IOM Study Will Probe NIH-Supported Cancer Research Affecting Minorities

The Institute of Medicine of the National Academy of Sciences is gearing up to develop a report on the status of cancer research on minorities and the medically underserved at the National Institutes of Health. The congressionally mandated report is expected to be completed in about 14 months.

"I don’t have to tell those of you in this audience about the need for this study," said Valerie Petit Setlow, Ph.D., IOM director of health sciences policy, at the 6th Biennial Symposium on Minorities, the Medically Underserved, and Cancer, held in Washington, D.C. Setlow said the IOM is recruiting a director for the study and is also seeking 12 to 15 people to serve on the committee.

Lovell A. Jones, Ph.D., co-director of the Intercultural Cancer Council (ICC) in Houston and director of experimental gynecology/endocrinology at the University of Texas M. D. Anderson Cancer Center, said the IOM study is part of a convergence of events that may herald a "golden era" of cancer research affecting minorities and the medically underserved.

Prestige and Independence

The IOM study was mandated in the omnibus appropriations bill passed by Congress and signed into law by President Clinton last September. ICC Washington director Thomas Brandt said that because of the prestige and independence of the IOM, he expects the study to be "above politics, free of racial cant, and clear of institutional bias."

Jones commended National Cancer Institute Director Richard Klausner, M.D., for his commitment to minorities, reflected in the establishment of an Office of Special Populations, headed by Otis Brawley, M.D.; an Office of Cancer Survivorship, headed by Anna Meadows, M.D., which will work to combat fatalistic attitudes about cancer among minorities; and a progress review group to evaluate NCI’s research on special populations. In addition, the new Director’s Consumer Liaison Group is specifically seeking members with multicultural diversity.

Jones said these developments, along with the creation of a National Cancer Policy Board requested by Klausner, lead him to believe that policy makers are finally getting serious about reducing the disproportionate cancer burden carried by minorities. He said there has never before been such a visible national focus on minorities and cancer, including incidence and mortality, genetics, environment, diet, behavior, and cultural factors affecting access to and provision of cancer care.

At the symposium, Kevin L. Thurm, deputy secretary of the U.S. Department of Health and Human Services, gave his personal pledge to narrow the gap in cancer rates between minorities and Caucasians. "I consider myself personally accountable," said Thurm. "We must work as partners in this effort. The burden of cancer is not shared equally. The gap is wide, and it is disturbing." He said both he and HHS Secretary Donna Shalala "share a deep commitment to ending these disparities."

Setlow said the IOM report will focus on:

- a review of the status of cancer research on minorities and the medically underserved at the various institutes, centers, and divisions of NIH to pinpoint the share of resources allocated to these population groups;
- a review of NIH’s ability to prioritize its cancer research agenda for minorities and the medically underserved;
- an assessment of the role of minority scientists in decision-making on research priorities;
- an examination of how well research results are communicated and applied to cancer prevention and treatment programs for minorities and the medically underserved, including how well people in these population groups understand the survivorship issues that uniquely affect them;
- an evaluation of the adequacy of NIH procedures for recruitment and retention of minorities and the medically underserved in clinical trials; and
- recommendations on the establishment of an annual reporting mechanism on the status of cancer research among minorities and the medically underserved at NIH.

— Peggy Eastman