

## STANFORD UNIVERSITY MEDICAL CENTER

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STANFORD UNIVERSITY SCHOOL OF MEDICINE Department of Genetics

Mr. Lee Goodman Subcommittee on Health Senate Labor Committee U.S. Senate Washington, D.C. 20510

Dear Mr. Goodman,

I am grateful for an opportunity to record my views concerning the pending bill, S. 34, for a National Cancer Authority.

May I call attention to the closing paragraph of the attached article on the "Cancer Crusade", as it was written and appeared in many newspapers a few weeks ago.

When the idea of a separate agency for Cancer was first proposed I favored it as a way to solve the problems summarized in that writing. Since then, a number of developments have led me to believe that a separate agency for cancer, while an improvement over some recent history of health research, is not the best choice among new directions. These developments include the President's new found but unambiguous commitment to health research in general, and to cancer in particular; evidence of a new balance, consistency and efficacy in the administration of HEW under Mr. Richardson's leadership, and the commendable and remarkably articulate commitment to the integrity of basic scientific work in the health field expressed by the new science adviser to the President, Mr. Edward David.

Mr. David, with some specificity, has addressed some of the disadvantages of extracting cancer work from the NIH, with which I firmly agree. These would have been more than outweighed by the disadvantages of attempting to mount a new initiative in the prevailing context of the last several years. If the Congress and the President are now able to unite in framing a strong commitment to a broadly based attack on the cancer problem, I would agree with Mr. David's formulation.

The problems that had beset health research within NIH were not, in my view, attributable to administrative weakness within NIH nearly as much as to the hindrances that NIH itself had to face within the HEW bureaucracy. This issue having finally reached well-deserved public attention, I would urge the subcommittee to press for a reorganization that would meet Mr. David's present formulation, and at the same time repair the faults observed by the Senate Panel for the Conquest of Cancer.

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To that end, I would now advocate that the Cancer Agency not be separated from NIH. Rather all health research should be knit together within a single agency, specifically an augmented and strengthened NIH, administered by an Assistant Secretary for Health Research reporting directly to the Secretary.

Whatever detailed bureaucratic arrangement is adopted, the civilian advisory councils have played an indispensable role in maintaining the scientific integrity of federal research grants programs. The draft bill S. 34 does not maintain an adequate line of authority for the new Cancer Advisory Board. This should certainly be no weaker than the Councils of the several institutes of NIH. I am myself painfully aware of some delays in the functioning of these councils, especially in response to opportunities for quick starts on innovative ideas; but this problem can be remedied by strengthening the councils. Specifically the councils should be enabled to delegate their authority to approve grants to the director, when procedures validated by the Council have been implemented. There are many other administrative problems, too detailed to go into here, that are a consequence of perhaps unduly strict interpretation (or draftsmanship) of the enabling legislation for the institutes -- I am sure you could get voluminous and competent testimony from the directors. Again in agreement with Mr. David, I would argue that the country would be better served by reinvigorating the NIH as an integral unit than by inventing new streamlined procedures for the benefit of an excised and transplanted cancer authority.

Sincerely yours,

Joshua Lederberg Professor of Genetics

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