searchers to follow in their investigations of potential new prognostic markers. Such guidelines, they argue, would provide standards for experimental design and ground rules for evaluating research results. The National Cancer Institute recently has begun to address these issues. NCI convened a workshop last September to determine standard methodologies for prognostic marker research. "The purpose of the workshop was to outline the 'ideal' process for evaluating prognostic markers," said Sheila Taube, Ph.D., chief of NCI's Cancer Diagnosis Branch. Taube said the working group is preparing a workshop report summarizing the questions that need to be addressed. "The next phase," said Taube, "will be to gather statisticians, clinicians, and laboratory researchers to work out the nuts and bolts of coming up with guidelines for evaluation of prognostic indicators."

— John Bowersox

**Committee Debates Use of Army Breast Cancer Funds**

Discussion of a workable method of peer review dominated debate during the first of several Institute of Medicine committee meetings aimed at determining how the Department of Defense can best spend its $210 million allocation for breast cancer research in 1993. The meeting last month was called as the result of a $325,000 contract between the IOM and the U.S. Army Medical Research and Development Command, the executive agent for the DOD's breast cancer research program. In the contract, the IOM agreed to provide a report and recommendation on how the research money should be spent (see News, February 3, 1993).

Representatives from a number of cancer and women's health organizations, including the National Cancer Institute, the American Cancer Society, and the National Breast Cancer Coalition, addressed the committee during the 2-day session.

Joseph F. Cassells, director of the IOM study, asked for each organization's perspectives on "the most effective programmatic and management strategies" for dispersing the new research funds. He specifically asked for input on strategies for implementing a timely yet effective peer review process, and for allocating the research funds within the constraints imposed by Congress and the Army.

**Unique Problem**

The IOM is faced with a unique problem in deciding how to advise the Army. The $210 million appropriation gives the Army more breast cancer research money than any other national agency, including NCI, which has a 1993 breast cancer research budget of $196.6 million. Yet the Army has no established system for dealing with breast cancer research funds on such a large scale. While the DOD has previously administered over $400 million for biomedical research, the Army's research focus has always been on combat medicine, and the previous defense allocation for breast cancer was only $25 million. Furthermore, there is no guarantee that the Army will receive similar allocations in the future, so the IOM is treating these funds as a one-time allocation.

"We need to find a way to coordinate, make certain there isn't duplication, because even with $400 million it is nowhere near enough, and we can't afford to waste a penny of it," stated Fran Visco, Philadelphia, president of the National Breast Cancer Coalition, refer-

**A Healthier White House Without Smoke**

In 1877, First Lady Lucille Hayes prohibited alcohol from being served in the White House, earning praise from the Temperance movement and ire from hardcore drinkers, who dubbed her "Lemonade Lucy."

Stirred by recent reports on the dangers of second-hand smoke, President Clinton and Hillary Rodham Clinton recently put their own stamp on their new home by expanding a current smoking ban to include all areas of the White House. Smoking in the Executive Mansion had been banned previously by President Bush, but the ban only applied to the residential areas and the East Wing.

How the expanded ban will sit with diplomatic visitors who smoke isn't quite clear, but many believe a smoke-free White House sends a signal to all Americans about the health risks of this deadly habit. White House spokesman George Stephanopoulos hinted that there would be little latitude afforded to smoking guests, saying "I think [the ban] speaks for itself."

Lemonade Lucy would certainly approve.

— James Mathews
ring to the total federal breast cancer budget for 1993.

The NBCC is a grassroots advocacy group that helped persuade Congress to increase the funding for breast cancer research. The coalition was aided by Sen. Tom Harkin (D-Iowa), who serves on the Defense appropriations subcommittee and chairs the appropriations subcommittee on Labor, Health and Human Services, and Education.

Original Intent

Originally, the Army funds were to go to National Institutes of Health via a transfer amendment that would have shifted part of the Defense appropriation to the Department of Health and Human Services. This attempt failed due to a 1990 federal budget agreement prohibiting the transfer of defense surpluses to domestic programs; however, Harkin was successful in proposing a $185-million increase in the DOD's existing breast cancer research appropriation.

In response to concerns from various groups, Congress and the Army have placed a number of restrictions on how the money can be used.

The restrictions include a ban on the use of the funds for construction projects, and limitations on renovations and equipment purchases. All funded projects must be completed within 4 years of initiation, the program must be peer-reviewed, and all funds must be obligated by September 30, 1994. No funds can be reserved for specific individuals or organizations, and no large program grants will be made unless the components can be evaluated and funded separately. Finally, the Army will use 5% of the funds for program management.

Addressing the committee, Maj. Gen. Richard Travis, commander of the Army Medical Research and Development Command, said he favors basic research into cause and prevention, but that whatever the committee recommends "will be taken very seriously." He also said that he would consent to "piggyback on an existing system" for peer review.

Use NIH?

Several panelists at the meeting recommended that the DOD find some way to tie in or utilize NIH's existing peer review structure.

Dawn Willis, representing the American Cancer Society, said that "setting up a peer review system from scratch is no trivial task. We'd really like to recommend that the DOD use a good peer review system that's already in place. At the cancer society, we'd love to help if we can, but we do think that NIH has a good system."

Representatives from other organizations agreed with Willis. "Without question, the peer-review mechanisms established by the National Institutes of Health through its Division of Research Grants are the best suited to review disease-relevant basic and clinical research," said Craig Henderson, M.D., of the University of California, San Francisco, and representing the American Society of Clinical Oncology. "Potential reviewers will be more willing to commit time to this activity if it is coordinated by NIH."

Basic Research

The committee also discussed how the research funds should be divided. Ellen Stovall of the National Coalition for Cancer Survivorship noted that much of the current understanding of cancer has come from the basic study of cells, "particularly how cells divide and grow." Therefore, she said, "the NCCS recommends that basic research to prevent breast cancer receive 80% of the DOD funds."

Not everyone agreed with Stovall. "Presently, there remains a tremendous shortfall in funds for large-scale clinical studies," commented Henderson, citing a decrease in the number of clinical trials open in recent years.

Many panelists urged the committee to recommend funding new kinds of research. "The Department of Defense research program represents an opportunity to address important issues that have received limited attention from other funding agencies," said Lillian Nail of the Oncology Nursing Society. Participants also discussed several underfunded research areas, such as tumor registries, cancer prevention, and survivorship research.

While the committee made substantial progress during the first meeting, no decisions were made. "Nothing is off the table at this point," stated Cassells. The IOM plans two more committee meetings before delivering its recommendation to the Army in late April.

— Natalie S. Larsen