The National Cancer Institute was established in its current form by the National Cancer Act of 1971, signed into law by President Richard Nixon. This legislation was an amendment to the Public Health Service Act of 1944 and represented the U.S. commitment to what President Nixon described as the “war on cancer,” which had become the nation’s second leading cause of death by 1970.

The act granted broad authority to the Director of the NCI to plan and develop a National Cancer Program that included the NCI, other research institutes, and other federal and non-federal programs. It established the procedure for submitting NCI’s annual budget, called the “bypass budget,” which is transmitted directly from the NCI director to the President and Congress.

In addition to expanding the authority of the NCI director, the act required the creation of a new National Cancer Advisory Board (NCAB), a presidentially appointed committee of 18 members, to assist NCI in developing its programs. It also established the President’s Cancer Panel (PCP), a three-member panel that submits an annual report to the President and holds periodic public hearings.

With input from the NCAB, the NCI director may create new cancer centers and manpower training programs, appoint advisory committees, award contracts for research, expand the physical location at NIH and other research facilities, conduct cancer control activities, establish an international cancer research data bank, award research grants, and collaborate with other federal, state, or local public agencies and private industry.

Finally, the act provided additional funding for NCI to establish 15 new cancer research centers, local control programs, and an international cancer research data bank.

**Summary**

Senate Bill 1828 - Enacted December 23, 1971 (P.L. 92-218)

This bill strengthened the National Cancer Institute in carrying out the national effort against cancer by creating the National Cancer Program. It mandated the following:

- The Program be developed by the NCI director with the advice of the National Cancer Advisory Board (NCAB), a presidentially appointed committee of 18 members, including both distinguished scientists and laypersons from the general public. The NCAB also includes ex-officio members from other government agencies.
- A three-member panel, the President’s Cancer Panel (PCP), review the Program by holding periodic public hearings and submitting an annual progress report directly to the president.
• The annual budget of NCI, called the bypass budget, be submitted directly to the president, bypassing traditional approval by the National Institutes of Health (NIH) or the Department of Health and Human Services required of other NIH institutes.

• The NCI director and members of the NCAB and PCP be presidential appointees.

• The director of NCI was given additional authorities, in consultation with NCAB, under the act that include:
  
  • Create new cancer centers and manpower training programs
  • Appoint advisory committees, allowing the director to explore new issues/opportunities.
  • Expand the physical location at NIH and other research facilities across the country.
  • Award contracts for research
  • Collaborate with other federal, state, or local public agencies and private industry
  • Conduct cancer control activities
  • Establish an international cancer research data bank that collects, catalogues, stores, and disseminates results of cancer research
  • Award research grants

Committee Report

Committee Report No. 92-247 (June 28, 1971) –

The Committee on Labor and Public Welfare submitted the following report to accompany S. 1828. 92nd Congress, 1st Session.

Excerpts from Committee Views

“There is broad agreement that cancer research has advanced to the stage where a substantial increase in resources and effort could be very productive. There seems to be a consensus among cancer researcher that they are within striking distance of achieving the basic understanding of cancer cells which has eluded the most brilliant medical minds in the world. While it is true that breakthroughs in science are often serendipitous, and cannot be forced, the committee feels that a substantial increase in resources, along with increased organization efficiency will shorten the time necessary to achieve them.”

• The committee believes that effective implementation of a substantially increased effort against cancer will require strengthening of present organizational arrangement within NIH.

• The committee agrees that to completely separate the cancer research effort from the NIH could endanger the overall biomedical research effort. The committee feels, however, that S. 1828, as reported, will meet the objectives of the Cancer Panel, while preserving the integrity of biomedical research by keeping the increased cancer research program within the framework of the NIH.

• The committee is cognizant of the extreme difficulty in mounting a program of the size and scope of that here envisioned and doubts that it could be accomplished within present arrangements for the NCI, although the Institute has been very effective in utilizing the resources allocated to it.

• The Committee understands that since the President has stated he will assume personal command of the program, and that he wants the Director to be personally accountable to him, he does not intend to make broader use of this authority. It is therefore the Committee’s intent that the Director be treated under the Budget and Accounting Act of 1921 as a head of a department or establishment of Government. In this regard, the Committee intends that the Director of the Cancer Conquest Agency will
make a copy of the Agency’s annual budget and program available to the Direct of the NIH not later than the time of its submission to the President.

- The committee hopes that the existing peer review system so highly regarded by the scientific community will be continued. The committee feels, however, that the extraordinary demands placed on this new cancer program may require the creation of new mechanisms of peer review. The bill therefore authorizes the Director to establish, with the approval of the NCAB, other formal peer review groups as may be required.

- The committee felt that the NCAB would be required to make decisions and recommendation that are largely scientific in nature, and therefore it should contain a predominance of scientific and medical personnel, while at the same time having the laymen public point of view represented.

Legislative Background to the Conquest of Cancer Act

**Senate Resolution 376:** Introduced March 25, 1970

This resolution authorized the Committee on Labor and Public Welfare to study cancer research activities, calling for a report on the present status of scientific research conducted by governmental and non-governmental agencies to ascertain the causes and develop means for the treatment, cure and elimination of cancer.

- On April 15, 1970, the Committee reported out Senate Resolution 376 for referral to the Senate Committee on Rules and Administration. The Resolution passed the Senate by unanimous vote on April 27, 1970.

- The sum of $250,000 was authorized to the Committee to carry out this cancer study.

- To carry out the study, The Committee established a panel of Consultants on the Conquest of Cancer, composed of 13 eminent laymen and 13 eminent scientists. The panel met on June 29, 1970 and was asked to submit its report no later than December 15, 1970.

- A House Concurrent Resolution 675 was introduced July 15, 1970 and passed by both the House and the Senate expressing the unanimous sense that the Conquest of Cancer is a national crusade.

**Report of the Panel of Consultants:** “A National Program for the Conquest of Cancer”

The report was transmitted to the Committee on Labor and Public Welfare on November 25, 1970; (Report No. 91-1402, 91st Congress, 2nd Session) ordered to be printed as Senate Document No. 92-9. The principal findings and recommendations of the Panel were as follows:

- Cancer is the number one health concern of the American people and cancer incidence is increasing.

- The nature of cancer is not yet fully known and the amount spent on cancer is grossly inadequate. In 1969, for every man woman and child the U.S. spent only $0.889 on cancer research.

- The cure rate for cancer is gradually improving. In 1930 we were able to cure only about one case in five; today we cure one in three, but the cure rate can be improved by a better application of the knowledge that we know today.

- The development of a comprehensive national program for the conquest of cancer is now essential. Such a program will require three major ingredients that are not present today: effective administration with clearly defined authority and responsibility, a comprehensive national plan and necessary financial resources.

**Senate Bills to Implement the Panel Report:** S. 4564(91st Congress), S. 34 (92nd Congress)
On December 4, 1970, Senator Yarborough introduced S. 4564, the Conquest of Cancer Act, which was based on the recommendations of the Panel of Consultants.

- While no action could be taken on this bill in the few days remaining for the 91st Congress, a similar bill (S. 34) was introduced in the 92nd Congress on January 25, 1971.

**President’s Second Supplemental Appropriation Bill: May 24, 1971**

Following the delivery of two important statements, President Nixon called for a total national commitment to an intensive campaign to find a cure for cancer.

- He stated that he would ask for an appropriation of an extra $100 million and that he would establish a Cancer Conquest Program.
- The passage of this bill made the additional appropriated funds available on July 1, 1971.
- On May 11, 1971, Senator Dominick and Senator Griffin introduced on behalf of the administration, S. 1828, an “Act to Conquer Cancer.”

**Bill Text**

PUBLIC LAW 92-218
92ND CONGRESS, S. 1828
DECEMBER 23, 1971
AN ACT

To amend the Public Health Service Act so as to strengthen the National Cancer Institute of Health in order more effectively to carry out the national effort against cancer.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled.

**Short Title**

SECTION 1. This Act may be cited as "The National Cancer Act of 1971".

**Findings and Declaration of Purpose**

SEC. 2.

(a) The Congress finds and declares:

(1) that the incidence of cancer is increasing and cancer is the disease which is the major health concern of Americans today;

(2) that new scientific leads, if comprehensively and energetically exploited, may significantly advance the time when more adequate preventive and therapeutic capabilities are available to cope with cancer;

(3) that cancer is a leading cause of death in the United States;

(4) that the present state of our understanding of cancer is a consequence of broad advances across the full scope of the biomedical sciences;

(5) that a great opportunity is offered as a result of recent advances in the knowledge of this dread disease to conduct energetically a national program against cancer;
(6) that in order to provide for the most effective attack on cancer it is important to use all of the biomedical resources of the National Institutes of Health; and

(7) that the programs of the research institutes which comprise the National Institutes of Health have made it possible to bring into being the most productive scientific community centered upon health and disease that the world has ever known.

(b) It is the purpose of this Act to enlarge the authorities of the National Cancer Institute and the National Institutes of Health in order to advance the national effort against cancer.

**National Cancer Program**

SEC. 3.

(a) Part A of title IV of the Public Health Service Act is amended by adding after section 406 the following new sections:

SEC. 407.

(a) The Director of the National Cancer Institute shall coordinate all of the activities of the National Institutes of Health relating to cancer with the National Cancer Program.

(b) In carrying out the National Cancer program, the Director of the National Cancer Institute shall:

(1) With the advice of the National Cancer Advisory Board, plan and develop an expanded, intensified, and coordinated cancer research program encompassing the programs of the National Cancer Institute, related programs of the other research institutes, and other Federal and non-Federal programs.

(2) Expeditiously utilize existing research facilities and personnel of the National Institutes of Health for accelerated exploration of opportunities in areas of special promise.

(3) Encourage and coordinate cancer research by industrial concerns where such concerns evidence a particular capability for such research.

(4) Collect, analyze, and disseminate all data useful in the prevention, diagnosis, and treatment of cancer, including the establishment of an international cancer research data bank to collect, catalog, store, and disseminate insofar as feasible the results of cancer research undertaken in any country for the use of any person involved in cancer research in any country.

(5) Establish or support the large-scale production or distribution of specialized biological materials and other therapeutic substances for research and set standards of safety and care for persons using such materials.

(6) Support research in the cancer field outside the United States by highly qualified foreign nationals which research can be expected to inure to the benefit of the American people; support collaborative research involving American and foreign participants; and support the training of American scientists abroad and foreign scientists in the United States.

(7) Support appropriate manpower programs of training in fundamental sciences and clinical disciplines to provide an expanded and continuing manpower base from which to select investigators, physicians, and allied health professions personnel, for participation in clinical and basic research and treatment programs relating to cancer, including where appropriate the use of training stipends, fellowships, and career awards.
(8) Call special meetings of the National Cancer Advisory Board at such times and in such places as the Director deems necessary in order to consult with, obtain advice from, or to secure the approval of projects, programs, or other actions to be undertaken without delay in order to gain maximum benefit from a new scientific or technical finding.

(9) (A) Prepare and submit, directly to the President for review and transmittal to Congress, an annual budget estimate for the National Cancer Program, after reasonable opportunity for comment (but without change) by the Secretary, the Director of the National Institutes of Health, and the National Cancer Advisory Board; and (B) receive from the President and the Office of Management and Budget directly all funds appropriated by Congress for obligation and expenditure by the National Cancer Institute.

(c) There is established the President’s Cancer Panel (hereinafter in this section referred to as the 'Panel') which shall be composed of three persons appointed by the President, who by virtue of their training, experience, and background are exceptionally qualified to appraise the National Cancer Program. At least two of the members of the Panel shall be distinguished scientists or physicians.

(2) (A) Members of the Panel shall be appointed for three-year terms, except that (i) in the case of two of the members first appointed, one shall be appointed for a term of one year and one shall be appointed for a term of two years, as designated by the President at the time of appointment, and (ii) any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed only for the remainder of such term.

(B) The president shall designate one of the members to serve as Chairman for a term of one year.

(C) Members of the panel shall each be entitled to receive the daily equivalent of the annual rate of basic pay in effect for grade GS-18 of the General Schedule for each day (including traveltime) during which they are engaged in the actual performance of duties vested in the Panel, and shall be allowed travel expenses (including a per diem allowance) under section 5703(b) of title 5, United States Code.

(3) The Panel shall meet at the call of the Chairman, but not less often than twelve times a year. A transcript shall be kept of the proceedings of each meeting of the Panel, and the Chairman shall make such transcript available to the public.

(4) The Panel shall monitor the development and execution of the National Cancer Program under this section, and shall report directly to the President. Any delays or blockages in rapid execution of the Program shall immediately be brought to the attention of the President. The Panel shall submit to the President periodic progress reports on the Program and annually an evaluation of the efficacy of the Program and suggestions for improvements, and shall submit such other reports as the President shall direct. At the request of the President, it shall submit for his consideration a list of names of persons for consideration for appointment as Director of the National Cancer Institute.

**National Cancer Research and Demonstration Centers**

SEC. 408.

(a) The Director of the National Cancer Institute is authorized to provide for the establishment of fifteen new centers for clinical research, training, and demonstration of advanced diagnostic and treatment methods relating to cancer. Such centers may be supported under subsection (b) or under any other applicable provision of law.
(b) The Director of the National Cancer Institute, under policies established by the Director of the National Institutes of Health and after consultation with the National Cancer Advisory Board, is authorized to enter into cooperative agreements with public or private nonprofit agencies or institutions to pay all or part of the cost of planning, establishing, or strengthening, and providing basic operating support for existing or new centers (including, but not limited to, centers established under subsection (a) for clinical research, training, and demonstration of advanced diagnostic and treatment methods relating to cancer. Federal payments under this subsection in support of such cooperative agreements may be used for (1) construction (notwithstanding any limitation under section 405), (2) staffing and other basic operating costs, including such patient care costs as are required for research, (3) training (including training for allied health professions personnel), and (4) demonstration purposes; but support under this subsection (other than support for construction) shall not exceed $5,000,000 per year per center. Support of a center under this section may be for a period of not to exceed three years and may be extended by the Director of the National Cancer Institute for additional periods of not more than three years each, after review of the operations of such center by an appropriate scientific review group established by the Director of the National Cancer Institute.

Cancer Control Programs

SEC. 409.

(a) The Director of the National Cancer Institute shall establish programs as necessary for cooperation with State and other health agencies in the diagnosis, prevention, and treatment of cancer.

(b) There are authorized to be appropriated to carry out this section $20,000,000 for the fiscal year ending June 30, 1972, $30,000,000 for the fiscal year ending June 30, 1973, and $40,000,000 for the fiscal year ending June 30, 1974.

Authority of Director

SEC. 410.

The Director of the National Cancer Institute (after consultation with the National Cancer Advisory Board), in carrying out his functions in administering the National Cancer Program and without regard to any other provision of this Act, is authorized:

(1) if authorized by the National Cancer Advisory Board, to obtain (in accordance with section 309 of title 5, United States Code, but without regard to the limitation in such section on the number of days or the period of such service) the services of not more than fifty experts or consultants who have scientific or professional qualifications;

(2) to acquire, construct, improve, repair, operate, and maintain cancer centers, laboratories, research, and other necessary facilities and equipment, and related accommodations as may be necessary, and such other real or personal property (including patents) as the Director deems necessary; to acquire, without regard to the Act of March 3, 1877 (40 U.S.C. 340, by lease or otherwise through the Administrator of General Services, buildings or parts of buildings in the District of Columbia or communities located adjacent to the District of Columbia for the use of the National Cancer Institute for a period not to exceed ten years;

(3) to appoint one or more advisory committees composed of such private citizens and officials of Federal, State, and local governments as he deems desirable to advise him with respect to his functions;
(4) to utilize, with their consent, the services, equipment, personnel, information, and facilities of other Federal, State, or local public agencies, with or without reimbursement therefor;

(5) to accept voluntary and uncompensated services;

(6) to accept unconditional gifts, or donations of services, money, or property, real, personal, or mixed, tangible or intangible;

(7) to enter into such contracts, leases, cooperative agreements, or other transactions, without regard to sections 3648 and 3709 of the Revised Statutes of the United States (31 U.S.C. 529, 41 U.S.C. 5), as may be necessary in the conduct of his functions, with any public agency, or with any person, firm, association, corporation, or educational institution; and

(8) to take necessary action to insure that all channels for the dissemination and exchange of scientific knowledge and information are maintained between the National Cancer Institute and the other scientific, medical, and biomedical disciplines and organizations nationally and internationally.

Scientific Review; Reports

SEC. 410A.

(a) The Director of the National Cancer Institute shall, by regulation, provide for proper scientific review of all research grants and programs over which he has authority (1) by utilizing, to the maximum extent possible, appropriate peer review groups established within the National Institutes of Health and composed principally of non-Federal scientists and other experts in the scientific and disease fields, and (2) when appropriate, by establishing, with the approval of the National Cancer Advisory Board and the Director of the National Institutes of Health, other formal peer review groups as may be required.

(b) The Director of the National Cancer Institute shall, as soon as practicable after the end of each calendar year, prepare in consultation with the National Cancer Advisory Board and submit to the President for transmittal to the Congress a report on the activities, progress, and accomplishments under the National Cancer Program during the preceding calendar year and a plan for the Program during the next five years.

National Cancer Advisory Board

SEC. 410B.

(a) There is established in the National Cancer Institute a National Cancer Advisory Board (hereinafter in this section referred to as the 'Board') to be composed of twenty-three members as follows:

(1) The Secretary, the Director of the Office of Science and Technology, the Director of the National Institutes of Health, the chief medical officer of the Veterans' Administration (or his designee), and a medical officer designated by the Secretary of Defense shall be ex officio members of the Board.

(2) Eighteen members appointed by the President. Not more than twelve of the appointed members of the Board shall be scientists or physicians and not more than eight of the appointed members shall be representatives from the general public. The scientists and physicians appointed to the Board shall be appointed from persons who are among the leading scientific or medical authorities outstanding in the study, diagnosis, or treatment of cancer or in fields related thereto. Each appointed member of the Board shall be appointed from among persons who by virtue of their training, experience, and background are especially qualified to appraise the programs of the National Cancer Institute.
(b) (1) Appointed members shall be appointed for six-year terms, except that of the members of first appointed six shall be appointed for a term of two years, and six shall be appointed for a term of four years, as designated by the President at the time of appointment.

(2) Any member appointed to fill a vacancy occurring prior to expiration of the term for which his predecessor was appointed shall serve only for the remainder of such term. Appointed members shall be eligible for reappointment and may serve after the expiration of their terms until their successors have taken office.

(3) A vacancy in the Board shall not affect its activities, and twelve members thereof shall constitute a quorum.

(4) The Board shall supersede the existing National Advisory Cancer Council, and the appointed members of the Council serving on the effective date of this section shall serve as additional members of the Board for the duration of their terms then existing, or for such shorter time as the President may prescribe.

(c) The President shall designate one of the appointed members to serve as Chairman for a term of two years.

(d) The Board shall meet at the call of the Director of the National Cancer Institute or the Chairman, but not less often than four times a year and shall advise and assist the Director of the National Cancer Institute with respect to the National Cancer Program.

(e) The Director of the National Cancer Institute shall designate a member of the staff of the Institute to act as Executive Secretary of the Board.

(f) The Board may hold such hearings, take such testimony, and sit and act at such times and places as the Board deems advisable to investigate programs and activities of the National Cancer Program.

(g) The Board shall submit a report to the President for transmittal to the Congress not later than January 31 of each year on the progress of the National Cancer Program toward the accomplishment of its objectives.

(h) Members of the Board who are not officers or employees of the United States shall receive for each day they are engaged in the performance of the duties of the Board compensation at rates not to exceed the daily equivalent of the annual rate in effect for GS-18 of the General Schedule, including travel time; and all members, while so serving away from their homes or regular places of business, may be allowed travel expenses, including per diem in lieu of subsistence, in the same manner as such expenses are authorized by section 5703, title 5, United States Code, for person in the Government service employed intermittently.

(i) The Director of the National Cancer Institute shall make available to the Board such staff, information, and other assistance as it may require to carry out its activities.

Authorization of Appropriations

SEC. 410C.

For the purpose of carrying out this part (other than section 409), there are authorized to be appropriated $400,000,000 for the fiscal year ending June 30, 1972; $500,000,000 for the fiscal year ending June 30, 1973; and $600,000,000 for the fiscal year ending June 30, 1974.

(b) (1) Section 402 of the Public Health Service Act is amended by adding at the end thereof the following:
(b) Under procedures approved by the Director of the National Institutes of Health, the Director of the National Cancer Institute may approve grants under this Act for cancer research or training

(1) in amounts not to exceed $35,000 after appropriate review for scientific merit but without the review and recommendation by the National Cancer Advisory Board prescribed by section 403

(c), and

(2) in amounts exceeding $35,000 after appropriate review for scientific merit and recommendation for approval by such Board as prescribed by section "403(c)."

(2) Section 402 of such Act is further amended:

(A) by inserting "(a)" immediately after "Sec. 402."; and

(B) by redesignating paragraphs (a), (b), (c), (d), (e), (f), and (g) as paragraphs (1), (2), (3), (4), (5), (6), and (7), respectively. (3) Section 403(c) of such Act is amended by striking out "In carrying out" and inserting in lieu thereof "Except as provided in section 402(b), in carrying out".

Report to Congress

SEC. 4.

(a) The President shall carry out a review of all administrative processes under which the National Cancer Program, established under part A of title IV of the Public Health Service Act, will operate, including the processes of advisory council and peer group reviews, in order to assure the most expeditious accomplishment of the objectives of the Program. Within one year of the date of enactment of this Act the President shall submit a report to Congress of the findings of such review and the actions taken to facilitate the conduct of the Program, together with recommendations for any needed legislative changes.

(b) The President shall request of the Congress without delay such additional appropriations (including increased authorizations) as are required to pursue immediately any development in the National Cancer Program requiring prompt and expeditious support and for which regularly appropriated funds are not available.

Presidential Appointments

SEC. 5.

Title IV of the Public Health Service Act is amended by adding after part F the following new part:

Part G: Administrative Provisions

Directors of Institutes

SEC. 454.

The Director of the National Institutes of Health and the Director of the National Cancer Institute shall be appointed by the President. Except as provided in section 407(b)(9), the Director of the National Cancer Institute shall report directly to the Director of the National Institutes of Health.

Conforming Amendments

SEC. 6.

(a)(1) Section 217 of the Public Health Service Act is amended:

(A) by striking out "National Advisory Cancer Council," each place it occurs in subsection

(a), and

(B) by striking out "cancer," in subsections (a) and (b) of such section.

(2) Sections 301(d), 301(i), 402, and 403(c) of such Act are each amended by striking out "National Advisory Cancer Council" and inserting in lieu thereof "National Cancer Advisory Board".

(3) Section 403(b) of such Act is amended by striking out "National Cancer Advisory Council" and inserting in lieu thereof "National Cancer Advisory Board".

(4) Section 404 of such Act is amended:

(A) by striking out "council" in the matter preceding paragraph (a) and inserting in lieu thereof "National Cancer Advisory Board", and

(B) by striking out "COUNCIL" in the section heading and inserting in lieu thereof "BOARD".

Effective Date

SEC. 7.

(a) This Act and the amendments made by this Act shall take effect sixty days after the date of enactment of this Act or on such prior date after the date of enactment of this Act as the President shall prescribe and publish in the Federal Register.

(b) The first sentence of section 454 of the Public Health Service Act (added by section 5 of this Act) shall apply only with respect to appointments made after the effective date of this Act (as prescribed by subsection (a)).

(c) Notwithstanding the provisions of subsection (a), members of the National Cancer Advisory Board (authorized under section 410B of the Public Health Service Act, as added by this Act) may be appointed, in the manner provided for in such section, at any time after the date of enactment of this Act. Such officers shall be compensated from the date they first take office, at the rates provided for in such section 410B.

Approved December 23, 1971

Posted: February 16, 2016

Most text on the National Cancer Institute website may be reproduced or reused freely. The National Cancer Institute should be credited as the source. Please note that blog posts that are written by individuals from outside the government may be owned by the writer, and graphics may be owned by their creator. In such cases, it is necessary to contact the writer, artist, or publisher to obtain permission for reuse.