Chapter 15

AIDS Malignancy Clinical Research: Resources of the National Cancer Institute

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Many opportunities to answer research questions raised by AIDS malignancies can be addressed through the programs and resources of the National Cancer Institute (NCI). A description of the NCI and its programs and budget can be found at http://www.cancer.gov, and are described in greater detail in this review.

1. RESOURCES FOR CLINICAL RESEARCH

A strong clinical research infrastructure, including a comprehensive program of clinical trials in treatment, early detection, and prevention, is an essential feature of NCI’s research program. Clinical trials are supported through these and other research mechanisms, such as individual research project grants, program project grants, cooperative agreements, and contracts. NCI’s Cancer Centers, the National Institute of Allergy and Infectious Diseases’ (NIAID) Centers for AIDS Research (CFARs), NCI’s and NIAID’s Clinical Trial Cooperative Groups and Community Clinical Programs in Cancer and in AIDS, respectively, and the AIDS Malignancy Consortium (AMC) are where findings from the laboratory are translated into new treatments, diagnostic tools, and preventive interventions. To learn more about the Cooperative Group program visit the website at http://ctep.info.nih.gov.

1.1 AIDS Malignancy Consortium

The primary AIDS Malignancy cooperative clinical trial group today is the AIDS Malignancy Consortium (AMC). The NCI has funded AMC investigators
since 1995 to develop hypothesis-driven early phase clinical trials that utilize the expertise of NCI- and NIAID-sponsored scientists, and the role of the AMC was expanded in 1999 to conduct large randomized phase III clinical trials. The diseases under study include non-Hodgkin’s lymphoma, primary central nervous system lymphoma, Kaposi’s sarcoma, anogenital dysplasia and cancer.

1.2 Centers for AIDS Research

Beginning in 1998, the Centers for AIDS Research (CFAR) program, previously supported by one NIH Institute, the NIAID, will now be cooperatively funded by six NIH Institutes including NCI. This is intended to encourage expansion of the scientific breadth of the CFAR, to stimulate multidisciplinary interaction and collaboration, and to strengthen the scientific synergy of the Center relative to AIDS.

1.3 Cancer Centers

The centralized resources of the Cancer Centers benefit scientists who are supported by research grants dealing with cancer. The Cancer Centers program has periodically awarded one-time supplements to existing grants to stimulate research in AIDS-related malignancies.

2. INFRASTRUCTURE TO FACILITATE RESEARCH

2.1 Preclinical Collaborations

NCI has a strong tradition of leadership in retrovirus research dating back at least 4 decades. The program retains a very strong core of retrovirus research, distributed among laboratories at Bethesda and Frederick among intramural and contract laboratories, as well as in the extramural grant program. The structures and corresponding screening data on thousands of compounds not covered by confidentiality agreements and previously tested in the NCI screens have been released (http://www.dtp.nci.nih.gov). Information on how to obtain compounds or natural products from government-maintained repositories either as single agents or plated on 96-well plates is also being provided. A new program called Rapid Access to Intervention Development (RAID) is helping extramural investigators develop promising agents to clinical trial for the treatment of cancer and AIDS-related malignancies.