

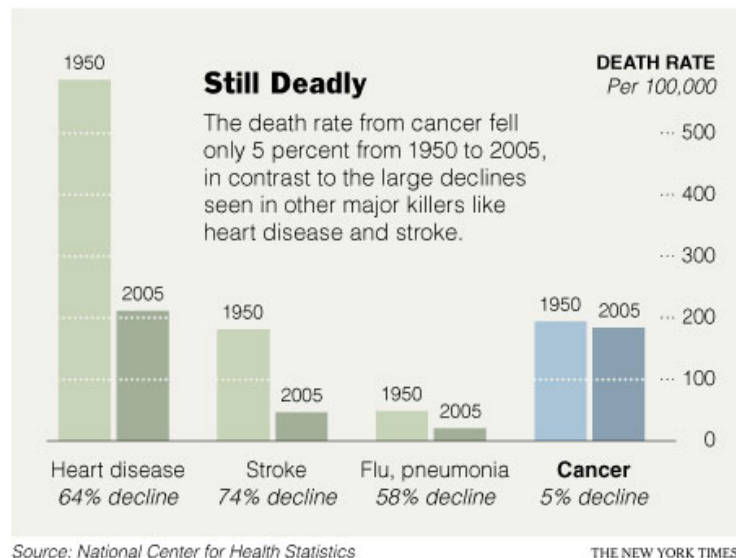
# Smarter Cancer Research: Finding a better way to survival

By Norman Scherzer  
LRG Executive Director

A recent *New York Times* article stated, “The National Cancer Institute has spent \$105 billion since President Richard M. Nixon declared war on the disease in 1971. The American Cancer Society, the largest private financier of cancer research, has spent about \$3.4 billion on research grants since 1946.

“Yet the fight against cancer is going slower than most had hoped, with only small changes in the death rate in the almost 40 years since it began.

“One major impediment, scientists agree, is the grant system itself. It has become a sort of jobs program, a way to keep research laboratories going year after year with the understanding that the focus will be on small projects unlikely to take significant steps toward curing cancer.” (See chart)



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There is a great difference in the thought process used for *earning money* and the thought process for *donating any of that money for research*.

In the first instance, considerable time, energy and thought is clearly accepted by most as the path to financial success. In the latter instance, even the most generous individuals usually give almost no thought to the relationship between their donation and successful cancer research. Instead, donating to the subject of cancer research takes on a noble end unto itself. It becomes an end when it should be a means.

This process of celebrating the act of donation rather than its practical impact upon actually finding a cure has become a part of our general culture and is a key to the fundraising efforts of the cancer business community—and make no mistake, cancer is big business.

The problem is that this process is not very effective in directing resources in a thoughtful way to finding better treatments for cancer patients. With rare cancers like GIST, this is particularly important because the total amount of money being donated is relatively small to begin with.

In the *Times* article, Dr. Richard D. Klausner, a former director of the National Cancer Institute says, “There is no conversation that I have ever had about the grant system that doesn’t have an incredible sense of consensus that it is not working. That is a terrible wasted opportunity for the scientists, patients, the nation and the world.”

There has to be a better way.

The Life Raft Group’s Pathway to a Cure *is* a better way, a unique approach to leveraging research dollars to provide the best chances of actually finding a cure for cancer.

So what do we do differently with the money we direct to research?

1. **We eliminate administrative overhead:** Traditionally, between 65 percent and 75 percent of the typical cancer donation goes to the administrative overhead of the institution sponsoring the research. This is called indirect costs. Donate 100 dollars to an institution and only **25 dollars to 35 dollars** actually reaches the researcher. In contrast, the Life Raft Group requires that its research grants go exclusively to the researcher. Donate 100 dollars through the LRG and all 100 dollars reaches the researcher.
2. **We have a strategic plan:** Traditionally, cancer funding is determined by individual investigators submitting their individual research proposals for review by a central panel which selects which to fund. In contrast, the LRG uses a strategic plan created by the world’s leading GIST researchers to guide what it will support. We then direct funding towards the implementation of this strategic plan by identifying which investigators are best equipped to achieve it. **This is the only strategic plan in the world specifically directed to find a cure for GIST.**
3. **We require that collaboration replace competition:** Traditionally, cancer researchers work on their own with the objective of publishing their results when their work is completed. Information is carefully guarded, publication is the goal, and competition to publish is a common part of the culture. In fact, one could spend their entire life achieving great success in research publications without adding a single day to the life span of a cancer patient. In contrast, the Life Raft Group requires that our investigators be part of a team which is committed to sharing information on an ongoing basis and coordinating their efforts. We also mandate that this team meet in person twice a year.
4. **We support this research with a coordinated tissue bank:** Traditionally, cancer researchers compete with one another to gain access to patient tissue. With rare cancers like GIST, this means that there is often not enough tissue to go around and that individual research results are not shared. Because of onerous confidentiality regulations, this also means that these researchers often do not have access to the patient’s medical history. In contrast, the Life Raft Group has set up a system which permits the world’s leading researchers to share tissue, to input their research results into a common database maintained by Stanford University and to access the patient’s medical histories maintained in the LRG’s patient registry. Confidentiality is protected by the Life Raft Group, which acts as the central receiving point for tissue and medical information and replaces the patient’s personal identifying information with a research coordination number.

5. **We have a world class research team:** Traditionally, cancer researchers work primarily on their own competing for the funding of individual projects. In contrast, the Life Raft Group's researchers have been proven to be at the top of their field and have joined together to form a world class research team.

**LRG Research Team**

*Brigham & Women's Hospital/Harvard Medical School:* Dr. Jonathan Fletcher, team leader

*Catholic University of Leuven Belgium:* Dr. Maria Debiec-Rychter

*Cleveland Clinic:* Dr. Brian Rubin

*Memorial Sloan Kettering Cancer Institute:* Dr. Cristina Antonescu and Dr. Peter Besmer

*Oregon Health and Science University:* Dr. Michael Heinrich and Dr. Chris Corless

*Stanford University:* Dr. Matthew van de Rijn, tissue bank leader and Dr. Robert West

*West German Cancer Center, Essen Germany:* Dr. Sebastian Bauer

*National Institutes of Health-Collaborating with the tissue bank:* Dr. Constantine Stratakis

**It is time to support smarter cancer research. The Life Raft Group's *Pathway to a Cure* is a smarter way.**