

International Agency for Research on Cancer



**Governing Council
Fifty-second Session**

**GC/52/14
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Auditorium*

ACCEPTANCE OF GRANTS AND CONTRACTS

1. Post facto reporting

The Governing Council is invited to note the post facto reporting of grants and contracts accepted by the Director over US\$ 100 000 per annum, including sums passed to third parties, as detailed below.

Fellowships (FEL)

1.1 Project title: IARC International Fellowships Programme

One of the statutory functions of the International Agency for Research on Cancer (IARC) in its mission to promote international collaboration and support of all phases of cancer research is the training and education of personnel. The Agency seeks to achieve this aim through IARC's International Fellowship Programme and its International Courses Programme which are designed to assist the development of cancer research and prevention in all countries, with special emphasis on low- and medium-resource countries, as well as those in which such work is not well-established, and to train future collaborators in the scientific programme of the Agency. The aim of IARC's Research Training Fellowships is to provide young scientists with training in a research Group at the Agency in aspects of cancer research ranging from biostatistics and epidemiology to environmental chemical carcinogenesis and mechanisms of carcinogenesis. IARC is particularly keen to promote the development of expertise in cancer research in low- and medium-resource countries by training postdoctoral researchers from these countries so that they can return to their own country to implement and develop programmes in cancer research or cancer control as well as by training postdoctoral researchers from high-resource countries with projects of benefit to low- and medium-resource countries.

Donor:	European Commission, Directorate General for Research (EC DG RTD), Belgium
Duration:	48 months
Funds for IARC:	US\$ 1 220 233 (Euro 839 520)
Funds for partners:	-
Total:	US\$ 1 220 233 (Euro 839 520)
Partners:	n/a

Section of Cancer Information (CIN)

1.2 Project title: **Optimisation of the Use of Registries for Scientific Excellence in Research (EUROCOURSE)**

EUROCOURSE will tackle fragmentation in the funding and usage of cancer registries in Europe. It will do so by exploring ways to link and integrate national/regional programmes aimed at supporting cancer registries and research carried out using registry data. At the same time EUROCOURSE is seeking to optimize the use of cancer registration data for the amelioration of cancer control and the strengthening of population-based cancer research in Europe. EUROCOURSE will therefore adopt a two-pronged approach. Firstly, funding organizations, i.e. programme owners and programme managers, will exchange information, best practice and technical know-how in order to harmonize the way cancer registries are funded and organized to combat cancer at the European level. A key barrier to advances in harmonizing the usage of cancer registries in this respect is a lack of collaboration among funding bodies in setting priorities for developing and implementing the capacity of cancer registries to improve cancer control. It is one of the major objectives of EUROCOURSE to change this. Secondly, cancer registries will be provided with the infrastructure necessary for harmonizing their data through exchange of technical know-how, best practices and the development of recommendations. Additionally, the process of data collection will be streamlined in order to provide comparable, accurate and timely statistics at the European level. Finally, information and recommendations, as well as examples of best practice will be provided on the issues of a) the evaluation of the effectiveness of screening programmes using cancer registries; b) the design of population-based genetic studies using biobanks and c) ethics.

Donor: European Commission, Directorate General for Research (EC DG RTD), Belgium, subcontract through the Comprehensive Cancer Center South, The Netherlands and the National Cancer Registry, Ireland.

Duration: 36 months

Funds for IARC: US\$ 350 140 (Euro 250 000)

Funds for partners: US\$ 2 450 151 (Euro 1 749 408)

Total: US\$ 2 800 291 (Euro 1 999 408)

Partners:

Comprehensive Cancer Center South, The Netherlands US\$ 856 746 (Euro 611 717)

Ministry of Public Health, Romania US\$ 19 188 (Euro 13 700)

University of Tartu, Estonia US\$ 4 202 (Euro 3000)

Statistics Austria, Austria US\$ 4 202 (Euro 3000)

Scientific Institute of Public Health, Belgium US\$ 4 202 (Euro 3000)

Danish Cancer Society, Denmark US\$ 307 856 (Euro 219 809)

National Board of Health, Denmark 4 202 (Euro 3000)

Cancer Society of Finland, Finland US\$ 212 352 (Euro 151 619)

Ministry of Health, Iceland US\$ 4 202 (Euro 3000)

Regional Centre for Cancer Prevention, Italy US\$ 435 793 (Euro 311 156)

Regional Oncologic Centre Board, Sweden US\$ 4 202 (Euro 3000)

Department of Health, Social Services and Public Safety, United Kingdom US\$ 4 202 (Euro 3000)

National Cancer Registry of Ireland, Ireland US\$ 364 909 (Euro 260 545)

Basque Foundation for Health Research and Innovation, Spain 4 202 (Euro 3000)

Skane County Council, Sweden US\$ 219 695 (Euro 156 862)

Nutritional Epidemiology Group (NEP)

1.3 Project title: Consortium on Health and Ageing: Network of Cohorts in Europe and the United States (CHANCES)

The CHANCES project aims at combining and integrating on-going cohort studies in order to produce evidence on ageing-related health characteristics and determinants in Europe, and their socio-economic implications. Twelve cohorts participate in the project, including the EPIC-Elderly study, the Esther study, the AGES-Reykjavik study, the MORGAM study, the Rotterdam Cohort study, the SENECA study, the Zutphen study, the Betula study, the Northern Sweden Health and Disease Study, the NIHAARP cohort study, the Nurses Health Study, and the SHARE study, covering populations from 18 EU Member States (Austria, Belgium, Czech Republic, Denmark, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Lithuania, the Netherlands, Portugal, Poland, Spain, Sweden, and United Kingdom), four associate countries (Iceland, Israel, Norway and Switzerland) and three additional countries (Australia, Russian Federation and United States of America). The combination of these different types of studies would lead to an integrated approach to the study of health in the elderly. The project will address five main types of health related characteristics: (i) occurrence (incidence) of chronic conditions, disabilities and mortality; (ii) presence (prevalence) of chronic conditions and disabilities; (iii) health-related determinants (risk factors) of chronic conditions and disabilities; (iv) ageing-related characteristics as determinants of chronic condition, disabilities and mortality; and (v) social and economic implications of chronic conditions, disabilities and mortality in the elderly. For the purpose of this project, the limit of 60 years of age is selected to define the elderly. However, most cohorts included in the consortium include subjects aged 50 or over, and separate analyses will be conducted on health-related characteristics and determinants in subjects aged 50–59, 60–69 and 70+ years. Health-related determinants comprise (i) socio-economic factors (e.g. education, income), (ii) environmental factors (e.g. occupational exposures), (iii) lifestyle factors (e.g. tobacco smoking, alcohol drinking), and (iv) nutritional factors (e.g. BMI, dietary patterns), in addition to biomarkers and genetic factors. Examples of ageing-related characteristics are retirement age, and extension of social networks. The economic implications of health characteristics and determinants in the elderly population will be studied. Four major groups of chronic conditions and disabilities will be studied: (i) cancer; (ii) diabetes and cardiovascular diseases; (iii) fractures and osteoporosis; (iv) cognitive function and Alzheimer disease. IARC will be the leader partner in the Work Package on cancer. Each cohort study included in the consortium will provide information on one or more chronic conditions and disabilities. Information on other conditions and disabilities (e.g. eye diseases, chronic respiratory conditions) will be collected if available and will be used in further studies. Mortality will be assessed in terms of age-specific rates as well as disability-adjusted life years (DALYs). In addition to reaching its specific goals, the study will generate a unique resource for additional

studies on health and its determinants in the elderly. Provisions will be made for access to other researchers.

Donor: European Commission, Directorate General for Research (EC DG RTD), Belgium, through Hellenic Health Foundation, Greece.

Duration: 60 months

Funds for IARC: US\$ 664 190 (Euro 474 232)

Funds for partners: US\$ 16 047 852 (Euro 11 458 166)

Total: US\$ 16 712 042 (Euro 11 932 398)

Partners:

Hellenic Health Foundation, Greece US\$ 3 312 381 (Euro 2 365 040)

National and Kapodistrian University of Athens, Greece US\$ 1 074 368 (Euro 767 099)

Umea University, Sweden US\$ 2 080 190 (Euro 1 485 256)

National Institute for Public Health and the Environment, The Netherlands US\$ 746 625 (Euro 533 090)

Wageningen University, The Netherlands US\$ 499 615 (Euro 356 725)

German Cancer Research Centre, Germany US\$ 1 375 085 (Euro 981 811)

Danish Cancer Society, Denmark 563 333 (Euro 402 220)

Cancer Society of Finland, Finland US\$ 1 153 501 (Euro 823 600)

Erasmus University Medical Centre, The Netherlands US\$ 761 513 (Euro 543 720)

University Mannheim, Germany US\$ 1 281 997 (Euro 915 346)

Queen's University Belfast, United Kingdom US\$ 873 860 (Euro 623 936)

National Institute for Health and Welfare, Finland US\$ 620 840 (Euro 443 280)

The Brigham and Women's Hospital, United States US\$ 364 909 (Euro 260 545)

University College London, United Kingdom 1 406 225 (Euro 1 004 044)

Tromsø University, Norway US\$ 298 318 (Euro 212 999)

1.4 Project title: **The Influence of Lifestyle, Diet, Obesity and Inflammation on the Risk of Hepatocellular Carcinoma (HCC) and Cholangiocarcinoma (CCA): A Comprehensive Prospective Investigation based on French and European Cohorts in the EPIC Study (EPIC-LIVER)**

The main objective of this proposed study is to prospectively investigate the risk of HCC/CCA in association with key dietary, lifestyle, metabolic and hormonal factors with consideration of blood measures of several important biomarkers of these factors as well as HBV/HCV infection status. The second objective is to determine the potential interactions of these factors on the risk of HCC/CCA. The third objective is to utilize novel proteomic methodologies to assess protein changes in plasma to identify early pre-diagnostic biomarkers of HCC/CCA risk. To achieve these objectives a nested case-control study will be conducted based on the prospective EPIC study. EPIC has over 520 000 subjects enrolled and is a collaborative network of cohorts

from 10 European countries (23 centres) including the large French E3N cohort (four centres). Epidemiologic (diet/lifestyle) questionnaires and blood (stored under liquid nitrogen at -196°C) have been collected from subjects. A nested case-control study design with 1:2 incidence density matching of control subjects will be used for 216 HCC and 88 CCA cases with available blood samples. Dietary variables (food groups: fruits, vegetables, dairy, red/processed meats; specific foods: coffee; nutrients: iron, β -carotene, vitamin C/E, fat, fat subtypes) will be determined from country-specific questionnaires. Serum/plasma samples will be utilized to measure relevant biomarkers pertaining to: body iron status (serum iron, transferrin, ferritin, UIBC, TIBC), obesity (fetuin, leptin), inflammation (interleukin-6, C-reactive protein, tumour necrosis factor- α), hyperinsulinemia/insulin sensitivity (c-peptide, total/HMW adiponectin), IGF-I, testosterone and sex-hormone binding globulin. In addition, laboratory analyses will be conducted to determine hepatitis B/C infection status, α -feto-protein levels and enzymes of liver function. Anthropometric measures (height, weight, waist/hip ratio, waist/hip circumference etc.) are interviewer measured (most centres) or self-reported (minority of centres). Statistical analyses will be conducted using multivariate conditional logistic regression models for all questionnaire and biomarker factors, adjusted as appropriate by confounding variables defined a priori. Interaction models will also be run for all factors.

Donor:	Institut National du Cancer (INCA), France, through INSERM, France
Duration:	36 months
Funds for IARC:	US\$ 381 626 (Euro 257 979)
Funds for partners:	US\$ 218 757 (Euro 147 880)
Total:	US\$ 600 383 (Euro 405 859)

Partners:

INSERM, France US\$ 120 391 (Euro 81 384)

Centre de Biologie République, France US\$ 98 367 (Euro 66 496)

Lifestyle and Cancer Group (LCA)

1.5 Project title: **Pricing Policies and Control of Tobacco in Europe (PPACTE)**

Price is the single most important intervention in tobacco control (TC). To protect the health of its citizens the EU now has a major role in regulating tobacco fiscal policy (FP) through a number of EU directives. The aims of these directives initially were to ensure the proper functioning of the internal market but now with EU enlargement cigarette price differentials among countries have increased problems for the market, the efficient control of tobacco use and public health. Price elasticity of tobacco product is estimated using econometric analysis of demand but is limited in Member States (MS) by availability of relevant data. The interaction of FP with other TC policies is poorly defined. The effects of price on tobacco product smuggling and the tobacco industry response to price changes are complex. These challenges and their interplay will be addressed by the research conducted in PPACTE. Within this project, IARC will convene a group of experts to conduct a critical review and evaluation of the published evidence on the effectiveness of tax and price policies for tobacco control which will be developed into IARC Handbook volume 14. In concomitance within this project, a new cross sectional survey in

18 countries in Europe will provide standardized data on tobacco use and the economics of tobacco for EU MS. In addition, through new research, we will examine the effect of the rate of price changes on tobacco consumption using historical data comparing steep rapid changes (e.g. in France) with gradual changes (e.g. UK, Ireland). Using the simulation model SimSmoke we will examine the effects of the interaction of price with: smoking cessation services, smuggling in high (Finland, Ireland, UK) and low (Baltic, Romania) price countries, smoke-free laws (Ireland, Scotland, Italy), advertising and warnings (Belgium, UK) and predict the effects on other MS with the ultimate goal of identifying interventions for more effective and equitable control of tobacco use in Europe and associated public health benefit.

Donor: European Commission, Directorate General for Research (EC DG RTD), Belgium through Research Organisation for a Tobacco Free Society (RIFTFS)

Duration: 36 months

Funds for IARC: US\$ 521 328 (Euro 395 688)

Funds for partners: US\$ 3 420 248 (Euro 2 595 968)

Total: US\$ 3 941 576 (Euro 2 991 656)

Partners:

Research Institute for a Tobacco Free Society, Ireland US\$ 1 146 553 (Euro 870 234)

University of Bath, School for Health, United Kingdom US\$ 604 510 (Euro 458 823)

Pacific Institute for Research and Evaluation, USA US\$ 193 781 (Euro 147 080)

Istituto di Ricerche Farmacologiche Mario Negri, Italy US\$ 680 986 (Euro 516 868)

Institute Catala d'Oncologia, Spain US\$ 36 316 (Euro 27 564)

International Union Against Tuberculosis and Lung Disease, France US\$ 174 552 (Euro 132 485)

Centre for Health Economics, Finland US\$ 583 549 (Euro 442 914)

IARC Monographs (IMO)

1.6 Project title: **IARC Monograph Programme**

The IARC Monographs Programme is an international, interdisciplinary approach to carcinogenic hazard identification. Its principal product is the serial publication, IARC Monographs on the Evaluation of Carcinogenic Risks to Humans, which began in 1971 in accordance with one of the fundamental missions of the Agency: to prepare and distribute authoritative information on human cancer and especially on its causes and prevention. Reviews and evaluations of nominated agents and exposures are carried out by scientific experts who are invited to participate on the basis of their contributions to the relevant areas of science. Each Monograph consists of a comprehensive, critical summary and review of the published scientific literature, and since 1987 each concludes with an evaluation of the total evidence of carcinogenicity to humans. Two or three volumes of the Monographs are prepared annually. The Monographs have evolved into what is essentially the World Health Organization's encyclopaedia on the roles of environmental agents in human cancer causation, and have proved useful worldwide to scientists, public health authorities and to the general public. The aim of this project is to

continue to produce authoritative volumes of the IARC Monographs that will provide up-to-date evaluations of environmental and occupational exposures that may present carcinogenic hazards to human beings, and to disseminate the results world-wide as printed books and in electronic form by on-line internet access.

Donor: National Institutes of Health / National Institute of Environmental Health Sciences (NIEHS), USA

Duration: 12 months

Funds for IARC: US\$ 125 000 (Euro 88 875)

Funds for partners: -

Total: US\$ 125 000 (Euro 88 875)

Partners: n/a

2. Prior approval

The Governing Council is invited to consider, for approval, projects submitted over US\$ 500 000 per annum, excluding sums passed to third parties, as detailed below.

Office of the Director (DIR)

2.1 Project title: **IARC – DG SANCO cooperation action on policy and epidemiological support II**

IARC would like to engage with DG SANCO to develop a close working relationship on all cancer-related issues. There is a strong synergism between the strengths and needs of both organizations and such close collaboration is a priority for IARC in the short-term. This collaboration could benefit from regular meetings and the identification of clearly defined points of contact within each organization. There are several areas which IARC can identify at present which would be mutually beneficial from the direct funding mechanism with DG SANCO. In this – second – direct contract with the DG SANCO, IARC proposes the following activities:

1. Further work within the European Network of Cancer Registries (ENCR);
2. Update of the European Code Against Cancer;
3. Preparatory work on the EU Voluntary Accreditation of Breast Units (EUABR).

The project is currently in negotiation.

Donor: European Commission – Directorate General for Health and Consumers (EC DG SANCO), Belgium.

Duration: 12 months

Funds for IARC: US\$ 1 712 480 (Euro 1 268 948)
Funds for partners: -
Total: US\$ 1 712 480 (Euro 1 268 948)
Partners: n/a

Genetic Epidemiology Group (GEP)

2.2 Project title: One-carbon metabolism biomarkers and lung cancer risk

We have recently identified strong associations between circulating B-vitamins and lung cancer within the EPIC cohort based on 900 cases and 1800 controls. The study implicates important protective effects for both vitamin B6 and methionine independently of smoking status, resulting in approximate 2-fold risk differences between the top and bottom 25% of the population for these vitamin measures ($p=10^{-7}$ for both measures). An additional protective effect was also observed for folate ($p=10^{-3}$). Limited data from repeat measures indicate that these effects are under-estimated by about 50% due to regression dilution (i.e. attenuation of associations that appear by the use of a blood sample taken at one moment to measure a circulating vitamin level that varies naturally from one point in time to another). An expanded proposal to study B-vitamins and lung cancer was presented at the Cohort Consortium meeting in Bethesda in November 2009. As a result of this meeting, and in collaboration with 22 cohorts, we now propose an extended investigation of serum/plasma from an additional 5000 case-control pairs recruited in US/European cohorts and 1500 case-control pairs recruited in Asian cohorts. We will also include an additional 1000 repeat samples from a subgroup of controls to allow correction for regression dilution bias, resulting in a total of 14 000 serum/plasma samples. As a secondary hypothesis, and in line with recommendations made at the 2009 cohort consortium meeting, we will take advantage of the major expense involved in pulling samples from multiple cohorts, and also investigate in the same laboratory serum markers for Vitamin D, in particular 25-hydroxy-vitamin-D (25-OH-D2 and 25-OH-D3).

Donor: National Institutes of Health/National Cancer Institute (NIH/NCI), USA
Duration: 48 months
Funds for IARC: US\$ 3 867 950 (Euro 2 866 151)
Funds for partners: US\$ 3 139 753 (Euro 2 326 557)
Total: US\$ 7 007 703 (Euro 5 192 708)

Partners:

Fred Hutchinson Cancer Research Center, USA US\$ 201 503 (Euro 149 314)
Vanderbilt University Medical Center, USA US\$ 185 768 (Euro 137 654)
New York University School of Medicine, USA US\$ 143 887 (Euro 106 620)
Johns Hopkins University, USA US\$ 205 697 (Euro 152 421)
University of Hawaii, USA US\$ 202 760 (Euro 150 245)
Brigham and Women's Hospital, USA US\$ 1 283 173 (Euro 950 831)

Cancer Epidemiology Centre/ Cancer Council Victoria, Australia US\$ 63 080 (Euro 46 742)

University of Minnesota, USA US\$ 445 811 (Euro 330 346)

Vanderbilt University Medical Center, USA US\$ 247 375 (Euro 183 305)

Lund University, Sweden US\$ 45 360 (Euro 33 612)

Umeå University, Sweden US\$ 51 300 (Euro 38 013)

Hunt Biosciences, Norway US\$ 64 039 (Euro 47 453)

2.3 Project title: **Pooled genome-wide analysis of kidney cancer risk**

Renal cell carcinoma (RCC) is the 8th most common cancer in the US and the 10th most common form of cancer death, with a particularly high incidence among African Americans. A sharp increase in the incidence of RCC was observed in recent decades with some of the greatest increases happening in Central Europe and among the black population in the US. Apart from smoking, obesity and hypertension, much of the etiology of this disease remains to be identified. There is increasing evidence that genetic factors influence susceptibility to RCC, although this hypothesis has been understudied. We have recently completed a genome-wide association study (GWAS) of RCC comprising 3800 cases and 8500 controls. We now propose to extend this study by incorporating an additional 4000 cases and 5000 controls from a series of population based case-control and cohort studies. Inclusion of cohort studies has been facilitated via the NCI cohort consortium initiative. In addition to its size, our study will be unique in several ways: (1) extensive clinicopathological information and survival of cases will be collected; (2) genome-wide analyses for the association between genetic variants and RCC will be conducted for the disease onset and survival in parallel; (3) a comprehensive biorepository of germline DNA and tumour DNA and RNA on at least 2000 cases will be developed; (4) whole-genome gene expression profiling on fresh renal tissue and tumour tissue will be obtained to complement results obtained from the germline genotyping analyses.

Donor: National Institutes of Health / National Cancer Institute (NIH/NCI)

Duration: 48 months

Funds for IARC: US\$ 2 201 379 (Euro 1 631 222)

Funds for partners: US\$ 2 680 128 (Euro 1 985 975)

Total: US\$ 4 881 507 (Euro 3 617 197)

Partner:

Centre National de Genotypage, France US\$ 2 680 128 (Euro 1 985 975)

2.4 Project title: **B-vitamins, one-carbon biomarkers, vitamin D and cancer risk**

We will measure circulating levels of vitamin B2, B6, B12, methionine, folate, and homocysteine in pre-diagnostic blood samples from 3000 tobacco related cancer cases and comparable controls. We will also measure in the same laboratory circulating vitamin D levels among cases and controls, taking advantage of the large cost saving that this will involve. We will also incorporate an analysis of 'regression dilution' that corrects for day-to-day variation in biomarkers. Finally, we will identify genes involved with each biomarker using genome-wide association data on 4500 subjects, and will use this to obtain independent evidence for a causal association between each biomarker and cancer.

The study population will include 1000 lung cancers, 1000 bladder cancers, 500 renal cancers, 500 aero-digestive cancers and 500 pancreatic cancer cases and 2000 controls from two large European prospective cohorts. For 500 controls we will include a repeat blood sample. 500 µL of serum from all study participants will be analysed by the BEVITAL laboratory and measurements will be provided for a total of 40 vitamins, metabolites and enzymes related to one-carbon metabolism as well as vitamin D. Gene variants that are identified as correlating with biomarkers from genome-wide data will also be analysed in all additional case-control samples.

This study will provide essential population based evidence on the role of both B-vitamins and also vitamin D in tobacco related cancers, and will extend our knowledge for their potential chemo-preventative role in cancer in general. A role for vitamin D will strengthen the evidence for a protective effect of this biomarker, and increase the need for large randomized trials.

Donor: European Commission, Directorate General for Research (EC DG RTD), Belgium

Duration: 60 months

Funds for IARC: US\$ 2 642 202 (Euro 1 957 872)

Funds for partners: US\$ 526 316 (Euro 390 000)

Total: US\$ 3 168 518 (Euro 2 347 872)

Partner:

BEVITAL, Norway US\$ US\$ 526 316 (Euro 390 000)

3. Prior approval for the extension of the grant to support the IARC Monographs

As per Resolution GC/19/R8¹, the Governing Council is invited to confirm its approval of the project for preparation of IARC Monographs on the evaluation of carcinogenic risks to humans, submitted to the National Cancer Institute, USA, whose 5-year extension exceeds US\$ 850 000 per annum, excluding sums passed to third parties.

Please note that the following project has been provisionally approved by the Chairperson of the Governing Council.

IARC Monographs (IMO)

3.1 Project title: Evaluation of Carcinogenic Risks to Humans

The IARC Monographs on the Evaluation of Carcinogenic Risks to Humans represent an international expert-consensus approach to carcinogen hazard identification. The long-term objective is to critically review and evaluate the published scientific evidence for all carcinogenic hazards to which humans are exposed. These include chemicals, complex mixtures, occupational exposures, lifestyle factors, and physical and biological agents. National and international health agencies use the IARC Monographs as an authoritative source of scientific information and as the scientific basis for their efforts to control cancer. Each IARC Monograph includes a critical review of the pertinent scientific literature and an evaluation of the weight of the evidence that an agent or exposure may be carcinogenic to humans. Agents are selected for evaluation based on evidence of human exposure and some evidence of carcinogenicity. Agents can be re-evaluated if significant new data become available. The programme also collaborates on scientific meetings on mechanisms of carcinogenesis and other topics pertinent to evaluations of carcinogenicity. A written Preamble to each volume of IARC Monographs describes the principles and procedures that are followed, including the scientific criteria that guide the evaluations. Each IARC Monograph is developed by a working group selected on two principles: to invite the best-qualified experts and to avoid real or apparent conflicts of interests. Working groups typically consist of 20–25 scientists from 10–12 countries, with expertise in cancer epidemiology, experimental carcinogenesis, and related disciplines. The working group meets to review and reach consensus on drafts prepared by the experts before the meeting, and to develop and reach consensus on the evaluation. Later, IARC scientists review the text and tables to ensure their scientific accuracy and clarity, and the volume is edited and published. Funds are requested to support two of the three volumes produced each year.

¹ Resolution **GC/19/R8**: The Governing Council,

Having considered Document GC/19/8 and the addendum thereto;
Noting that the contracts listed have already been approved by the Council in the past but that the monetary limits stipulated in previous resolutions are likely to be exceeded when the contracts are next renewed,

1. DECIDES to authorize the Director to accept the following grants and/or contracts:
 - (1) contract with the National Cancer Institute, USA in amounts not to exceed US\$ 850 000 per annum for the preparation of Monographs on the evaluation of carcinogenic risk of chemicals to man;
 - (2) grants and/or contracts with the National Cancer Institute, USA and/or other governmental sources in a total amount not to exceed US\$ 500 000 per annum for a study on the significance of environmental carcinogenesis data to man;
2. EXPRESSES its thanks and satisfaction to the National Cancer Institute, USA.

Donor:	National Institutes of Health/National Cancer Institute (NIH/NCI)
Duration:	60 months
Funds for IARC:	US\$ 4 742 552 (Euro 3 514 231)
Funds for partners:	-
Total:	US\$ 4 742 552 (Euro 3 514 231)
Partners:	N/A

4. Procedure for acceptance of grants and contracts – proposed revision of thresholds

4.1 The current thresholds for the acceptance of grants and contracts by the Director are laid down in resolution GC/37/R5¹, which was adopted by the Governing Council in May 1996.

4.2 As per resolution GC/37/R5, the following types of grants and contracts need to be submitted to the Governing Council for approval prior to acceptance by IARC: (i) grants and contracts with a value exceeding US\$ 500 000 per year (excluding sums passed on to other institutions) and (ii) projects requiring more than US\$ 100 000 per year (excluding the principal investigator's staff costs) from the IARC regular budget unless already approved via the programme budget document. The IARC Secretariat is furthermore required to report all grants and contracts with a value of more than US\$ 100 000 per year (including sums passed on to partners) to the Governing Council on a post facto basis.

¹ Resolution **GC/37/R5**: The Governing Council,

Noting the authorization given to the Director under Resolutions GC/4/R4, GC/12/R13 and GC/18/R9,

Affirming

- (1) that official national and international agencies supported by public funds should be informed that the Agency is willing to undertake projects on the basis of grants or contracts subject to the conditions of this resolution;
- (2) that donations, grants or contracts for specific projects should be accepted only if:
 - (a) the project falls within the terms of reference of the Agency's work as approved by the Governing Council;
 - (b) there is no financial commitment remaining with the Agency after the termination of the grant or contract;

1. AUTHORIZES the Director to accept grants or contracts from outside sources for projects subject to the conditions detailed in 2(a) and 2(b) above when the amount does not exceed US\$ 500 000 *per annum* and when a project does not require more than US\$ 100 000 *per annum*, excluding the principal investigator's staff costs, from the IARC regular budget unless this project has already been approved *via* the programme budget document; all other grants or contracts must receive the specific approval of the Governing Council;

2. DECIDES that when sums of money which must be passed on to institutions collaborating in the project being funded are included in the value of the grant or contract, these sums should not be considered as part of the US\$ 500 000 for authorization purposes;

3. REQUESTS the Director to make a *post facto* reporting of all grants and contracts he has accepted with a value of more than US\$ 100 000 per project *per annum*, this amount to include any sums passed on to third parties.

May 1996

4.3 The value of individual grants and contracts signed by the Agency has increased significantly since 1996, and so has the number of grants and contracts requiring prior approval by or post facto reporting to the Governing Council. Among these, a number of grants and contracts expressed in euros have been reported to the Governing Council in recent years, based on the above thresholds, as a result of the relative strength of the euro against the US dollar.

4.4 It should also be noted that, when these thresholds were set, the Governing Council's main concern at the time was to avoid the risk for the Agency's mission to be diverted due to overreliance on extra-budgetary sources of funds. The Agency's regular budget level has increased considerably since 1996 (budget level in 1996–1997 was US\$ 37 million; budget level for 2010–2011 is the equivalent of US\$ 57.4 million) and the ceiling of US\$ 500 000 has now become much lower with respect to the current regular budget levels.

4.5 Due to the time constraints often attached to the acceptance of grants and contracts, and crucial deadlines not always matching with the timing of Governing Council sessions, an additional mechanism has been introduced in the past few years to avoid withholding the negotiation and acceptance of grants and contracts exceeding US\$ 500 000. The Governing Council Chairperson's clearance is sought for such grants when acceptance cannot be postponed until the next session of the Governing Council. These grants are subsequently submitted to the Governing Council for formal approval.

4.6 In view of the above elements, and the adoption of the euro as the new functional currency of the Agency since 1 January 2010, the IARC Secretariat requests that the thresholds set out in resolution GC/37/R5 be revised.

4.7 The Governing Council is requested to consider the following proposal to establish new thresholds for the acceptance of grants and contracts:

	Current situation (Resolution GC/37/R5)	Proposed revised thresholds
Prior approval by the Governing Council	Grants and Contracts > US\$ 500 000 per annum (excluding sums passed on to other institutions) Projects requiring from the IARC regular budget > US\$ 100 000 per annum (excluding PI's staff costs) and not already foreseen in the approved programme budget	> €500 000 per annum (excluding sums passed on to other institutions) > €100 000 per annum from the IARC regular budget (excluding PI's staff costs)
Post facto reporting to the Governing Council	Grants and Contracts > US\$ 100 000 per annum (including sums passed on to third parties)	> €100 000 per annum (including sums passed on to third parties)

4.8 It is also proposed to include, as part of the formal process for acceptance of grants and contracts and as per current practice, the possibility of obtaining prior "clearance", when required, via consultation with the Governing Council Chairperson without having to wait until the next session of the Governing Council. Such grants, cleared by the Governing Council Chairperson, would subsequently be submitted to the Governing Council at its next meeting for confirmation of approval.