

# Cancer Research Funding in Europe Low Compared With U.S., Survey Finds

The United States spends seven times more per person on noncommercial cancer research than the 25 member countries of the European Union (EU), far more than previously thought, according to the first survey to analyze cancer research funding across Europe.

“The EU is massively behind,” Richard Sullivan, M.D., Ph.D., chair of the European Cancer Research Managers Forum, which carried out the survey, told a London press conference in March. “This has major implications both for the inability of the EU to reverse the emigration of cancer researchers to the [United States] and for the overall commercial attractiveness of the EU.”

The survey found that, compared with the 15 countries that were members of the EU before May 2004, the United States spends five times more per person (€17.63 [US \$22] versus €3.76 [US \$4.82]) and four times more as a percentage of the gross domestic product on cancer research. When U.S. spending is compared with that of the 25 current EU members, the gap widens to seven times more per person (€17.63 [US \$22] versus €2.56 [US \$3.28]).

It is not just the size of the sevenfold funding gap that is generating concern about a U.S. “brain drain.” Several speakers at the London press conference said that the “ferocious complexity” of EU decision making was severely blunting Europe’s competitive edge. Sullivan said that EU decision making could get “bogged down for years.”

Charities account for half of Europe’s cancer research funding. The United Kingdom depends heavily on charities for cancer research funding, a policy that helped to take it to the top spot in the European survey spending league—€388 million (US \$497 million)—followed by Sweden, Germany, France, and the Netherlands.

Kathleen Vandendael, executive director of the Federation of European Cancer Societies, called for more international collaboration between charities

to help generate substantial numbers of patients for clinical trials of rare diseases



**Richard Sullivan**

and to prevent duplication of research by charities in different countries. She said that multicountry trials are long established—but not in the noncommercial sector.

Charities were among 139 noncommercial sources of funding identified by the survey. Other

sources included the European Commission and government agencies such as the Medical Research Council in the United Kingdom, INSERM in France, and the Finnish National Technological Agency.

Gordon McVie, M.D., Ph.D., senior consultant to the European Institute of Oncology in Milan, Italy, suggested that Britain’s National Cancer Research Institute (NCRI) should be the model for a new body to promote collaboration across the 25 EU member states. The NCRI was set up in 2001 to coordinate all research funded by government, charity, and industry to promote collaboration between the United Kingdom and Europe. Mike Richards, M.D., the United Kingdom’s first

national cancer director, recently reported that the number of patients recruited into clinical trials had doubled since 2001.

Comparing European and U.S. research, McVie said: "I think [Europeans] are very strong on invention. ... A third of the cancer drugs in the pharmacopoeia come from Europe. U.S. government funding is beyond comparison to anything we can achieve in Europe. I like the way the U.S. can respond quickly and are very flexible, while we take a long time setting up committees, and even longer deliberating. If you look at who does the 'D' in R & D, it is certainly not Europe. We do more per

capita basic research than the U.S., but if you look at clinical applications, we do abysmally."

The survey confirms that the EU concentrates much of its spending on basic scientific research at the expense of preventive and clinical research. Biology receives 41% of all cancer research money, compared with 20% for treatment and just 4% for prevention. (The remaining funds are divided among cancer etiology, early detection, scientific model systems, and outcomes research.) In contrast, the United States spends 25% on biology, 25% on treatment, and 9% on prevention.

The European Cancer Research Managers Forum was founded in 2001 to draw together bodies with an interest in noncommercial research. It represents more than 150 different groups and organizations. Work on the survey started in 2003. General members of the forum were asked to help identify sources of cancer research funding in Europe and to provide their latest available figures for annual direct cancer research spending.

The group hopes that the research will act as a "clarion call" to generate action from all 25 member states of the EU and the European Commission.

—**John Illman**

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