



WORLD HEALTH ORGANIZATION
INTERNATIONAL AGENCY FOR RESEARCH ON CANCER

The Origin of the International Agency for Research on Cancer

By R. Sohier and A.G.B. Sutherland

Translated by John Cheney

IARC Technical Report No. 6

Lyon

2015

Published by the International Agency for Research on Cancer, 150 cours Albert Thomas,
69372 Lyon Cedex 08, France

© International Agency for Research on Cancer, 2015

Translation of: La genèse du Centre international de Recherche sur le Cancer (Rapport
technique du CIRC No. 6), 1990

ISBN 978-92-832-2455-6

Publications of the World Health Organization enjoy copyright protection in accordance with
the provisions of Protocol 2 of the Universal Copyright Convention. All rights reserved.

The designations employed and the presentation of the material in this publication do not
imply the expression of any opinion whatsoever on the part of the Secretariat of the World
Health Organization concerning the legal status of any country, territory, city, or area or of its
authorities, or concerning the delimitation of its frontiers or boundaries.

The authors alone are responsible for the views expressed in this publication.

The International Agency for Research on Cancer welcomes requests for permission to
reproduce or translate its publications, in part or in full. Requests for permission to reproduce
or translate IARC publications – whether for sale or for non-commercial distribution – should
be addressed to the IARC Communications Group, at: publications@iarc.fr.

Note from the translator:

This account of the process by which IARC came into being in the 1960s is based largely
upon official documents, working papers, and correspondence that have been preserved,
although much seems to have been lost. This material is largely in English, and it has been
possible to refer to it in making the present English edition of the work by Sohier and
Sutherland. Where possible, documents cited in full are copied from the original English,
while for others that were summarized, as much as possible of the phraseology of the original
English has been used, rather than making new translations to English from the earlier French
edition. This will account for some small discrepancies in sense between the two editions.
Certain corrections have also been made to errors that became evident during the process of
translation.

In certain cases, only a French document has survived even though an English version
must have existed at the time, notably for the papers relating to the February 1964 meeting.
Such documents have been freshly translated into English, but the result will inevitably differ
somewhat from the official original English version.

Table of Contents

Foreword.....	6
Introduction.....	7
1. The Conception of IARC	
First proposal	8
Second proposal.....	8
2. The Foundation of IARC	
Letter of President de Gaulle for the foundation of an international institute	12
Reception of the project for an international institute for combating cancer	12
Reception in France	13
Reception by international organizations.....	14
Reception by the states called to join in establishing IARC	32
3. The Launch of IARC	
Period from 9 November 1963 to 20 May 1965	34
First steps	34
Participation in meetings and technical conferences	35
Period from May 1965 to April 1967	38
Inauguration of the International Agency for Research on Cancer	39
Meeting of the Governing Council	39
Location of IARC	40
Meeting of the Scientific Council.....	40
Appointment of the Director of IARC	41
Director's Annual Report for 1966.....	41
Addendum to the Director's Annual Report for 1966	43
Director's Interim Report for 1967	45
Period from June 1967 to June 1972.....	50
Annexes	
Annex 1. First Steps.....	53
Annex 2. Conferences Organized by WHO in Paris.....	54
First Technical Conference (17–18 December 1963).....	54
Second Technical Conference (27–28 February 1964)	54
Draft convention	54
Text prepared by the experts.....	59
Conclusions of the Second Technical Conference.....	62
Memorandum from the French Government	62
Appendix.....	64
Tentative estimation of the defence budgets.....	65
Third Technical Conference (27 July 1964)	65

Fourth Technical Conference (29 September–2 October 1964)	66
Annex 3. Meetings Organized by WHO in Lyon	68
Preparatory meetings for the establishment of an International Agency for Research on Cancer (Lyon, 16–18 February 1965)	68
First meeting (16 February 1965)	68
Second meeting (17 February 1965, morning)	68
Third meeting (17 February 1965, afternoon)	69
Fourth meeting (18 February 1965, morning)	69
Aide-mémoire on the membership of the Provisional Scientific Committee ..	70
Preparatory meetings for the Scientific Committee	71
Proposal for a cancer research information centre	71
Opportunities for epidemiological study	72
Opportunities for study on pathology	74
Proposal for training activities	75
Meeting for the establishment of an International Agency for Research on Cancer	
Meeting of the Scientific Committee (Lyon, 30 March–2 April 1965)	76
General considerations	77
Information services	77
Training of research workers	77
Pathology	78
Epidemiology	78
Comparative oncology	79
Support for research	79
Special projects	79
Budget	79
Estimated costs of the proposed programmes	80
Second Preparatory Meeting for the Establishment of an International Agency for Research on Cancer (Lyon, 5–6 April 1965)	80
First session (5 April, morning)	80
Second session (5 April, 2:30 pm)	81
Third session (5 April, 4 pm)	82
Annex 4. Official Records of WHO for the Establishment of an International Agency for Research on Cancer	83
Seventeenth World Health Assembly (A17/P&B/20, 16 March 1964)	83
Establishment of a world research agency for cancer	83
Participation of WHO in a World Research Agency for Cancer	85
Executive Board (Thirty-Fourth Session)	85
Report of the Director-General on the Participation of WHO	85
Annex 5. Establishment of an International Agency for Research on Cancer	86
Resolution WHA18.44 of the Eighteenth World Health Assembly	86
Statute of the International Agency for Research on Cancer	86

Foreword

Not often, in the history of nations, does one have occasion to pay tribute to the generosity and altruism of governments and of those in power; the establishment of the International Agency for Research on Cancer (IARC) offers one such opportunity. The Agency is the outcome of an initiative by a group of French intellectuals, who succeeded in persuading General de Gaulle, then President of France, to adopt a project to lighten humanity's ever-growing burden of cancer. President de Gaulle took it upon himself to convince the world's policy-makers that they should devote a fraction of national defence budgets to a project aimed at reducing human suffering. Although the generosity of the project as initially conceived was scaled back to much more modest proportions when faced with the realities of the world, it remains clear that on this occasion, humanitarian considerations took priority over self-interest and power politics.

At the same time, it is interesting to see how the original project developed as it passed through the corridors of diplomacy and through scientific discussions, as well as to compare the initial concept, and the goals that inspired the founding of the Agency, with what it has been able to achieve in the course of the first 25 years of its activity. Bearing in mind the limited resources put at our disposal, we feel that we can congratulate ourselves on the extent to which we have been able to fulfil the hopes of those who conceived the plan. It is therefore fortunate that two such eminent experts as Professor Roger Sohier and Mr A.G.B. Sutherland should have accepted to assemble and analyse the relevant documents that shed light on the various stages in the conception and establishment of IARC. Their exceptional competence, their complete devotion to the task, and their intellectual honesty ensure the accuracy of the information presented in the following pages.

Dr L. Tomatis
Director, IARC

Introduction

This account of the process by which an international agency for cancer research came into being seems justified by the unusual circumstances that led to its establishment, from the first proposal by a group of French intellectuals, led by Emmanuel d'Astier de la Vigerie, and its acceptance by President de Gaulle, through the steps that had to be taken and the obstacles to be overcome.

Taking the expression "origin" to cover "all of the components that go into the production of something or the way something is formed", we shall consider this process in three successive chapters, dealing with the conception, the foundation, and the launch of the International Agency for Research on Cancer.

The collection and organization of the large set of documents concerning this subject were carried out by A.G.B. Sutherland, the Director of Administration and Finance at IARC from 1966. Subsequently, by agreement with Mr Sutherland, this documentation was thoroughly analysed by R. Sohier. This volume on the origin of IARC is the outcome of that collaborative effort.

We have greatly benefited from valuable information provided by Professor E. Aujaleu, who participated actively in all the stages of the foundation of IARC.

Other helpful details were supplied by Dr J.F. Delafresnaye, who at the time of IARC's establishment was Executive Director of the Geneva office of the International Union Against Cancer, an organization that had certain misgivings about the venture. We also acknowledge the contribution of Dr P.M. Dorolle, Deputy Director-General of the World Health Organization (WHO), who as early as 1970 pressed Professor J. Higginson to put on record the process by which IARC had come into being.

The account that follows deals mainly with the period from 1963 to 1967, since extensive information on the functioning of the Agency can be found in the Annual Reports (1968–1985) and the subsequent Biennial Reports. We have nonetheless included some information about the periods from May 1965 to April 1967 and from June 1967 to June 1972, which correspond to the initial phases of operation of IARC, before its installation in the new building constructed thanks to the generosity of the City of Lyon. Pending the completion of this building, which was to include laboratories, the City made available to IARC a large existing office building as well as some space in the town hall, while an INSERM unit (that of R. Sohier) provided laboratories. The valuable assistance that the Mayor of Lyon, Mr Louis Pradel, provided at all times should also be noted.

Readers may be interested in the article "IARC: 20 years old" by Walter Davis (*World Health*, March 1986; pp. 28–29).

We are most grateful to the successive directors of IARC, Professor J. Higginson and Dr L. Tomatis, for their encouragement and support.

1. The Conception of IARC

The idea of creating an international organization to participate in the fight against cancer, financed by a percentage of the funds allocated to the military of several nations, came from a man who had been first a naval officer, then a journalist and politician, and who had founded a resistance group during the German occupation of France and received a prize for his contribution to the strengthening of peace.

The project was proposed twice to President de Gaulle of France, who deserves great credit for having brought it to fruition.

First proposal

The first initiative was formulated by Mr Emmanuel d'Astier de la Vigerie (1900–1969), who was born on 6 January 1900 in Paris, son of Baron Raoul d'Astier de la Vigerie and his wife, Jeanne, *née* Masson de Montalivet. After attending the Naval Academy, he became a naval officer, and then pursued a successful career as a journalist and a politician.

During the Second World War, he founded the Resistance group “*Libération Sud*”, becoming in 1943 a member of the National Council of Resistance and later a member of the Provisional Assembly in Algiers. He was made a Companion of the Liberation. A vice-president of the World Peace Council, he was awarded in 1957 the Lenin Peace Prize.

Among his contributions to journalism, he founded the newspaper *Libération* (1941–1964) and the newspaper *L'Événement* (1965), and was a television producer at Radio-Télévision française (1955).

He was Minister of the Interior from 1944, and was elected to the National Assembly for the department of Ille-et-Vilaine (1946–1956).

D'Astier de la Vigerie approached President de Gaulle twice about the idea for a new cancer research body, first on his own, and second with the support of 12 eminent Frenchmen, who he felt would add weight to his proposal.

The background and process behind the first approach are described in a newspaper article of 21 November 1963 by D'Astier de la Vigerie entitled “*Libres opinions. Une requête*” (Free speech; a request). In this, he explained that he had been saddened for some time by letters he received at *Libération*, among which was one from a man who had watched his wife dying from cancer, after long suffering. The author of this letter had mentioned the political activities of the newspaper, its contributions in support of peace, etc. ... and the lack of any action against cancer. He had suggested that a new strategy should be adopted, at a global level, including funding taken out of the enormous military expenditures.

D'Astier de la Vigerie admitted that this letter, coming after a number of others, had upset him and weighed upon his mind to the extent that he decided to call on the President of France.

During his visit, he had the impression that de Gaulle listened without showing great interest until the point when a new strategy was invoked, when he raised his eyebrows and asked various questions. D'Astier de la Vigerie pointed out that a French initiative might require an appeal to the great powers, but did not receive a clear response from de Gaulle.

Second proposal, prepared by the initiator with support from 12 eminent Frenchmen

Not deterred, D'Astier de la Vigerie paid visits to Professor A. Lacassagne, a notable oncologist, and to Dr M. Bessis, a biologist, to explain his ideas. They both encouraged him to pursue his project. He therefore made further enquiries among 14 eminent figures, of whom 12, including Lacassagne, agreed to join him in a second approach to de Gaulle.

These 12 were: Louis Armand, Pierre Auger, François Bloch-Lainé, Father Ambroise-Marie Carré, Jean Hyppolite, Antoine Lacassagne, Charles Le Corbusier, Pierre Massé, François Mauriac, Francis Perrin, François Perroux, and Jean Rostand.

The reasons for the choice of these names by D'Astier de la Vigerie are unknown, but were evidently satisfactory, as we are not aware of any criticism having been made. Their backgrounds are given below.

Academics

AUGER, Pierre (1899–1993). Professor of physics at the Faculty of Sciences of Paris. Founder and Director of the Documentation Service of the National Centre for Scientific Research (CNRS) (1939–1941). Research scientist at the University of Chicago, USA (1941–1944). Director of higher education (1945–1948). Director of Natural Sciences at UNESCO (1948–1959). Director-General of the European Space Research Organisation (1962–1967).

PERRIN, Francis (1901–1992). Son of Jean Perrin, Nobel laureate for physics. Doctor of mathematics and physics. Lecturer (1933) and then professor at the Faculty of Sciences of Paris (1935). Professor at the University of Columbia, USA (1941–1943). Professor at the *Collège de France* (1946). High Commissioner for Atomic Energy (1951). Member of the *Institut de France*, *Académie des sciences* (1953).

HYPPOLITE, Jean (1907–1968). Studied at the *Ecole normale supérieure*. Agrégé in philosophy (1929). Teacher of philosophy in various high schools (1929–1945). Professor of *Première supérieure* in Paris. Professor of philosophy at the Faculty of Strasbourg, and then in Paris (Sorbonne). Director of the *Ecole normale supérieure*.

Professor Hyppolite carried out assignments and gave lectures in 11 European countries and the United States of America. He was a professor at the *Collège de France* at the time of his death in 1968.

PERROUX, François (1903–1987). Professor of political economy at the Faculty of Law in Lyon (1928–1937). Professor at the Faculty of Law of Paris (1935–1952) and at the Institute of Political Studies (1946–1952). Professor at the *Collège de France* (1955). Member of the Economic and Social Council (1959). Numerous lectures abroad, particularly in South America. Published a great number of works on political economy.

Engineers

MASSÉ, Pierre (1898–1987). Studied at the *Ecole Polytechnique*. Engineer at the *Ponts et Chaussées* (the National Civil Engineering School). Doctor of science. Specialist in problems of electric equipment. *Commissaire général au Plan* (High Commissioner for Planning) (1959–1966). Director in banks and various other companies. Associate professor at the Faculty of Law in Paris (1965–1967).

ARMAND, Louis (1905–1971). Engineer in the *Corps des Mines* (the National Civil Engineering Department). Studied at the *Ecole Polytechnique*. Specialist in railways. Director-General and then Chairman of the SNCF. Director of various companies. Professor at the *Ecole nationale d'administration*. Vice-President of the European Cultural Foundation (1960). Member of the *Institut de France*. Member of the *Académie française* and the *Académie des sciences*.

Financial specialist

BLOCH-LAINÉ, François (1912–2002). Doctor of law. Diploma of political studies. Inspector of Finances. Director of the Treasury. Inspector-General of Finances. President of the Crédit Lyonnais bank. Director of numerous companies. President of the Commission for Urban Development. Professor at the Institute of Political Studies in Paris (1948). Author of books on political economy.

Writer and journalist

MAURIAC, François (1885–1970). Degree in literature. President of the *Société des gens de lettres* (Society of Writers) (1932). Contributor to *Lettres Françaises*, *Temps Présent*, *Figaro*, *Figaro Littéraire*, and *L'Express*, and author of numerous novels. Grand Prix of the *Académie française* (1926). Nobel laureate for literature (1952).

Oncologist

LACASSAGNE, Antoine (1884–1971). Doctor of medical science. First studied radiophysiology, then specialized in radiobiology, experimental oncology, and tumours of the endocrine glands.

Head of laboratory at the Pasteur Institute, Assistant Director of the Pasteur laboratory at the Radium Institute, and finally Director of Research Services at the Curie Foundation. He was President of the *Ligue nationale française contre le cancer*, and a member of the Academy of Medicine, of the *Académie des sciences*, and of the Specialized Commission of the CNRS. He was also a member of the Academy of Sciences of the USSR.

He was awarded many prizes, including one from the General Assembly of the United Nations for his contributions to cancer research.

Biologist

ROSTAND, Jean (1894–1971). Biologist and science writer. Faculty of Science in Paris, research on reproduction in amphibians. Member of the *Académie française*. Literary Prize of the City of Paris (1951). Prize of the Singer-Polignac Foundation (1955).

Ecclesiastic

CARRÉ, Ambroise-Marie (1908–2004). Order of Preachers. Preacher at Notre-Dame de Paris (from 1959). Extensive preaching in France and abroad. Superior of the Dominican order. Catholic writer and member of the *Académie française*.

Architect

LE CORBUSIER, Charles (real name, Charles-Edouard JANNERET-LEGRIS) (1887–1965). French architect and urbanist, of Swiss origin. His writings and work contributed to functionalism.

Three examples may be noted among his many works: the conception and construction of the city of Chandigarh, capital of the State of Punjab, in India; the construction of the *Unité d'habitation* (housing unit) in Marseille; and the chapel of Ronchamp.

The request of 8 November 1963 addressed to General de Gaulle, President of France, in the form of an open letter, was as follows:

“The undersigned call upon the governments of those great powers who at present acknowledge the need to solve certain human problems by means of international cooperation to take immediate and appropriate steps towards preparing a worldwide plan of campaign in favour of life. Everything should be done to mobilize resources against one of the greatest scourges of mankind: cancer.

Although some considerable success has been achieved in the treatment of cancer, no decisive victory can be claimed until the nature of the disease and the mechanism of its development have been determined. Victory over cancer will be a tremendous accomplishment.

With the aid of a very small allocation of funds from the budgets of the great powers, an international institution to fight on behalf of life could be set up under the active supervision of qualified UN bodies and of the most eminent cancer specialists.

The undersigned point out that a reduction of half a percent in the military budgets of the United States of America, the USSR, Great Britain, and France (a reduction that could not affect the balance of power and that might even be accepted by other military powers) would make it possible to increase the number of laboratories, research workers, and experiments many thousand-fold. This would provide a basis on which to prepare a worldwide programme of research in this vital field. Congresses, scientific publications, and meetings between workers in different branches of medicine are not enough; what is needed is a foundation on which to develop the worldwide programme that is so urgently required.

One of the institution’s tasks, moreover, would be to report in simple but accurate language on the progress achieved in research. The general public all over the world would thus be encouraged to participate in this fight against cancer, a disease that is of such vital concern to everybody.

If the four heads of state of the countries mentioned above were to agree to this ridiculously small allocation of funds, victory over cancer might be achieved many years sooner than would otherwise be the case.

We appeal to the highest authority in our country to let France take the initiative in this matter.”

One may wonder why President de Gaulle reacted favourably to this second proposal, while the first, made by D’Astier de la Vigerie alone, had failed to convince him. One may assume that the support from 12 eminent individuals who all had made important contributions to their respective domains in France had a crucial effect. In addition, it has been suggested that de Gaulle was much affected when he visited his personal physician, Dr Lipchwitz, who was being treated at the anti-cancer centre of Villejuif, and died shortly thereafter. De Gaulle had in fact not given any advance warning of this visit, which led to some irritation on the part of Professor Denoix, the director of the centre.

Another influence on his decision may have come from another visit to Villejuif by de Gaulle, to the bedside of his military chauffeur, to whom he was much attached, and who was likewise to succumb to cancer.

2. The Foundation of IARC

Letter of President de Gaulle for the foundation of an international institute

Much merit may be attributed to President de Gaulle for his immediate response to the letter from 13 eminent Frenchmen. His reply addressed to Louis Armand, the first named in the list of co-signatories, in favour of the foundation of an international institute, was as follows:

“Dear Sir,

The idea of promoting research into cancer by setting up an international institution is a noble one, and I consider it desirable that France should take an interest in it.

In my opinion, it is indeed consistent with its traditions that France should commit itself to a task that involves the three principles of international cooperation, human progress, and the advancement of science.

Hence, I have asked the Minister of Public Health to take all necessary steps in this matter.

I should be grateful if you would announce this to all the gentlemen who joined you in signing the letter addressed to me.

Yours sincerely,
C. de Gaulle”

This letter was immediately transmitted to Mr Raymond Marcellin, Minister of Public Health and Population, who on 11 November 1963 telephoned Dr M.G. Candau, Director-General of WHO, to arrange a meeting in Paris within the next 48 hours, which took place on 13 November.

At the same time and at the request of President de Gaulle, the Minister informed the governments of the Federal Republic of Germany and of Italy of the general's wish that these two countries should join with the four named in the letter he had received. In parallel, the Minister wrote to the ministers of health of the Federal Republic of Germany, Italy, the United Kingdom, the United States of America, and the USSR, as follows:

“France, desirous to ensure better coordination of research and better application of its results, is favourable to such a project. The Prime Minister and myself would place great value on your opinion.”

The Ambassador of France in Bonn, Mr Roland de Margerie, sent a note to the Secretary of State for Foreign Affairs of the Federal Republic of Germany about the French proposal to set up an international institute for combating cancer.

The Ambassador of France in Great Britain, Mr Geoffroy de Courcel, was granted a meeting with the Foreign Secretary, Mr Richard Butler.

Reception of the project for an international institute for combating cancer

This will not be an exhaustive study of this issue, but a general impression gained from the scrutiny of a selection of documents. We shall consider first the reception in France, then that by international organizations, in particular WHO and UICC, and finally that in other countries.

Reception in France

We shall consider first the reception given to the project by the general public in France and then that of the cancer specialists and researchers in the various scientific disciplines associated with the disease.

Reception by the French public

Some idea of the reception by the French public can be obtained from newspaper articles published at the time, and in particular those in the world-class newspaper *Le Monde*.

Already on 8 November 1963, an article concerning the appeal by the 13 eminent individuals appeared under the title “*Un vœu qui doit être entendu*” (A wish that should be listened to), signed by Dr Escoffier-Lambiotte, noting that cancer and cardiovascular disease were the cause of 70% of deaths in France and that the mortality rate from cancer had risen significantly between 1950 and 1960. Dr Escoffier-Lambiotte desired that such a deeply humanitarian wish should be heard and fulfilled.

The study group for public health of the National Assembly, composed of members of the *Union pour la nouvelle République* and of the *Républicains indépendants*, stated that it approved the declaration of de Gaulle and the financing of the fight against cancer by funds taken from the military budget.

Another article in a French newspaper carried the proposal by Dr P. Massé (one of the 13 signatories of the appeal to de Gaulle) that the new international institute should bear the name of John Kennedy, have a Russian scholar as its head, and be located in France. This was in fact rather in the nature of a jest and should be taken with a pinch of salt, since the author had drafted it following information that President Kennedy had sent a message to senators suggesting that they reject the French project (which would need to be checked, as the United States of America did approve de Gaulle’s proposal).

Reception by French cancer specialists and researchers

Apart from the very favourable reaction of Professor Mathé (who it may be noted was an ardent Gaullist), it appears that most cancer specialists, and also most researchers in other relevant disciplines, gave an unfavourable or even hostile reception to the creation of an international centre financed by funding taken from the military budget, and which D’Astier de la Vigerie had designated as an “international institution to fight on behalf of life”. They were worried that funding allocated to their own work would be diverted to this international centre.

In an article in *Le Monde* entitled “*Institut contre institution*”, Dr Escoffier-Lambiotte wrote:

“Where some envisage a real research institute, in which specialists from various countries would work together, others support with enthusiasm the idea of an international institution that would centralize research work conducted across the world, distributing funding and research topics, organizing special projects that can be carried out only at the international level, such as major statistical work and toxicological studies; they strongly underline the problems that would be associated with a research institute, which they believe would draw the best specialists away from their teams and research centres to centralize them in a single location.”

One French specialist even stated that he was afraid such an institute would purchase researchers, like the trade in footballers, thus depriving the best research centres worldwide of their leading experts.

Dr Escoffier-Lambiotte mentioned in the same article that the French Consultative Committee for Scientific and Technical Research (Cancer and Leukaemia) had informed the

government of its unanimous opposition to the idea of an international research institute; on the other hand, it was enthusiastic about the project of creating a centre for the distribution, checking, and publishing of research, or for the establishment of a universal strategy.

Regarding the possible budgetary problems that might result from the creation of a new institution, this article noted that taking 0.5% of the military budget to use in the fight against cancer would be the equivalent in the United States of America of doubling the funding available to United States research laboratories, that these laboratories would be unable to absorb such huge sums, but that part of the sum could be allocated to the organization and functioning of the international institution.

It was also commented that “the French laboratories are currently surviving in a state of penury, and none of them ... can operate properly unless they can double their allocated budget by means of private donations, from France or abroad”, and that “the laboratories have turned themselves into huge begging organizations, in which the heads and the best researchers spend most of their time soliciting funds and preparing accounts and administrative reports.” Furthermore, “up to now, a considerable part of this funding has come from the United States National Institutes of Health.” There was reason to worry that the best French laboratories would suffer a disastrous blow if this generous support were to be cut off.

The article concluded that “it would appear essential to double the funds allocated to the existing [French] laboratories, and if the principle of half a percent of the military budget were to be adopted, it does not appear that these laboratories would be able to make effective use of the extra sum, which could, on the other hand, be used in the running of an international centre and either in the organization of toxicological studies or statistical analyses at the global level, or in funding exchanges of scientists or their training, or finally in setting up ‘information’ projects, by bringing together and analysing all the documents published on the causes or treatment of cancer.”

Reception by international organizations

Understandably, the project of President de Gaulle provoked some quite heated reactions among the medical and scientific community, and, in particular, among the international organizations involved with cancer.

Here, we shall look at the reception of the project by two organizations: the World Health Organization (WHO) and the International Union Against Cancer (UICC).

Reception by the World Health Organization

It has been noted above that the Director-General of WHO, Dr Candau, was rapidly informed of the project by Mr Marcellin, the French Minister of Public Health and Population, and that he immediately accepted an invitation to visit Paris to examine it.

WHO then issued a press release in which the organization gave its approval to the project to create an international institute for cancer research and noted that Dr Candau had met the French Minister and had assured the French Government of WHO’s collaboration in bringing the project to fruition.

WHO had in fact already in 1959 created within its own structure a unit of cancer prevention, and the first meeting of the Committee of Experts for Cancer Prevention was scheduled to be held in Geneva on 19 November 1963, under the chairmanship of Dr W.R.S. Doll, of the United Kingdom’s Medical Research Council.

Although the World Health Assembly endorsed the initial enthusiasm of its Director-General for the initiative of President de Gaulle, by approving at the Eighteenth World Health Assembly on 20 May 1965 the establishment of the International Agency for Research on

Cancer by its resolution WHA18.44, some members of that Health Assembly were not in favour of this development, feeling that it was not acceptable that they should not have the right to oversee the operation and financing of the new centre. This led to certain difficulties between 1965 and 1977. The problem was to define the respective roles in the general fight against cancer of IARC, WHO, and other international organizations, and it was felt necessary in 1977 to set up an *ad hoc* committee to make recommendations about the various cancer-related activities of WHO. The situation of IARC *vis-à-vis* WHO during its first 12 years of operation was thoroughly reviewed by Professor E. Aujaleu in 1977.

Reception by the International Union Against Cancer (UICC)

The reception by UICC of the idea of the new centre went through various stages. As might be expected, the reactions were many, varied, and often rather unwelcoming, to say the least.

The first step was the communication made in the name of UICC by Professor P. Denoix, director of the anti-cancer centre of Villejuif, to Mr Marcellin, Minister of Public Health and Population.

Second, Professor Alexander Haddow, President of UICC, sent letters to President de Gaulle and to the five governments involved with France in the proposal for setting up the agency (the Federal Republic of Germany, Italy, the United Kingdom, the United States of America, and the USSR). His letter to President de Gaulle, dated 3 December 1963, was as follows:

“My dear President,

The world at large, and the scientific world in particular, have been encouraged and heartened by your recent proposal for the allotment of a sum from the defence budget of the French Republic, and that of other states, towards the purposes of cancer research. The matter is of extreme interest to the International Union Against Cancer (affiliated to the World Health Organization), of which I have the honour for the moment to be President, and which coordinates the interest and effort of over 70 countries in the cancer field.

I have felt it my duty to transmit to you, which I now do, the text of a letter which I have addressed to the Heads of State concerned. And in doing so, I wish to express, on behalf of the Union, the gratitude which we feel for this signal and humanitarian initiative on the part of France.

With highest esteem, I have the honour to be, Mr President,
Very faithfully yours, Alexander Haddow, President,
International Union Against Cancer”

President de Gaulle replied in the following terms:

“Dear Professor Haddow,

Thank you for writing to me to express the hopes you place in the recent steps I believed it my duty to take in the name of France.

The fight against cancer seems to me to be one of the greatest tasks that research workers of today can set themselves. I am aware of the noble efforts made by the International Union Against Cancer, of which you are President. I am also aware of the brilliant research work which you yourself have accomplished and which redounds to the glory of Great Britain. It is my belief, however, that victory over cancer can only be assured by a union of workers which extends beyond national frontiers. I should like to thank you for your contribution to this joint endeavour.

Yours sincerely,

Charles de Gaulle”

Professor Haddow sent the following letter to the President of the United States of America, Lyndon B. Johnson:

“My dear President,

President de Gaulle’s invitation to Britain, West Germany, the United States, Italy, and the Soviet Union to devote one-half percent of their defence budgets to the cause of cancer research, taken with the accompanying suggestion for the establishment of an international cancer research centre, represents a proposal which is, I believe, imaginative and indeed spectacular. It reflects an aspiration which has also been shared by other statesmen, notably by Mr Eisenhower when he was president and by Mr Khrushchev – first towards international cooperation in science and medicine on a large scale, and secondly having in mind the favourable if subtle influence of such cooperation on world problems of peace and disarmament.

The proposal comes at a time of great activity in cancer research, in which there is already extensive international collaboration and exchange. Certain it is that science cannot be advanced by money alone. Yet in modern conditions it increasingly depends upon those facilities and opportunities which money can provide if wisely allocated. It is a truism that scientific advance is limited by scientific manpower; yet here again there is evidence that large-scale provision can elicit, or permit the expression of, latent abilities not previously suspected.

Special care will require to be accorded to the question of an international centre, taking into consideration somewhat similar plans already agreed on or in contemplation. But there are many other directions in which the (relatively) large resources now being considered might be placed to telling and indeed historic effect in such a way as to make our present endeavour appear utterly primitive.

Granted wise direction, President de Gaulle’s proposal would lead to a new conception of the application of our resources, towards life and the life sciences and away from obsolete armament. The International Union Against Cancer places on record its willingness to cooperate in every way in the necessary studies, plans, and decisions to bring it to fruition.

The cell theory was considered as one of the greatest achievements of the human mind. There is no question that man’s eventual understanding and control of cell division will be one of the greatest – perhaps the greatest – of his many triumphs.

It is my hope that you will support this initiative and that the United States of America will take part in this international endeavour. Doubtless you will have encountered suggestions, which have also been made here, that the endeavour in general, or any international research centre to be made part of it, might suitably be associated with the illustrious name of the late President.

Alexander Haddow, President,
International Union Against Cancer”

Similar letters, differing just in the final paragraph, were addressed to: Professor Ludwig Erhard, Federal Republic of Germany; Signor Antonio Segni, Italy; Mr Nikita Khrushchev, USSR; and Sir Alec Douglas-Home, United Kingdom.

The third stage of UICC’s reaction to the proposal for an international centre was the longest. The President, Professor Haddow, and the Secretary-General, Dr J.F. Delafresnaye, sent letters, organized meetings and talks, and in particular held a conference in Stockholm in 1964. Both were invited to participate in the first technical conference organized by WHO in Paris on 17 December 1963, but mainly because of the attitude of UICC and the obstacles to

progress that it seemed to create, it was not invited to send representatives to subsequent meetings.

On 2 December 1963, Dr Delafresnaye wrote to Dr J.R. Heller of Memorial Sloan Kettering Cancer Center in New York. He summarized events since 7 November, and quoted in particular from Dr Haddow's letter to heads of state:

“Granted wise direction, President de Gaulle's proposal would lead to a new conception of the application of our resources, towards life and the life sciences and away from obsolete armament. The International Union Against Cancer places on record its willingness to cooperate in every way in the necessary studies, plans, and decisions to bring it to fruition.”

He mentioned that Professor Lacassagne, during a dinner with Professor Saabad, had assessed the French strategy as having three components:

- psychological: promoting arms reduction and use of funds for life science research;
- political: a decision of principle in defence of an idea;
- scientific: a decision on how the funds made available would be used.

On the first of these points, France was willing to cut its military budget, provided the other nations were willing to do likewise. On the second point, France was talking of an “international institution”, not of an “institute”. Such an institution, as envisaged by France, was a much broader concept than an international laboratory like CERN.

Copies of this letter were sent to Professors Denoix (Paris) and Haddow (London) and to Dr H. Stewart (Bethesda, MD, USA).

On 5 December 1963, Professor Haddow sent Dr Candau a copy of the letter he had addressed to the heads of state.

On 11 December 1963, Dr Delafresnaye told Professor Haddow that Professor Aujaleu had invited him to come to Paris to meet Dr Candau. A meeting took place on 17 December, including representatives of the United Kingdom and the United States of America.

In a letter to Dr Candau dated 30 December 1963, Professor Haddow expressed his disappointment and discouragement regarding the results of the meeting held in Paris. He was worried about the future prospects for UICC, and considered that in the present circumstances, the establishment of an international research centre was not appropriate. But he recognized that if substantial resources were made available, the results could be spectacular and historic. The same day, he also wrote to Mr Marcellin, to make him aware of his worries about the role left to UICC's research in conjunction with WHO, stating again that the establishment of an international research centre was not appropriate, while recognizing that allocating major resources to cancer research could prove a spectacular and historic development. He quoted the saying of the American architect Burnham: “Make no little plans. They have no magic to stir men's blood.” He added, “This is also our motto.” Professor Haddow also took the opportunity to thank the Minister for the decoration with the *Ordre de la santé publique* that he had recently received.

On 6 January 1964, Dr Delafresnaye wrote to Professor H. Hamperl (Institute of Pathology, Bonn, Federal Republic of Germany). He considered that if funding were to come from a government source, it should be allocated by a governmental authority, underlining that this was also the view of the Americans. He noted that UICC was a much more flexible organization than WHO and took the view that UICC must have an involvement in the new body.

On 24 January 1964, Mr Marcellin informed Professor Haddow that a meeting was to take place on 27 and 28 February and sent to him documents that would provide a basis for discussion of a preliminary draft convention and an estimate of funding for a research programme to cover a limited five-year period.

On 12 March 1964, Dr Delafresnaye sent to Dr Candau a draft document concerning the participation of WHO in a worldwide agency for cancer research, to be presented, in

agreement with Professor Haddow, at the Seventeenth World Health Assembly. In this document, attention was first drawn to the fact that cancer research should not be considered narrowly, since it is not a scientific discipline in its own right, but rather the expression of a human, medical, and biological problem. Relevant areas were epidemiology, nomenclature, standardization, and exchange of scientific information. A worldwide agency for cancer research should have interest in medicine, biology, and biochemistry, but also immunology, virology, endocrinology, and genetics. And it should be able to take action at both national and international levels.

Dr Delafresnaye explained that:

“We are afraid that the proposed new organization will not have really substantial support for its permanent activities. It would appear to us far preferable to use available funds to bolster the activities of existing organizations that are working effectively with limited resources.

We believe in the closest possible cooperation both nationally and internationally and between governmental and non-governmental organizations, which have supplementary and complementary roles to play. Finally, we believe that a World Research Agency for Cancer should have advice from a high-level scientific advisory group, which should be convened as soon as possible.

UICC is willing to put at your disposal the scientific talent and expertise of its committees, which, in many domains, have a long record of achievements.

UICC is very grateful to the French Government for this bold initiative.”

On 19 March 1964, a long document was sent to the members of the Executive Board of WHO and to the Budget Committee, dealing with the establishment of an agency for cancer research. This pointed out that the Governing Board of the new body should be appointed by the authorities and institutions having the right to be present in accordance with Article 80.

The international Governing Board should comprise:

- A person designated by the Swiss federal authorities (whether or not Switzerland were to participate in the funding),
- The Director-General of WHO (*ex officio*),
- The President of UICC (*ex officio*),
- Individuals appointed by each organization or government agency.

On 16 March 1964, Professor Aujaleu presented to the Seventeenth World Health Assembly, on behalf of the delegates of France, the Federal Republic of Germany, Italy, the United Kingdom, and the United States of America, document A17/P&B/20 dealing with the establishment of a worldwide agency for research on cancer (see Annex 4). A draft resolution concerning the participation of WHO in such a body was examined, as follows:

“The Seventeenth World Health Assembly,

Considering the initiative taken by several governments concerning the campaign against cancer; and

Convinced of the advantages that might be derived from a special effort of international cooperation in this sphere,

1. AUTHORIZES the Director-General to enter into discussions with the countries concerned with a view to the establishment and operation of a World Research Agency for Cancer, and
2. REQUESTS the Director-General to report on the progress of these discussions at the forthcoming sessions of the Executive Board and the World Health Assembly.”

On this occasion, Dr Delafresnaye, representing UICC and speaking at the invitation of the Chairman, recalled that the arrangements between WHO and UICC had been close and fruitful. Speaking at length, he transmitted the gratitude of UICC to the French President for his initiative, which might lead to victory over cancer many years sooner than would otherwise be the case. This resolution (WHA17.49), which was supported by Professor Widy Wirski (Poland), Dr Heide (Norway), and Professor A.L. Awadi, was adopted.

On 27 May 1964, Professor Haddow sent to Dr Candau his agreement on the membership of a small scientific panel that would meet in Stockholm to examine the French proposals. However, he said he was a little disappointed to learn from Mr Marcellin that the next meeting would be at the diplomatic level, as he believed the scientific considerations also to be of urgent importance.

In a letter of 7 July 1964 to Professor Haddow, Dr T. Caspersson (Sweden) made certain points concerning the Stockholm conference. His view was that the conference should have an essentially scientific basis, and that with the support of UICC, it would be very useful. He considered that UICC was well placed to take such an initiative, and, particularly, better so than the specialized UN agencies. He noted that Dr Delafresnaye had had a meeting with Professor George Klein, who would provide support if necessary.

On 9 July 1964, Dr Murray J. Shear, Secretary-General of UICC, sent a long letter to Professor Haddow, in which he gave a detailed account of the organization of the international conference to be held in early September. Both WHO and UNESCO were to be invited to participate.

The chairman of the conference was to be Dr Farber and the scientific secretary Dr Harris. The representatives of the various regions were to be the following:

Northern Europe	Professor T. Caspersson, Dr S. Hultberg
Central Europe	Professor A. Butenandt, Professor H. Hamperl
Low Countries	Professor O. Mühlbock, Professor H. Tagnon
Western Europe	Professor P. Denoix, Professor A. Lwoff, Professor G. Mathé
Southern Europe	Dr P. Bucalossi, Dr G. Buzzati-Traverso
Eastern Europe	Professor L.F. Larionov, Professor A.I. Serebrov, Professor L.A. Zilber
British Isles	Professor F. Bergel, Professor H. Harris, Dr A. Peacock
Africa	Dr A.L. Abul-Nasr, Dr V.A. Ngu
Asia	Dr V. Ramalingaswami
Far East	Dr M. Kuru, Dr T. Yoshida
Middle East	Professor I. Berenblum
North America	Dr W. Burdette, Dr S. Farber, Professor W.U. Gardner
Latin America	Dr E. Caceres, Dr A.B. Houssay

The officers of UICC were:

President	Professor A. Haddow
President-elect	Dr N.N. Blokhin
Outgoing President	Dr V.R. Khanolkar
Treasurer	Dr P. Loustalot
Secretary-General	Dr M.J. Shear
Director of the Geneva office	Dr J.F. Delafresnaye

It should be noted that in the title of the conference, the word “international” was replaced by “worldwide”, to avoid intergovernmental implications.

Professor Haddow wrote on 20 July 1964 to Dr Candau, to express his disappointment about the confusion still surrounding the French project. He explained that in view of its own

responsibilities, UICC had decided to organize a meeting in Stockholm from 7 to 9 September to examine the issue of international support for cancer research. This very broad meeting would be exploratory in nature. It would concern only UICC, but independent scientists had been invited, of whom a list was attached. UICC was seeking independent opinions not involving governments.

On 19 August 1964, Dr Delafresnaye informed Professor Lacassagne that the Russian professors Blokhin, Balmuhanov, and Napalkov had agreed to attend the Stockholm meeting, and enquired whether it would be appropriate to notify the 13 signatories of the original letter to President de Gaulle of the planned meeting. Professor Lacassagne replied on 24 August, advising him to consult Mr Marcellin on this question.

Dr Shear replied on 28 August to what he felt was a “provocative” letter from Dr Delafresnaye. He considered that the meeting should not be political. After the meeting, the minutes should be distributed not to governments but to the scientific community (academies of science, medical associations, biomedical research associations, cancer societies, etc.). He also drew attention to the Cancer Unit of WHO and the very useful minutes of its Consultative Committee, and noted the interactions between WHO and UICC to accomplish their respective missions. WHO at the administrative level and UICC at the scientific level should work together to make maximum progress in cancer research.

On 29 August 1964, Professor Lacassagne prepared a report in three parts:

- (1) Report on the first technical conference in Paris (17–18 December 1963)
- (2) Report on the meeting of the Executive Committee of UICC in Mexico (11 February 1964)
- (3) Report on the second technical conference in Paris (27–28 February 1964)

(1) First technical conference (Paris, 17–18 December 1963)

Professor Lacassagne recorded that five countries had participated (France, the Federal Republic of Germany, Italy, the United Kingdom, and the United States of America). The USSR was invited but sent no representative. The delegations included leading cancer experts, and the Director-General of WHO and the President of UICC also participated.

After examining the working documents presented by the French delegation, the participants had stated that they were in favour of the establishment of an organization for international cooperation in cancer research. However, for procedural reasons and for speed of action, they had considered (following certain international precedents) that it would be best to entrust the definition of its activities to a new body with its own budget, governing council, and scientific committee, but under the administration of WHO.

(2) Meeting of the Executive Committee of UICC (Mexico, 11 February 1964)

The project agreed upon during the first conference was discussed by the Executive Committee of UICC, and the wording of a memorandum to be presented by the President of UICC to the second technical conference in Paris at the end of the month was adopted. It was hoped that, in order to make rapid progress, a provisional secretariat could be set up, which would have the task of managing the plans and studies regarding the structure of the future permanent body. It would also take action as required, with the help of existing and suitably qualified international organizations such as UICC, to start the training of researchers and provide some financial, material, and technical support. A decision on the legal status of the permanent body should be an intergovernmental responsibility. WHO would have an important role to play in its establishment.

A governing council, appointed by the governments, would select members of a scientific committee from lists of scientists proposed by UICC and WHO. WHO would take responsibility for providing administrative services for the new body during its initial period.

(3) Second technical conference (Paris, 27–28 February 1964)

In addition to the delegates and advisers who had participated in the first conference, observers from UNESCO attended the second. Various draft conventions were presented by the French delegation, the United States delegation, and the Director-General of WHO.

The United States draft was the basis for discussion. This contained many of the elements suggested at the UICC meeting in Mexico. Three principles were adopted for the administrative and legal framework of the institution to be established, which could be called the World Research Agency for Cancer. These principles invoked:

- (a) a governing council, composed of one representative of each of the founding member states, the Director-General of WHO, and representatives of any other state wishing to support the agency;
- (b) a scientific council, composed of 12 qualified experts, who would be chosen by the governing council from a list drawn up by the Director-General of WHO, in agreement with UICC;
- (c) a secretariat, composed of a director (appointed by the governing council following proposals by the Director-General of WHO) and the necessary technical and administrative personnel. This would work in close collaboration with the WHO secretariat.

As could be expected, the problem of funding drew conflicting opinions. However, since the delegates were not mandated to examine the substance of this issue, the discussion was deferred for a later meeting. Similarly, no formal position was adopted regarding the legal procedure for the creation of a new institution, this being for the relevant governments to decide. It was agreed that the project, as accepted by the delegations, would be presented by the Director-General of WHO at the World Health Assembly the following month, and the administrative assistance of WHO would be requested.

At the Seventeenth World Health Assembly on 19 June, the Director-General was authorized to enter into discussions with the states that had decided to promote the establishment of an organization for cooperation in cancer research.

In view of this outcome, the French Government proposed that a diplomatic conference should be held in July, or that a working group should prepare such a conference. However, several replies to this proposal suggested that the conference should be deferred until after the holiday period.

The ministers of public health and of foreign affairs therefore agreed that the ambassadors of the member states in Paris should designate one of their collaborators, who, in conjunction with the Director-General of WHO, should decide upon a programme to be discussed by legal and financial experts at a meeting to be held in Paris on 28 September.

On 31 August 1964, Professor Lacassagne deemed it necessary to add a supplement to the report he had sent to Dr Delafresnaye on 29 August, because he had received high-level information on developments. He believed that the Stockholm meeting would issue a document detailing the position of UICC and that this would be sent before the 28 September meeting to the five governments and to WHO. He considered that the text ought to insist on four matters:

1. The urgency of acting without delay; for this purpose, it would be important to set up an effective and responsible provisional body;
2. The constitution of this provisional body, which (in line with the proposals from the Mexico meeting) could be made up of a governing committee, a scientific council, and a secretariat. Each of these should be composed of only a small number of people. For example, the governing committee should have one representative of each of the five founding governments and one representative from WHO, the

scientific council should have 12 members, and the secretariat a limited administrative staff chosen by WHO.

3. The fact that during a transitional period, there would be no need for a budget if the governments paid the salaries of their various representatives, if WHO paid those of its staff members, and if the host government covered the running costs.
4. The budget for the definitive body. The suggestion made by the Director-General of WHO seemed reasonable: 1000 million (1 billion) francs for the starting up of the centre, and the same sum for each of the first five years of operation, making a total of 6 billion francs for the five years. This was to be discussed before the meeting to be held probably on 8 September.

Conference on the international support of cancer research (Stockholm, 7–9 September 1964)

The agenda of the conference was as follows:

1. Opening of the conference by Dr A. Haddow, President of the International Union Against Cancer
2. Address of welcome by Dr T. Caspersson
3. Election of the chairman of the conference
4. Adoption of the agenda
5. Status report on current and projected international initiatives in cancer research
 - 5.1 International Cell Biology Organization (Dr O. Mühlbock)
 - 5.2 International Committee on Laboratory Animals (Dr J.H. Maisin)
 - 5.3 International Life Science Institute (Dr H. Tagnon)
 - 5.4 European Molecular Biology Organization (Dr J. Kendrew)
 - 5.5 WHO Programme of Cancer Research and World Health Research Centre (Dr H. Hamperl)
 - 5.6 UICC Programme in Research and Training (Dr W.U. Gardner)
 - 5.7 USA Programme of International Support of Cancer Research (Dr M.J. Shear)
 - 5.8 French initiative – the World Research Agency for Cancer (Dr A. Lacassagne)
6. Present and future requirements for cancer research
 - 6.1 In the United States of America (Dr H.L. Stewart)
 - 6.2 In Europe (Dr P. Denoix)
 - 6.3 In the United Kingdom (Dr R. Paterson)
 - 6.4 In Canada (Dr R.M. Taylor)
 - 6.5 In Australasia (Dr B.S. Hanson)
 - 6.6 In the USSR and associated countries (Dr N.N. Blokhin)
 - 6.7 In the Far East (Dr M. Kuru)
 - 6.8 In South-East Asia (Dr V.R. Khanolkar)
 - 6.9 In the Middle East and North Africa (Dr L. Abdul-Nasr)
 - 6.10 In Central Africa (Dr V.A. Ngu)
 - 6.11 In South Africa (Dr J.F. Murray)
 - 6.12 In Latin America (Dr E. Caceres)
7. Recommendation of policy concerning international support of cancer research
8. Recommendation concerning the objective, structure, and operation of an international agency for cancer research should such an agency be required
9. Relationship between any new agency and existing organizations
10. Implementation of recommendations
11. Closure of conference

Speakers for item 5 of the agenda were invited to provide the following information: (a) the aim of the organization; (b) sponsoring organizations; (c) membership of the directing board and the names of the principal advisers; (d) the annual budget; (e) sources of funds; (f) programme; (g) achievements.

Speakers for item 6 of the agenda were asked to attempt to answer the following questions:

- (a) To what fields of research can the greatest contribution be made from your geographical area?
- Fundamental cancer research (chemical mechanisms of carcinogenesis, genetic mechanisms of carcinogenesis, nutrition and cancer, viruses, nucleic acids and nucleoproteins, enzymes, hormones, tissue culture, radiobiology, chemotherapy, etc.)
 - Applied cancer research (geographical pathology of cancer, environmental cancer and prevention, research in detection techniques, research in diagnosis, research in clinical stage classification of cancer, research in therapy, controlled clinical trials, etc.)
 - Services for research (standardization of nomenclature, research in communication, cancer registration, research in instrumentation, provision of laboratory animals, transplantation tumour banks, provision of virus strains, etc.)
- (b) What are the present and future needs in research laboratories in your country or part of the world, with particular respect to: space and facilities, equipment and supplies, payrolls for scientists and supporting workers, training of research workers, travel costs, drugs for patients and animals, etc.?

Speakers for item 7 of the agenda were asked to indicate how financial support was provided for cancer research and to give their opinion on questions such as whether a new agency should be focused on cancer or on the biomedical sciences in general, what the functions of the agency should be, and whether it should come under the aegis of WHO or be set up separately.

The opening address by Dr Haddow drew particular attention to two resoundingly successful ventures in international cooperation, the International Geophysical Year (IGY) and the European Organization for Nuclear Research (CERN), as well as to the pioneering role played by the United States of America in the worldwide encouragement of medical research. He remarked on the imaginative character of the French proposal for a world cancer research agency funded by a small percentage taken from military expenditure.

He then reviewed the role of UICC, the sole international instrument in the cancer field, representing some 70 countries, with a non-governmental status, although affiliated to WHO. Describing the efforts made by UICC in the sphere of research training and fellowships, he pointed out that it had appointed more than 70 fellows at a total cost of more than US\$ 750 000.

Dr Haddow summarized the objectives of the conference, under five headings:

1. To survey current and projected international initiatives in cancer research;
2. To measure the present and future research requirements in the various regions of the world;
3. To recommend policy, and the objective, structure, and operation of an international agency for cancer research, should it be agreed that such an agency was required;
4. To study the relationship between any new agency and existing organizations;
5. To consider and decide the means by which any recommendations that might be reached should be made known and implemented.

He welcomed those who had worked hard for UICC, such as his predecessor Professor Khanolkar, Professor Maisin, and Professor Blokhin, the President-elect, as well as the latter's colleagues Drs Balmuhanov and Napalkov, and the new Vice-President Professor

Kuru. He also mentioned Dr Sidney Farber, Chairman of President Johnson's Commission on Heart Disease, Cancer, and Stroke and a member of the Advisory Council of the National Cancer Institute, and Dr Kendrew and Professor Graber. His ultimate welcome was for Professor Lacassagne, doyen of cancer research in France and a signatory of the original appeal by the French intellectuals which initiated the French proposal. He conveyed apologies from Drs Mathé, Harris, Latarjet, Butenandt, Klein, and Lwoff, and then thanked Professor Caspersson for his inestimable help as well as his contributions to cell biology and his support of UICC.

Wishing success to the conference, he said that although it could not achieve miracles, it should and must labour to keep alive these ideas and ideals so that international support of the life sciences in the decades ahead could ameliorate the condition of man.

After the conference, Dr Delafresnaye wrote on 21 September to Professor Mathé to send him a résumé of the outcome, on a confidential basis, as he had not yet been able to prepare the official record of the proceedings. He noted again that the aims of the conference had been:

1. To survey current and projected international initiatives in cancer research;
2. To measure the present and future research requirements;
3. To make recommendations on the objective, structure, and operation of an international agency for cancer research, should it be agreed that such an agency was required;
4. To study the relationship between any new agency and existing organizations;
5. To consider how any recommendations from the conference should be implemented (this being an internal issue for UICC).

He explained that in Stockholm, they had examined the principles of international support for cancer research, rather than support for international aspects of cancer research. They had also considered cancer research in its widest possible terms. He said there had been little to say about present and future activities relating to cancer research.

“Several of these activities have been undertaken under the auspices of UNESCO and financed by that body, namely:

- (a) The International Cell Research Organization (ICRO), which promotes exchanges of research workers and organizes interdisciplinary courses in cell biology;
- (b) The International Committee on Laboratory Animals (ICLA), which is conducting a survey of needs for laboratory animals and which works to stimulate breeding of animals and to improve their quality. These two organizations, which have worthwhile programmes, have ridiculously small budgets;
- (c) The International Life Science Institute, which is in the process of being set up. The Belgian Government has granted US\$ 13 000 to UNESCO to study the project.

The European Organization for Molecular Biology, an association bringing together 150–200 molecular biologists, adopted its statutes just three months ago.” This organization wished to set up a European fund for molecular biology and to establish a European laboratory for molecular biology modelled upon CERN. The benefits and disadvantages of such a laboratory were discussed, “but it appears that, finally, the Stockholm group came to support the idea of such a European laboratory. This organization does not yet have a budget of its own.”

The WHO programme for cancer research had been reviewed, and the plans for the establishment of a World Cancer Research Centre examined. The general opinion was that WHO had carried out good work in the area of public health, but that its research activities had not met with great success. This seemed to be due to the fact that research at WHO was integrated within its general programme, whereas it would have been preferable to separate it

entirely. The heavy administrative structure of WHO was not appropriate for the administration of research.

UICC's programme of research fellowships had been considered. By the date of the meeting, 71 one-year fellowships, worth an average of US\$ 10 000 each, had been granted. Each short-listed candidate had been interviewed by a member of the Fellowships Committee or by a corresponding member, but there was not enough funding available for all the good candidates. The current annual budget for fellowships was US\$ 250 000, but this could not be relied upon and a more secure source of funding was needed.

The support from the United States of America for cancer research conducted outside the country was discussed. This amounted to US\$ 1.4 million, but was liable to decrease, so that alternative sources needed to be found.

This summary of the situation had led to the conclusion that there were many programmes, of varying magnitude, but overall insufficiently funded.

In discussing the French project, UICC had made the point that it was especially remarkable for its scale, far above anything that had been envisaged previously. It was noted that this would have to be a strictly international undertaking, but also that some aspects of the initial project were already completely obsolete, in particular the idea of funding based on military expenditures.

An attempt had been made to estimate the total sum currently devoted to cancer research worldwide, which appeared to be in the region of US\$ 200–300 million annually. This led to the conclusion that it was necessary to envisage international support amounting to many millions of dollars per year, a sum far above those suggested by the United States delegate at the previous meeting in Paris. UICC was to try to determine these amounts more precisely and to consult its committees and member organizations on the matter. A working group would look into this immediately.

Regarding the agency that it appeared necessary to set up, the omissions in the conclusions from the UICC meeting were as eloquent as any declaration. UICC in fact considered that it would be necessary to create an autonomous international foundation, and fully understood that if governments committed large sums to such an agency, they would wish to be represented on its governing body, which in turn would wish to select its scientific council. One solution had been proposed; others were possible.

UICC was of the opinion that it would be best for the new organization to be completely separate from WHO, for many reasons that cannot be fully presented here. The recruitment and selection of scientific staff should be conducted in a different manner to that of WHO staff.

Overall, UICC envisaged an organization that would handle substantial sums of money but have only a limited permanent staff. Its interactions with existing organizations would be working relations. The agency would conduct its own studies or could assign work to existing institutions. Contracts for work could be set up with either international or national institutions.

UICC envisaged an extremely flexible body that would have direct interactions with research workers and would make use of existing national or international organizations only if there was some advantage over direct contact.

On 21 October 1964, Dr Delafresnaye sent to all the members of UICC who had participated in the Stockholm conference a summary of the meeting held in Paris from 29 September to 2 October, attended by representatives of the governments of France, the Federal Republic of Germany, Italy, the United Kingdom, and the United States of America, as a step towards establishing an international agency against cancer. He pointed out that UICC had not been invited in view of the governmental character of this meeting, but that he

was nonetheless in a position to provide an unofficial summary, subject to subsequent correction.

On 13 January 1965, Dr Delafresnaye addressed the following letter to the Director-General of WHO:

“Dear Dr Candau,

We understand that the question of the creation of a World Research Agency for Cancer will be considered by the Executive Board of WHO at its forthcoming meeting under item 2.7.2 of the Provisional Agenda.

I am instructed to submit to you the attached Memorandum, which we would be pleased to see circulated to Members of the Executive Board before item 2.7.2 comes up for discussion.

We realize, of course, that the decision regarding the nature and scope of the circulation rests entirely with you.

We are confident, however, that you will accede to our request.

MEMORANDUM

The International Union Against Cancer and the international support of cancer research

1. The International Union Against Cancer (UICC)

The International Union Against Cancer is the only international organization devoted solely to promoting on an international level the campaign against cancer in its research, therapeutic, and preventive aspects. It is a non-governmental body, non-political and non-sectarian.

Sixty-seven countries have joined the UICC through their voluntary organizations devoted to the fight against cancer or their governmental institutes or departments or through national committees on which are represented voluntary and governmental organizations.

The UICC enjoys official relationships with WHO, and working arrangements are close and cordial.

The programme of the UICC is divided into research activities with particular reference to geographical pathology (in which field the UICC has pioneered), clinical stage classification, and tumour nomenclature and into control activities such as the promotion of prevention and detection programmes, patient care, professional and public education, etc. ... In recent years, the UICC has administered a senior postgraduate international fellowship programme in cancer research, thanks to the support of the Eleanor Roosevelt Cancer Foundation affiliated with the American Cancer Society.

The annual budget of the UICC is US\$ 500 000, of which approximately half is devoted to the fellowship programme.

2. The position of the International Union Against Cancer regarding the international support of cancer research

Stripped of all controversial considerations, the French proposal – from which originates the idea of establishing a World Research Agency for Cancer – was to provide massive international support for cancer research. The International Union Against Cancer naturally favours massive support for cancer research. The UICC believes that the resources made available should be directed primarily towards expansion of research in medicine, biology, biochemistry, and the related sciences, and especially in such fields as chemical pathology, immunology, virology, cytogenetics, and the structure and function of the nucleic acids and

other natural proteins on which the solution of the cancer problem probably depends. While the emphasis should be placed on the fundamental sciences, studies in the fields of geographical pathology, nomenclature, clinical stage classification, and exchange of scientific information should also be pursued with increased vigour. The UICC defended this position on the occasion of the first and second meetings of experts held in Paris respectively on 17 and 18 December 1963 and on 27 and 28 February 1964. This is also the position defended before the Seventeenth World Health Assembly.

From 7 to 9 September 1964, the UICC organized in Stockholm a conference on the international support of cancer research. The conference was attended by 33 leading scientists from 19 countries belonging to all the continents of the world.

It was concluded that an urgent need exists, in addition to national support, for international support on a very considerable scale.

If this massive support were forthcoming, the conference favoured the establishment of an International Cancer Research Agency, sponsored and financed by governments, which would act as a recipient and manager of funds. This agency would be responsible for the allocation of support not only on the basis of specific applications but also from its own investigations of research and training requirements throughout the world. It appeared of major importance that such support should be accorded not only to projects transcending national boundaries, but also to intra-national projects in the case of countries not at present able to sustain these from their own resources.

If, however, the financial support provided by governments remained at a relatively low level, the creation of a new agency did not appear to be the best way to develop cancer research when there existed international organizations whose capabilities were not used to the limit.

The greatest need of research workers in most parts of the world is the provision of more substantial support for their research operations and for the training of additional young scientists in order to expand research. It would be unfortunate if the time and energy of leading scientists were to be diverted from their tasks in order to plan activities that could not be carried out because funds were not available in sufficient amounts.

The World Health Organization may be assured, however, that the International Union Against Cancer will continue to make available the talent and experience of its scientific commissions and committees, which have a long record of achievement in many fields.”

On 4 March 1965, Dr Delafresnaye wrote to Professor Mühlbock (Netherlands Cancer Institute), the chairman of UICC’s Research Commission. In view of the latter’s participation in the recent meeting in Lyon, he deemed it necessary to stress a certain number of points:

1. The constitution of the new organization (World Research Agency for Cancer, WRAC) had been only slightly amended since the meeting of November 1964.
2. The financing of the new organization had not been discussed in detail. The figure of US\$ 2 million was thus to be considered as an order of magnitude to serve as a basis for discussion at the forthcoming meeting of the Scientific Council. This sum represented the basic amount to finance the “permanent activities”. It would be made up by the flat annual subscriptions of member states at the rate of US\$ 100 000–150 000 per state. Special projects would be financed by “special grants”.

Dr Delafresnaye added:

“1. The responsibility of the Scientific Council that will meet in a month’s time in Lyon will be tremendous. Up to the present time, scientists have not been consulted in any way. Your meeting in Lyon will be the first scientific consultation.

I hope that you will be given an opportunity to consider the constitution of the proposed new organization as well as its proposed programme.

You may be certain of one thing: unless some clear statement is made by the Scientific Council that it does not agree with this or that provision of the constitution, it will be assumed that the Scientific Council does in fact agree with the constitution.

...

All this to stress that members of the Scientific Council probably won’t be placed in the best conditions to give an expert opinion.

2. Now I will discuss how the proposed constitution is at variance with the Stockholm declaration.

(a) “It was concluded that an urgent need exists, in addition to national support, for international support on a very considerable scale, probably of the order of many millions of dollars annually.”

I think many of us had misgivings about the last phrase of this sentence, particularly since we had no concrete programme to suggest.

I think there is a considerable need right now but that it can only be met progressively. In other words, there must be a “build-up”.

Article VIII, paragraph 4 prevents this build-up of the basic subscriptions for five years. During that time, any Participating State has a “veto”. You may argue that during the first five years the build-up of the basic budget will come from the increase in the number of states joining the Agency.

Article VIII, paragraph 7 provides that special projects will be financed from special gifts or grants. How does one obtain a “special grant” for a worthwhile “special project”? No mechanism is proposed. At present, WHO turns to NIH and the special project is considered by the appropriate organ of NIH. This is a time-consuming procedure, and that is one reason why the WHO research programme does not get off the ground.

The “Voluntary Contributions” system of WHO does not work, so that activities financed by such contributions eventually have to be absorbed in the regular budget.

(b) “Special emphasis was laid upon basic research” You will notice that the permanent activities (Article II, paragraph 2) are itemized as: Communications; Planning; Training.

Support for basic research only appears as the last item of paragraph 4, that is, financed by “special grants”.

My view is that the whole of Article II is unacceptable as it stands and that there is a glaring contradiction between paragraph 1 and the subsequent ones.

(c) “The conference envisaged the establishment of an agency to act as a recipient and manager of funds, with a Scientific Advisory Council appointed from a panel nominated by the UICC.”

There is no point in spending time on the last phrase of this sentence, because it hasn’t come about and never had a chance of being adopted.

As previously discussed, the Agency will not be a manager of funds. For any special project, it will have to go cap-in-hand to member states. The Scientific Council will be quite powerless (Article II, paragraph 3). One does not even know how often it will meet.

I certainly do not believe that a constitution should go into too much detail, but the basic principles under which the organization will work should be set out clearly.

I have one proposal to make: there is US\$ 3000 in the UICC budget for the WRAC. I think some of this money would be well spent if certain key UICC people, nominated to the Scientific Council of the WRAC, should meet one day before the Lyon meeting to consider the situation in the light of the latest information.”

On 12 March 1965, Dr Murray J. Shear, Secretary-General of UICC, wrote to Professor Haddow, President of UICC:

“Dear Alex,

The National Academy of Sciences–National Research Council in Washington, the parent organization in which the USA National Committee on the UICC is located, sent me on February 26, 1965, a copy of the Statute of International Agency for Research on Cancer as translated from the French in the Division of Language Services, Department of State. In this latest draft, Article VI Section 2 provides that the members of the Scientific Council shall be appointed by the Governing Council. Inasmuch as the Governing Council will come into existence only after the Agency is established in WHO and the national representatives to the top governing board are designated, the ad hoc group which will meet in Lyon at the end of this month is not the Scientific Council of IRAC [*sic*]. In another official document on the Sept. 29–Oct. 2, 1964 meeting in Paris (labelled Report in the State Dept. translation), Section 3 on the preparatory meetings does not refer to the eminent scientists as constituting the Scientific Council.

It is understandable that some of our colleagues are urging that the Union take prompt action. Since eight (of the twelve) men invited to Lyon are officially connected with the UICC, it might appear reasonable for the Union to arrange a meeting of these eight together with some other UICC people in Lyon on the day before the IRAC meeting starts. Alternatively, it might seem desirable for the Union to call a special meeting after Lyon but before the IRAC proposal comes up on the agenda of the World Health Assembly in May.

As I wrote to you and to John Delafresnaye yesterday in longhand, I doubt the wisdom of any further action by the UICC at this time. There is, moreover, the possible hazard of increasing the resentment which the Union has engendered, in some quarters, since the inception of the French initiative.

It is not enough to wade courageously into the fray so as to have the emotional satisfaction of “doing something”. Any action the Union takes in this matter should be coolly calculated from the point of view of its possible effectiveness.

The position of the UICC has been clearly delineated. In addition to many, many conferences and written communications with numerous officials in various countries and international organizations, there has been the Statement of the Board at the conclusion of the Stockholm Conference, the Editorial in the Bulletin for July 1, 1964, and the position paper presented in Geneva before the Executive Board of WHO in January 1965. The Union has made known its availability to the Governments sponsoring IRAC, and several national advisory cancer groups have offered to be helpful in formulation of policies and programs for IRAC.

The participating Governments have not accepted, as yet, these offers from national and international cancer organizations. It is clear that the establishment of this new enterprise is still being managed at the diplomatic level, and that these Governments do not consider that developments have reached the stage where they are ready for the participation of Non-Governmental Organizations (“NGOs”).

If and when the Governments deem the time ripe for inviting participation by national and international NGOs, the UICC must be realistic in its expectations. Whatever may have been the disappointments and frustrations felt by those cancer researchers who were excited by the prospect of massive financial support, as envisioned in the original proposal of November 1963, they have got to come down to earth again. The financing in sight for IRAC is of the order of \$100,000 to 200,000 per country per year for its program of “permanent activities” or “continuing activities”; the figure of \$2 million per year has been mentioned as a tentative basis for the planning of the scope of the program, i.e., on the assumption that 10 to 20 countries will join IRAC and pay the annual fixed dues.

1. Establishment

Five Governments are committed to sponsor the Resolution on establishment of IRAC at the World Health Assembly in May 1965. Thus IRAC will be authorized (unless some country introduces a motion to defer action for a year, in order to secure a less hasty elaboration of the scientific program, and then wins majority support for the tabling).

2. Financing

The vast sums implied by the original proposal have shrunk down to one or two million dollars per year, as regards dependable commitments. (The financing of “special projects” is not guaranteed.)

3. Program

The statute provides that the program of permanent services shall include: collection and distribution of information on cancer; studies of the natural history of cancer, including epidemiology; and the education and training of personnel for cancer research. The group which will be meeting in Lyon, in drawing up a preliminary work program, are instructed (cf. above-mentioned Report, Item 3(1), page 2) to do so “within the framework of the activities assigned in the said Statute”.

The program of “continuing activities” cannot be a large one, because of the limitation of funds. Within these financial limitations, the program will be a restricted one. IRAC is not to directly operate a research institution with its own laboratories, clinics, and staff of scientists. Strong opposition has been recorded to the allocation by IRAC of research grants to other institutions. Support of the basic biomedical sciences is not to be included.

4. Relations with the WHO Cancer Unit and with UICC

From several sources, the undesirability of duplication and triplication has been transmitted to those engaged in establishing IRAC. It is likely that the current program of WHO in cancer research will be transferred to IRAC after it is set up.

Although UICC is mentioned in Article I of the Statute, and in the communiqué issued after the October 1964 meeting in Paris, the nature of the “liaison” and of the “cooperation” has not yet been spelled out.

5. Posture of UICC

The position of the Union includes the following three major points:

a) Progress in the better control of cancer is dependent on the kind of new knowledge that is contributed by research, especially in the sciences basic to biology and medicine.

b) The greatest need of research workers in most parts of the world is the provision of more substantial support in their research operations, and for the training of additional cadres of young scientists needed to expand meritorious projects and programs.

c) The creation by Governments of a new international agency to facilitate and foster cancer research is welcomed. The UICC stands ready to cooperate in providing the advice of its many knowledgeable experts, in helping to develop a scientific program of high merit, and in avoiding unnecessary duplication.

6. Future outlook for UICC

The Union should be grateful to the Governments which are establishing IRAC. Despite the limited funds and the restricted program which are in prospect for IRAC, its activities will provide added impetus to knowledge of cancer in widely-accepted, orthodox fields of cancer research and in the non-controversial meaning of "international" in "international cancer research".

a) To the extent that IRAC will plan to engage in kinds of cancer activities which the Union has pioneered in and is still conducting, the UICC can drop out of those particular activities and leave them to IRAC, if this is jointly considered desirable.

b) This would free the Union, as an NGO, to embark on new activities and pioneer in research subjects which are too new to secure approval from intergovernmental organizations or which would not be considered appropriate for them.

c) As an NGO, the Union is in a position to secure financing of its programs from voluntary cancer societies, from national academies, and from governmental sources. It can enlarge its fellowship program and even initiate discussions on the advisability of embarking on a program of awarding grants in support of research. The possibility may arise of helping IRAC in its program through administration by the Union of one or more contracts of mutual interest.

ENVOI

In the light of the information available to us, IRAC should not be considered as a competitor of the Union. It is not likely that it will support the kinds of future research that are viewed by the Union as of the greatest potential value. Awarding of grants-in-aid of research by IRAC are not in prospect. The funds in sight are only a minute fraction of what the Union has estimated can be usefully employed.

It is clear, therefore, that the UICC will continue to be needed on the worldwide scene. With the added emphasis being given to international aspects of cancer research by the intergovernmental initiative, it will become increasingly evident that only the Union will be in a position to conduct the necessary activities that lie outside the scope of IRAC."

Summary of UICC's responses to the establishment of IARC

To obtain a clearer picture of UICC's reactions, those that constituted opposition to the creation of the international agency are presented first, followed by those that can be considered as acceptance, or even as a wish to cooperate.

As far as opposition is concerned, it is clear in the letter from the President of UICC expressing to the Director-General of WHO his disappointment, discouragement, and anxiety, which led him to consider inappropriate the proposal for an international research centre. He was afraid that the resources available would be insufficient and deemed that it would be preferable to help existing institutions.

The conference held in Stockholm by UICC had an exploratory aim, with independent scientists as participants, and was non-political. Various criticisms were expressed concerning the way the future international body would function, and it was considered that it should be separate from WHO and have an independent process for recruitment of staff.

Regarding the acceptance or tolerance of the new international organization, the first letter of the President of UICC to President de Gaulle expressed his gratitude for his remarkable humanitarian initiative, which could lead to spectacular and historic developments. It was noted at the same time that Khrushchev and Eisenhower had previously presented related ideas.

Indeed, at the time that the World Health Assembly was about to formally establish IARC, the President of UICC and its Secretary-General stated that UICC and the agency could well have complementary roles, while pointing out that the recruitment of staff ought

to be separate from the WHO process. They noted that UICC was a non-governmental body, non-political and non-sectarian, that it had had a pioneering role in various domains, notably geographical pathology, and that it was ready to cooperate by making available the talent and experience of its commissions and its scientific committees, which had a long record of achievement in many fields.

The relations between WHO and IARC on the one hand and between UICC and IARC on the other led to the setting up of an *ad hoc* committee, of which the report prepared by Professor Aujaleu in 1977 presented the findings and reviewed the situation after the first 12 years of operation of IARC.

Reception by the states called to join in establishing IARC

It would be interesting to examine the responses of the six nations to which President de Gaulle initially appealed. However, no documents are available concerning the reception of this appeal by the Federal Republic of Germany or Italy.

As far as the USSR is concerned, it can simply be noted that it did not respond immediately to de Gaulle's appeal. Neither did it send any representative to either of the two technical conferences held in Paris in December 1963 and in February 1964, but it did participate in the World Health Assembly on 16 March 1964. The minutes of that Health Assembly record that the USSR had not been able to send delegates to the two first technical meetings in Paris. Its later adherence has been suggested to have resulted from the influence of the French Communist Party, which, sensing that the project for the establishment of IARC would go ahead, pressed the USSR to be among the founding states.

Regarding the United Kingdom, there is a contrast between the apparently favourable reception by the Government, judging by the meeting between the French ambassador to London, Mr Geoffroy de Courcel, and Mr Richard Butler and by the attitude of the British delegates at the first technical conference in Paris, on the one hand, and the initially cool, and later hostile, reactions of the British President of UICC, Professor Haddow, on the other.

As concerns the United States of America, one may mention (with some reservation) a reference made at the time in a French newspaper to a statement by President Kennedy to the Senate, in which he pressed it to delay the project, and an article by Dr G. de Thé¹, a French doctor working at the time at the United States National Cancer Institute, that was published in a French newspaper in September 1964.

“The American reticence and delay led in July [1964] to the cancelling of the planned meeting for the organization of the International Centre Against Cancer. This meeting will, however, take place on 29 September, and will include a delegation of American experts whose cooperative attitude is well known. They will certainly need to plead to their government for a cause that is doubtless favoured by researchers but not at all by the public, politicians, or economists.

The attitude of the United States is due in part to a deeply felt aversion to the head of state and to France at all levels of American society. This feeling has developed gradually, like everything in that country, but once in place, it will take some time – perhaps a long time – to disappear.

The Americans say that General de Gaulle has given this project a political dimension, which obliges us to respond at the same level; but if the project had been proposed by the scientists themselves, it would have been a very different matter, because the United States would not have had to examine it from the political point of view.”

¹ Dr G. de Thé was selected when IARC was established to be head of the Unit of Biological Carcinogenesis, which he led until 1978. He was subsequently a director of research in the French CNRS.

The author noted that the presidential election was approaching, which was not conducive to the launching of international projects. He drew attention to the financial problem that President Johnson wished to reduce government expenditure. Thus, the budgets of the various ministries had been frozen or reduced for the period 1964–1965. For the first time since it was set up in 1937, the National Cancer Institute had suffered a budget cut of US\$ 5 million compared with the preceding year.

It appeared difficult, furthermore, to ask Congress to invest a large sum in an international institution when cancer research was highly advanced in the United States of America. The budget for cancer, when the article was written, amounted to US\$ 140 million. A United States allocation of 0.5% of the military budget would represent US\$ 250 million, or 1250 million francs. The same percentage of the French military budget corresponded to about 100 million francs, and the Americans would not wish to provide 10 times as much as another country with which it would be placed on an equal footing in the new institute.²

Dr de Thé also noted that the United States National Cancer Institute had in recent years granted US\$ 15 million to a range of research institutes worldwide, mainly in Europe.

In spite of these comments and reservations, Dr de Thé concluded: “If England, Germany, Italy, the Netherlands, and France agree to devote jointly 0.5% of their [military] budget to this common venture, the fight against cancer in Europe would have at its disposal 400 to 500 million francs”, allowing the financing of national institutes, the coordination of their research, and the creation of shared working facilities.

It is worth noting that one of the French scientists (E. Aujaleu) who played an important role in the establishment of IARC stated that the head of the American delegation, Surgeon General James Watt, was by far the most cooperative and most enthusiastic of the participants during the technical conferences held in Paris to prepare for the establishment of IARC.

Representatives of the Netherlands were present at the preparatory meetings, from the first one held in Lyon on 16 February 1965. This country had wished to participate, being very much in favour of the establishment of IARC, and it contributed with great efficacy in putting the Agency into operation.

² One of us (A.G.B. Sutherland) conducted a study that led him to conclude that the contributions of the five states financing the operation of IARC would have amounted (on the basis of 0.5% of the military budget) to a total of US\$ 400 million, which 20 years on would have been equivalent to US\$ 1.5 or 2 billion! Dr Lorenzo Tomatis, on the occasion of the 20th anniversary of IARC, estimated that 0.5% of the military budget of the 12 member states would by then be equivalent to some US\$ 200 million per year, compared with an actual annual budget of IARC at the time of about 250 times less than this.

3. The Launch of IARC

This chapter provides details of all those who contributed to the various stages of the establishment of IARC. Three phases can be identified:

- (1) Initial phase: from 9 November 1963, the date of the letter in which President de Gaulle called for steps to be taken towards the founding of the Agency, to 20 May 1965, when IARC was formally established by the Eighteenth World Health Assembly;
- (2) Second phase: from May 1965 to April 1967, the period during which the scientific and administrative structures of IARC were set up;
- (3) Third phase: from June 1967 to June 1972, during which the research workers and administrators worked in temporary accommodation while awaiting completion of the building being constructed for them by the City of Lyon.

The names of some of those who worked towards the establishment and installation of IARC may have been omitted below, for which we apologize; the limited availability of relevant documents has made it difficult to reconstitute the roles of all those involved.

Period from 9 November 1963 to 20 May 1965

A number of individuals played key roles in the initial phase of the project; these are mentioned first, and then the participants at the series of technical meetings held in Paris and Lyon.

First steps

In his open letter to Louis Armand, the first signatory among the eminent Frenchmen whom D'Astier de la Vigerie had brought together to present the initial request, President de Gaulle informed him that he had entrusted to the Minister of Public Health and Population the job of taking all necessary steps for the promotion of cancer research in the framework of an international institution.

The Minister, Mr Raymond Marcellin, telephoned Dr M.G. Candau, Director-General of WHO, and instructed his Director-General of Public Health, Professor E. Aujaleu, to take all necessary measures for the successful establishment of this international institution under the auspices of WHO. It is worth emphasizing the important roles of Dr Candau and Professor Aujaleu in the establishment of IARC.

Dr Candau, with his perfect grasp of the organization and functioning of WHO, rapidly formulated a plan taking into account the constraints posed by his administration and the reactions of the various member states and of the International Union Against Cancer. He likewise was able to take into consideration the fact that there had been criticism of WHO for having paid insufficient attention to research. He took an active and valuable part in all the technical meetings held first in Paris, then in Lyon, to ensure a rapid and constructive outcome, and also presented the project to the Seventeenth and Eighteenth World Health Assemblies.

Professor Aujaleu had been Director-General of Public Health since 1956, and thus already had an excellent understanding of the functioning of the Ministry when Mr Marcellin asked him to take charge of working towards the establishment of the new international institution for cancer research. This mission could have been assigned to Professor L. Bugnard in his capacity as Director of the National Institute of Hygiene, but Mr Marcellin planned to abolish this institute and create the National Institute for Health and Medical

Research (INSERM), of which the director was to be Professor Aujaleu. He therefore chose to ask the latter to represent him and take part in all the steps leading to the establishment of the new institution. This choice was justified by Aujaleu's scientific credentials (*ancien interne, Médaille d'or des hôpitaux*, or former resident with hospital gold medal; assistant professor and then associate professor at the Val-de-Grâce Hospital, Paris) and by his long experience in social hygiene, of which he had been director at the Ministry since 1945. He had collaborated with 25 successive ministers.

He was, in addition, very experienced in dealing with WHO, with which he had worked as a consultant for the previous 15 years (1948–1963). He had been Chairman of the Executive Board (1959–1960) and was to chair the 1968 World Health Assembly.

Participation in meetings and technical conferences

Technical meetings held in Paris

The participants in the four meetings organized between 17 December 1963 and 2 October 1964 were the following:

Delegations:

France

Head: Professor E. Aujaleu, Director-General of Public Health
 Delegates: Professor L. Bugnard, Director of the National Institute of Hygiene
 Dr Bader, Deputy Director of the National Institute of Hygiene
 Professor P. Denoix, Director of the Gustave Roussy Institute, Villejuif
 Professor J. Driessens, Director of the Oscar Lambert Centre, Lille
 Professor A. Lacassagne, Director of Research Services at the Curie Foundation
 Professor R. Latarjet, Radium Institute, Curie Foundation
 Professor G. Mathé, Director, Institute of Cancer and Immunogenetics, Paul Brousse Hospital, Villejuif

Federal Republic of Germany

Head: Dr Stralau, Director, Federal Ministry of Health
 Delegates: Dr Suller, Regierungsmedizinischer Direktor
 Professor Hakenal, University of Bonn
 Dr Kacar, University of Heidelberg

Italy

Head: Professor G.A. Canaperia, Director-General of Health
 Delegate: Professor P. Bucalossi, National Cancer Institute, Milan

United Kingdom of Great Britain and Northern Ireland

Head: Sir George Godber, Chief Medical Officer, Ministry of Health
 Delegate: Sir Harry Himsworth, General Secretary, Medical Research Council

United States of America

Head: Dr J. Watt, Director, Office of International Health, Public Health Service
 Delegates: B. Hider, Director of Laboratories
 K.M. Endicott, Director, National Cancer Institute
 C. Hutterer, National Institutes of Health

In addition, the following were present:

Technical advisers

Dr M.G. Candau, Director-General of WHO
 Professor A. Haddow, President of UICC
 Dr J.F. Delafresnaye, Secretary-General of UICC

French observers

Ministry of Foreign Affairs:

Mr Leduc, Minister Plenipotentiary
 Mr C. Gérard, Deputy Director

Ministry of Scientific Research:

Mr de Saint-Leger, Director of Cabinet
 Mr R. Toussaint, Technical adviser

Technical meetings held in Lyon

Two series of meetings were held in Lyon between 17 December 1963 and 5 April 1965. The first series, held between 17 December 1963 and 2 September 1964, comprised four meetings, at which the participants were the following:

Chairman: Professor E. Aujaleu

Participants:

World Health Organization:

Dr M.G. Candau
 Dr L. Verhoestraete
 Mr F. Gutteridge

France:

Mr A.J. Villeneuve
 Mr C. Girard
 Mr R. Toussaint

Federal Republic of Germany:

Mr F. Bernhardt
 Mr W. Krause

Italy:

Professor G.A. Canaperia
 Professor P. Bucalossi

Netherlands:

Dr P.L. Stal
 Professor O. Mühlbock
 Dr E.C. Sohns

United Kingdom of Great Britain and Northern Ireland

Sir Harold Himsworth
 Dr L.H. Murray
 Mr G.B. Blaker

United States of America:

Dr W.E. Hewitt
 Dr C.P. Hutterer
 Mr A. Menscher

Secretariat:

Mr J. Trillat
 Dr J.C. Meillon

On 27 July 1964, a meeting organized at the Ministry of Foreign Affairs was attended by the following participants:

- For the Federal Republic of Germany: Mr Henschel
- For the United States of America: Dr Hutterer, Mr Menscher, Mr Grant
- For France: Mr de Chambrun, Mr Villeneuve, Mr Girard
- For Italy: Mr Delarocca
- For the United Kingdom: Mr Farquharson, Mr Melville

A series of meetings was held in Geneva to draft proposals for a set of permanent activities for the new international agency, in four areas: information, epidemiology, pathology, and training of researchers. The participants in each of these meetings are listed below. The resulting documents IARC/2–IARC/5, summarized in Annex 3, were the basis for the discussions by the Scientific Committee that met in Lyon on 30 March–2 April 1965.

1. Meeting on a proposal for a cancer research information centre as part of the International Agency for Research on Cancer

Participants:

Professor M.C. Bessis, National Centre for Blood Transfusion, Paris, France
 Dr H. Huppert, Head, Department of Molecular Biology, Gustave Roussy Institute, Villejuif, France
 Dr E. Pedersen, Director, Cancer Registry of Norway, Oslo, Norway
 Professor R. Swanson, Dean, School of Library Science, University of Chicago, IL, USA
 Mr Seymour Taine, Program Director, Federal Science Information, National Science Foundation, Washington DC, USA
 Mrs M. Wolff-Terroine, Head, Unit of Documentation, Gustave Roussy Institute, Villejuif, France

For WHO:

Dr L. Verhoestraete, Director, Division of Health Protection and Promotion
 Dr H. Torloni and Dr A.J. Tuyns, Cancer Unit
 Dr N. Goodman, Head, Immunology Unit

Secretariat:

Dr S. Btesh, Director, Division of Research Planning and Coordination
 Dr A.V. Caklin, Head, Cancer Unit
 Dr N. Howard Jones, Director, Division of Editorial and Reference Services
 Mr H.A. Izant, Head, Library and Reference Services
 Dr A.V. Menzin, Division of Research Planning and Coordination

2. Meeting on opportunities for epidemiological studies in the International Agency for Research on Cancer

Participants:

Dr W.R.S. Doll, Director, Medical Research Council, Statistical Research Unit, University College Hospital Medical School, London, United Kingdom

Dr J. Higginson, Associate Professor, Department of Pathology and Oncology, University of Kansas Medical Center, Kansas City, MO, USA

Dr D. Schwartz, Unit of Statistical Research, Gustave Roussy Institute, Villejuif, France

3. Meeting on opportunities for study on pathology in the International Agency for Research on Cancer

Participants:

Dr J. Blumberg, Director, Armed Forces Institute of Pathology, Washington DC, USA

Professor E. Letterer, Institute of Pathology, Tübingen, Federal Republic of Germany

Professor L. Severi, Director, Cancer Department, Perugia, Italy (unable to attend)

4. Meeting on training of researchers

This meeting did not take place, but a document prepared by the WHO secretariat was circulated, of which the authors were not listed.

Meeting of the Scientific Committee (Lyon, 30 March–2 April 1965)

Members of the Scientific Committee:

Professor P. Bucalossi, Director, National Cancer Institute, Milan, Italy

Dr W.R.S. Doll, Head, Medical Research Council Statistical Research Unit, London, United Kingdom

Dr K.M. Endicott, Director, National Cancer Institute, Bethesda, MD, USA

Professor H. Hamperl, Director, Institute of Morbid Anatomy, University of Bonn, Federal Republic of Germany

Professor G. Klein, Head, Tumour Biology Service, Karolinska Institute, Stockholm, Sweden

Professor Hanna Kolodziejska, Director, Institute of Oncology, Cracow, Poland

Professor G. Mathé, Director, Institute of Cancerology and Immunogenetics, Paul Brousse Hospital, Villejuif, France

Professor D. Metcalf, Department of Cancer Research, Walter and Eliza Hall Institute of Medical Research, Melbourne, Australia

Professor O. Mühlbock, Netherlands Cancer Institute, Amsterdam, Netherlands

Professor L.M. Shabad, Director, Institute of Experimental and Clinical Oncology, Moscow, USSR

Dr R.M. Taylor, National Cancer Institute of Canada, Toronto, Canada

Dr T. Yoshida, Medical Institute of the Sasaki Foundation, Tokyo, Japan

Representative of the sponsoring governments: Professor E. Aujaleu

WHO: Dr M.G. Candau, Director-General

Period from May 1965 to April 1967

Five documents were available to us relating to this period of the installation of IARC:

- (a) A WHO document (GC/1/1) dated 1 September 1965, listing the topics for the first Governing Council meeting in Lyon (23–24 September 1965) and the participants
- (b) A document announcing the appointment of the first Director of IARC, chosen by the Governing Council and appointed by the Director-General of WHO
- (c) A document concerning the activities of the Agency prepared for the third session of the Governing Council (27–28 April 1967), as the “Director’s Annual Report for 1966”, also presented to the second session of the Scientific Council held on 8–10 February 1967 (document GC/3/3)
- (d) A document presented as an addendum to the Director’s Annual Report for 1966 (document GC/3/3 Add. 1)
- (e) A provisional report of the Director for 1967.

This section ends with a note on the premises in which IARC operated while awaiting the construction of the building provided for it by the French authorities, the City of Lyon and the *Département* of the Rhône, which was opened on 9 June 1972 by the President of the French Republic, Georges Pompidou.

Inauguration of the International Agency for Research on Cancer (15 September 1965)

WHO announced on 20 September 1965 that IARC had taken up its functions on 15 September 1965, the five Governments that had initiated the plan for the Agency (of France, the Federal Republic of Germany, Italy, the United Kingdom of Great Britain and Northern Ireland, and the United States of America) having, on that date, formally accepted its statute, with the following aim:

“The objective of the International Agency for Research on Cancer shall be to promote international collaboration in cancer research. The Agency shall serve as a means through which Participating States and the World Health Organization, in liaison with the International Union Against Cancer and other interested international organizations, may cooperate in the stimulation and support of all phases of research related to the problem of cancer.”

Meeting of the Governing Council (23–24 September 1965)

Representatives:

Australia:

Dr V.D. Refshauge
Miss J.H. Barnett

France:

Dr E. Aujaleu, Chairman
Dr G.M. Villat
Mr J.C. Meillon
Mr J. Foessel
Mr J. Trillat

Federal Republic of Germany:

Dr J. Stralau
Dr W. Krause

Italy:

Professor G.A. Canaperia, Vice-Chairman

Union of Soviet Socialist Republics:

Professor L.M. Shabad

United Kingdom of Great Britain and Northern Ireland:

Sir Harold Himsworth

Mr G.B. Blaker

United States of America:

Dr K. Endicott

Dr E. Freschtling

Dr C. Hutterer

WHO:

Dr M.G. Candau, Director-General

The main subjects covered were the following:

Rules of procedure

Location of IARC

Director of IARC. Setting up of services and appointment of the Director

Admission of new Participating States

Programme of work

Proposals for the membership of the Scientific Council

Administration and finance

Programme and budget

Resolution for funding in 1965

Location of IARC

WHO announced on 24 September 1965 that the Governing Council had chosen Lyon for the location of IARC.

Meeting of the Scientific Council

This meeting took place on 25 September 1965. The Council comprised 12 scientists from 12 countries:

Chairman: Professor E. Aujaleu (France).

Members:

Dr I. Berenblum, Head of the Department of Experimental Biology, Weizmann Institute, Rehovot, Israel

Professor N.N. Blokhin, President of the Academy of Medical Sciences and Director of the Institute of Experimental and Clinical Oncology, Moscow, USSR

Professor P. Bucalossi, Director, National Cancer Institute, Milan, Italy

Dr W.R.S. Doll, Director, Medical Research Council Statistical Research Unit, London, United Kingdom

Professor H. Hamperl, Director, Institute of Pathology, University of Bonn, Federal Republic of Germany

Professor B. Kellner, Head, Oncopathological Research Institute, Budapest, Hungary

Professor G. Klein, Head, Institute for Tumour Biology, Karolinska Institute, Stockholm, Sweden

Professor A. Lilienfeld, Director, Department of Chronic Diseases, Johns Hopkins School of Hygiene and Public Health, Baltimore, MD, United States of America

Professor G. Mathé, Director, Institute of Cancer and Immunogenetics, Paul Brousse Hospital, Villejuif, France

Dr D. Metcalf, Director, Cancer Research Laboratory, Walter and Eliza Hall Institute of Medical Research, Melbourne, Australia

Professor O. Mühlbock, Professor of Oncology, Netherlands Cancer Institute, Amsterdam, Netherlands

Professor P.N. Wahi, Professor of Pathology, SN Medical College, University of Agra, India

Appointment of the Director of IARC

On 25 July 1966, Dr Candau, Director-General of WHO, announced that the first Director of IARC had been selected by the Governing Council of the Agency and appointed by him. This was to be Professor John Higginson.

Born in Belfast, Northern Ireland, on 16 October 1922, John Higginson was educated at the Royal Belfast Academical Institution and at Trinity College, Dublin, where he obtained a Ph.D. in biology in 1946 and a doctorate in medicine. From 1947 to 1949, Dr Higginson worked in the Department of Pathology and Bacteriology at the University of Glasgow, and from 1950 to 1958 at the South African Institute for Medical Research in Johannesburg, where he headed the Geographical Pathology Unit and Cancer Registry. His studies focused specifically on the role of environmental factors in the development of cancer and cardiovascular disease.

In 1958, Professor Higginson was appointed assistant professor of pathology at the University of Kansas Medical Center, where, in 1961, the American Cancer Society created a chair of geographical pathology of cancer, to which he was appointed.

Professor Higginson was a member of the Royal College of Physicians of London, as well as of numerous scientific societies, and served on committees of the National Academy of Sciences and the National Institutes of Health in the United States of America, as well as the International Union Against Cancer.

He was the author of numerous scientific papers, mostly on the geographical distribution of cancer, including cancer of the liver and gastrointestinal tract.

Professor Higginson took up his duties on 1 July 1966.

Director's Annual Report for 1966

This progress report was submitted to the second session of the Scientific Council (8–10 February 1967) and the third session of the Governing Council (27–28 April 1967) (document GC/3/3).

The Director took up his duties on 1 July 1966. It had been decided that it was preferable for IARC to use temporary office space in WHO headquarters in Geneva, and the official date for installation in Lyon was fixed as 1 January 1967.

The Director first drew attention to the need to acquire first-class staff. IARC's programme was to concentrate on the areas of epidemiology and environmental carcinogenesis. He noted that, while applications from first-class candidates for positions

relating to environmental carcinogenesis had been received, good applicants with previous experience in cancer epidemiology were more limited in number. Because of high current demand for people with epidemiological and biostatistical training, he was afraid that there might be problems in finding entirely suitable personnel.

1. Programme on Epidemiology and Biostatistics

Cancer registration: Discussions had been held with the directors of several cancer registries in Western Europe and North America, and close contact had been made with the Committee on Cancer Incidence of the International Union Against Cancer (UICC). The Director had become aware of the need to move cautiously when discussing collaboration between established cancer registries in order to avoid giving the impression that the Agency wished to utilize material without giving anything in exchange.

Further, where the Agency was not offering financial support to a registry, liaison and collaboration might depend on relationships between individuals and their wish to promote such collaboration.

These considerations explained the deferral until 1968 of a meeting of heads of established cancer registries, while awaiting the filling of the post of epidemiologist.

Associate regional centres: Such centres set up in selected sites around the world would represent a base in which integrated epidemiological and environmental studies could be developed. Suggested sites being investigated were: Nairobi, Kenya; Dakar, Senegal; Kingston, Jamaica; Singapore; Lima, Peru. The Singapore site was expected to be established early in 1967.

East African Survey: This would provide support to the survey of cancer patterns in East African hospitals currently being carried out by Dr D. Burkitt; it was hoped to coordinate studies by Drs Burkitt, O'Connor, and Linsell.

Epidemiology of spontaneous cancers in animals: Discussions were in progress with experts in veterinary pathology.

Cancer genetics: This programme was in abeyance pending appointment of the head of the programme of cancer epidemiology.

Immigrant studies: It was planned to support a study on immigrant populations in Australia and integrate these studies with those undertaken by Dr L. Pedersen of Norway, Dr W. Haenszel of the United States of America, and Dr M. Segi of Japan. IARC would support the work of Dr McCall, who was to participate in a meeting with a group studying immigrant populations in Honolulu in April 1967.

2. Programme of Environmental Pathobiology

This term was used to cover those aspects of the programme involving investigations that required collaboration between epidemiology and other disciplines in environmental carcinogenesis. Studies were divided into three groups.

Programme I comprised research on:

Liver cancer and aflatoxin

Classification of cirrhosis in relation to liver cancer

Serological studies in liver cancer

Morphological and immunological reactivity studies of the reticuloendothelial system in children
 Classification of reticuloendothelial neoplasms
 The role of the reticuloendothelial system in the general incidence of cancer

Programme II comprised:

Metabolic and biochemical epidemiology with special reference to tumour–host relationships

Programme III comprised:

Exploration of all aspects of environmental biology in the widest sense
 Studies of asbestos and cancer, bringing together work in Cyprus, Finland, the United Kingdom, and the USSR
 Studies of oesophageal cancer
 Tumour transplantation registry (providing support to Dr Klein (Stockholm) if WHO were no longer able to continue funding)

3. Education and Fellowships Programme

This programme was launched in August 1966, when advertisements for the Research Training and Travel Fellowships were sent to 10 medical and scientific journals published in the participating states.

On 8 September 1966, a meeting was held with WHO staff and representatives of the International Union Against Cancer (who were responsible for administering the Eleanor Roosevelt Cancer Fellowships). The intention was to draw on the wide experience of both WHO and UICC in this field. Leaflets were distributed during the Ninth International Cancer Congress in Tokyo.

A Fellowship Selection Committee had been set up comprising eminent cancer research scientists representing the opinions of the scientific community: Dr G. Della Porta (Italy), Professor P. Denoix (France), Dr W.U. Gardner (United States of America), representing UICC, Dr N.P. Napalkov (USSR), and Professor L. Sachs (Israel). A first meeting held on 8 December 1966 had awarded 24 training fellowships and 17 travel fellowships. The 41 fellows came from 19 countries and proposed to visit 17 different countries.

Addendum to the Director's Annual Report for 1966 (Doc. GC/3/3 Add. 1, 27–28 April 1967)

1. Accommodation

The Host Agreement between WHO and the French Government was signed in Paris on 14 March 1967. Temporary accommodation had been made available for IARC by the Mayor of Lyon, Mr Louis Pradel. It was located at 16 Avenue Maréchal Foch. Removal of the Agency's equipment from Geneva was in progress. 22 May 1967 had been fixed as the opening date.

Preliminary negotiations had been initiated with regard to a new building for the Agency. The French authorities had generously proposed plans for a building that would provide the Agency with a surface area of approximately 10 000 m², excluding conference rooms and parking. A building committee had been formed to review the plans in detail.

2. Programme on Epidemiology and Biostatistics

2.1 Staff – Dr C.S. Muir had been appointed Acting Head of this Division and would be joined by Dr A.J. Tuyns, Medical Officer in the Cancer Unit of WHO. The transfer of Dr

J. Kmet, currently attached to a WHO project on oral and pharyngeal cancer in the USSR and India, was under discussion.

- 2.2 *Cancer registration* – Discussions had been held with WHO regarding the collection of cancer data from established cancer registries, in particular with Dr W.P.D. Logan, Director of the Division of Health Statistics, and with Dr H. Grais, of the same division.
- 2.3 *Survey of gastrointestinal cancer* – The programme would be limited to carcinoma of the oesophagus, with later extension to other portions of the alimentary tract. Negotiations were proceeding to establish an integrated programme involving the regional centres and other collaborative centres in the USSR, Latin America, and Asia (Dr C.S. Muir and Dr A.J. Tuyns).
- 2.4 *Epidemiology of spontaneous tumours in animals* – The feasibility of epidemiological studies in this field was to be assessed by Dr L. Loomis of the University of Sydney, Australia.
- 2.5 *Migrant studies* – A contract had been set up with the Medical School of the University of Western Australia to pursue a study on cancer patterns in immigrant populations in Australia.
- 2.6 *Industrialization and chronic toxicity in relation to human cancer patterns* – Preliminary studies were being conducted.
- 2.7 *Other epidemiological programmes* – A study of cancer of the uterus was under review.

3. *Programme on Environmental Pathobiology I*

Dr G. O'Connor had been appointed Head of this Division in August 1966.

- 3.1 *Serological studies on liver cancer* – The aim was to apply in the field an immunological test developed by Professor I. Abelev (Gamaleya Institute, Moscow, USSR) for the diagnosis of hepatocellular carcinoma, based on the presence of a fetal antigen within malignant liver tissue. This work would be conducted in collaboration with Professor P. Grabar and Dr J. Uriel of the Institute for Scientific Research on Cancer, Villejuif, France.
- 3.2 *Aflatoxins* – The aim was to investigate the distribution of aflatoxins in regions of high and low liver cancer incidence. Projects were envisaged in Nairobi (Kenya), Singapore, Jamaica, and Brazil.
- 3.3 *The role of the reticuloendothelial system in the general incidence of cancer* – A programme was being examined under the responsibility of Dr Isliker (Lausanne, Switzerland). This would involve a comparative study in a parasitized and a non-parasitized community.

4. *Programme on Environmental Pathobiology II*

A suitable person to develop this programme was being sought.

5. *Programme on Environmental Pathobiology III*

- 5.1 *Staff* – This division had been divided into two sections: one section studying the biological aspects of environmental carcinogenesis would be led by Dr G. Blaudin de Thé, while the second, on chemical aspects of environmental carcinogenesis, would remain under the Director until the arrival of Dr V.S. Turusov (USSR), who had experience in the field of chronic toxicity and carcinogenesis.
- 5.2 *Identification of carcinogenic metabolites* – A contract had been signed with the Weizmann Institute in Israel to develop a pilot study.
- 5.3 *Relationship between asbestos and cancer* – A contract had been set up for a study in Cyprus, Finland, Ireland, and the United Kingdom.

6. Regional Centres

There were two possible arrangements for such centres: the installation of collaborating centres within existing institutions, or the establishment of new centres by IARC, which would certainly be more costly.

Regional centres had been established in Nairobi and Singapore. Dr C.A. Linsell, formerly of the WHO Cancer Unit, had taken up the position of Head of the Regional Centre in Nairobi and was reviewing potentialities for studies on the epidemiology of cancer in Kenya and East Africa.

The Regional Centre in Singapore would investigate etiological factors in nasopharyngeal carcinoma, which was very frequent in that area.

Dr G. O'Connor had visited West Africa in order to review the organization of collaborating and regional centres in that area, with special reference to the aflatoxin programme.

7. Other Projects

A contract had been signed with the former WHO Tumour Transplantation Reference Centre in Stockholm, which would continue its operations under the auspices of IARC.

8. Fellowships Programme

Since the Fellowships Selection Committee completed its work in December 1966, nine applications for research training fellowships and 29 applications for travel fellowships had been received.

The head of this programme was Dr W. Davis, and a technical assistant, Mrs Rubin, had been appointed.

9. Library

A small library committee had been formed. Mrs P. de Tonnac, formerly of the European Regional Office of WHO, had been appointed librarian.

Director's Interim Report for 1967

This report covered activities of IARC up to 31 July 1967. The Agency began its operations in Lyon on 22 May 1967.

Organization

The organizational structure was depicted in an organization chart that showed:

Six research units:

- Epidemiology
- Biostatistics
- Analytical Environmental Carcinogenesis
- Biological Carcinogenesis
- Chemical Carcinogenesis
- Environmental Pathobiology

A programme for education and fellowships

An administration and finance service.

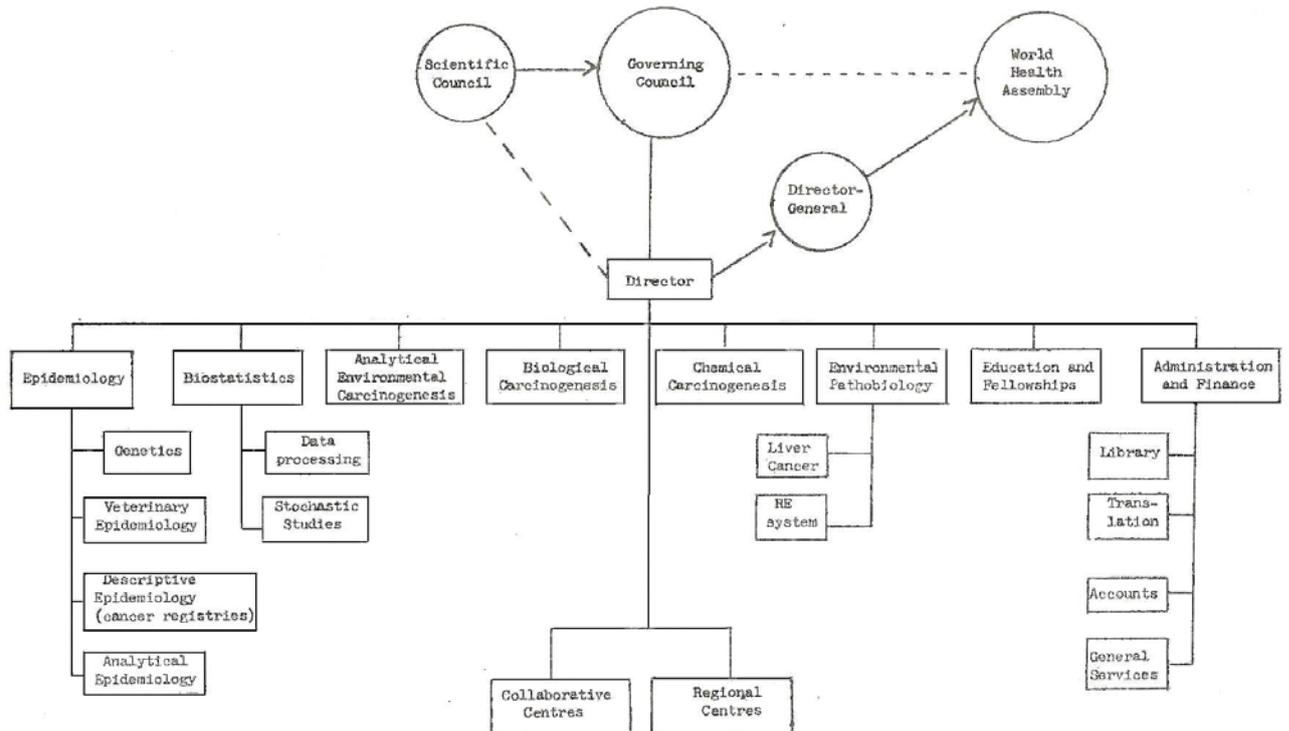
1. Epidemiology Unit

Morbidity statistics

Close collaboration was being maintained with the WHO Division for Health Statistics and the Committee on Cancer Incidence of UICC.

Relations had been established with cancer registries, and contact had been set up with a proposed new association of cancer registries. IARC was supporting the cancer registries of Nairobi and Singapore.

STRUCTURE OF THE INTERNATIONAL AGENCY FOR RESEARCH ON CANCER



Ratio studies

These were being set up in three locations:

- In Thailand (Chiang Mai), where a high frequency of hypopharyngeal cancer might be related to an unusual type of home-made cigar;
- In Afghanistan (Kabul), where nasopharyngeal angiofibroma might be related to the habit of chewing a mixture of lime and tobacco;
- In Peru (Lima), where there were differences in cancer patterns between the dwellers of the coastal plains and of the Sierra of the Andes, in particular for leukaemia, reported to be virtually absent among the mountain dwellers.

Migrant studies

These were being set up to study three sets of migrants:

- In Australia, on mortality among migrants according to birthplace and place of residence and according to birthplace, age, and duration of residence;
- In Singapore, on cancer morbidity among China-born and Singapore-born Chinese;
- Among Hawaiian Japanese, on gastric cancer among Japanese immigrants, compared with Japanese in Japan.

Studies on etiological factors in gastrointestinal cancer

These were directed mainly towards oesophageal cancer, with work being initiated in the Caribbean area and in Iran.

Veterinary epidemiology

A consultant was preparing a project.

2. *Biostatistics Unit*

Dr Trevor Williams had been selected as head of the Unit to develop applied statistical studies, as well as investigating theoretical applications of biomathematics to carcinogenesis. This research would be conducted in liaison with the WHO Division of Research in Epidemiology and Communications Science.

3. *Analytical Environmental Carcinogenesis Unit*

The head of this unit had not yet been appointed. It was anticipated that he would work in close collaboration with the Units of Epidemiology and of Chemical Carcinogenesis.

Contracts had been drawn up for a study of the role of asbestos in cancer incidence, and for the exploration of possibilities of analysing tissues and body excretions as indicators of exposure to carcinogenic agents.

4. *Biological Carcinogenesis Unit*

Dr Blaudin de Thé would work in close liaison with the Unit of Epidemiology, particularly for studies of the role of viral factors as carcinogens or co-carcinogens in humans and in domestic animals.

5. *Chemical Carcinogenesis Unit*

Dr L. Tomatis was to take up the post of head of this unit on 1 November 1967. It was expected that the unit would work in close contact with the Units of Epidemiology and of Analytical Environmental Carcinogenesis.

6. *Environmental Pathobiology Unit*

Studies of liver cancer

Studies of the natural carcinogens (aflatoxin) had been initiated:

(a) In the Regional Centre in Nairobi (Kenya), a pilot study on 400 000 inhabitants was in progress, with the help of Dr F.G. Peers, a specialist in aflatoxin analysis. Procedures for sampling and extraction of aflatoxin in local diets were being set up in collaboration with Dr Linsell.

(b) In other regions such as Singapore, Jamaica, and West Africa, similar studies were being planned.

(c) Also in Nairobi, the effects of acute or chronic feeding of aflatoxin to baboons were to be studied in a facility constructed by the Wellcome Foundation.

Studies on the detection of liver cancer by a serological test would be conducted in the Laboratory of Protein Chemistry at Villejuif, using serum samples sent from Nairobi, Singapore, Dakar, Kampala, and Ibadan.

Studies of the reticuloendothelial system

Studies had been designed to explore the role of immunological stimulation on the pattern and incidence of neoplasia. These would be carried out:

(a) in Lausanne (Biochemical Institute), on spontaneous tumours in mice;

(b) in Lyon, where laboratory space had been rented, to measure various immunological parameters in mice with chronic malaria, as well as the effect of this disease on spontaneous and induced neoplasia;

(c) in Kingston, Kinshasa, and Nairobi, in collaboration with WHO, to measure levels of immunoglobulins in certain populations.

Comparative studies on lymphomas

An international meeting of experts was planned, in collaboration with WHO, to unify the nomenclature of tumours of the haematopoietic system. Dr O'Connor would participate in a meeting in Japan on malignant lymphomas.

Nairobi Regional Centre

An office had been installed in the Government's Medical Research Laboratory, near to the main hospital and the location of the future medical school.

Liaison had been established with major medical centres in eastern and central Africa and with the Medical Research Council of the United Kingdom.

A cancer registry had been re-established with funding from IARC. The Zambian and Malawian governments had responded favourably to the initiative of the Agency at the Cancer Conference in Nairobi. Drs Burkitt and Linsell would set up agreements with the local authorities for a combined cancer registry.

Data for a population of 400 000 had been examined with the WHO Epidemiological Team for Africa, and cancer registration was considered feasible with IARC help. Material from 600 cases of cancer in African children would be examined by Professor J.N.P. Davies (Albany Medical School, NY, United States of America), thanks to the cooperation of the Director of Laboratory Services of Kenya.

Fellowships Programme

Details regarding this programme were presented in document SC/3/3.

Library

In the preceding six months, 250 monographs had been ordered and received, and subscriptions placed for 113 periodical and annual publications.

Contact had been established with the Lyon University library in the Faculty of Medicine and Pharmacy, which would permit lending to IARC professional staff.

The Library had received a gift of a complete set of the *Journal of the National Cancer Institute* since 1940 as well as a complete series of the *National Cancer Institute Monographs*.

Administration

There had been difficulties due to the illness of the head of this service. In addition, the accommodation was limited and unsuitable.

Laboratory space had kindly been made available to IARC in the premises of the *Institut national de la santé et de la recherche médicale* (INSERM) by Professor R. Sohier, scientific director of the INSERM Virology Unit, and Professor M. Dargent, director of the Léon Bérard Centre, the Lyon cancer hospital.

Staff

	<i>Date of recruitment</i>
Director	
Professor J. Higginson	1 July 1967

Epidemiology Unit	
Dr C.S. Muir (Head)	1 January 1967
Dr A. Tuyns	1 June 1967
Dr J. Kmet	1 January 1968
Biostatistics Unit	
Dr T. Williams (Head)	1 September 1967
Analytical Environmental Carcinogenesis Unit (Head)	Not appointed
Biological Carcinogenesis Unit	
Dr G. Blaudin de Thé (Head)	1 May 1967
Chemical Carcinogenesis Unit	
Dr L. Tomatis (Head)	1 November 1967
Dr V.S. Turusov	5 July 1967
Environmental Pathobiology Unit	
Dr G. O'Connor (Head)	1 August 1966
Dr P. Sizaret	1 September 1967
Mrs R. Lunt	1 September 1967
Regional Centres	
Nairobi – Dr C.A. Linsell (Director)	1 January 1967
Fellowships Programme	
Dr W. Davis (Head)	1 October 1966
Mrs S. Rubin	1 April 1967
Library	
Mrs P. de Tonnac	1 March 1967
Administration	
Mr J.M. Genevière	15 August 1966

Recruitment to fill the remaining positions had begun. There had been difficulties in recruiting and accommodating foreign secretarial staff in Lyon.

Buildings and equipment of IARC

Professor Higginson was anxious to have laboratories constructed and equipped within the permanent premises of IARC. He had to overcome resistance shown by the United Kingdom and the United States of America, as well as some financial reservations on the part of France. However, Professor Higginson was convinced that scientists, particularly biologists, who came to IARC from a wide range of countries would need to be able to pursue their research in laboratories and that epidemiological studies must, in order to yield as much information as possible, include biochemical, immunological, and molecular biological aspects.

Period from June 1967 to June 1972

The activities of IARC during this period are fully described in its Annual Reports, of which the first was published for 1968.

The work of the Agency throughout this transitional period was carried out in temporary accommodation. The administration was located mostly in a large building on Avenue Maréchal Foch, which had been made available by the City of Lyon, but also had other offices elsewhere in Lyon. Meetings were able to be held in the offices or meeting rooms of the Town Hall of Lyon.

Laboratory studies were conducted in the INSERM Unit that had recently been set up by the Place du Professeur Renaut. Laboratories assigned to INSERM and others assigned to the Léon Bérard Centre were put at the disposal of IARC on a contractual basis, respectively by Professor R. Sohier, scientific director of the INSERM Virology Unit, and Professor M. Dargent, director of the Léon Bérard Centre.

In addition, some prefabricated buildings were erected on land allocated to IARC by the City, not far from where the new building for the Agency was to be situated.

Responsibility for the construction of the building for IARC was taken jointly by the French Government, the Rhône *Département*, and the City of Lyon. The foundation stone was officially laid by Mr Maurice Couve de Murville, Prime Minister of France, on 23 March 1969, in the presence of Dr R.J.H. Kruisinger (Netherlands), Dr M.G. Candau (WHO), Mr Max Moulins (Prefect of the Rhône *Département*), Mr B. Carteron (President of the General Council (*conseil général*) of the Rhône *Département*), and Mr Louis Pradel (Mayor of Lyon).

During the period from 1968 to 1972, the year of the inauguration of the IARC building, the Participating States were the following:

- 1968: Nine States: Australia, France, Federal Republic of Germany, Israel, Italy, Netherlands, Union of Soviet Socialist Republics, United Kingdom, United States of America
- 1969: Nine States
- 1970: Ten States: Belgium became a Participating State
- 1971: Nine States: Israel withdrew its participation (the stated reason was financial, but it may be noted that relations between President de Gaulle and Israel had been strained for some years)
- 1972: Ten States: Japan became a Participating State.

The new IARC building was opened on 9 May 1972 by the French President, Mr Georges Pompidou. It was fully air-conditioned and had a usable surface area of 7000 m². It contained an auditorium, conference rooms, a library, offices, and a staff cafeteria. Initially, the laboratories occupied 2000 m² and the offices 2000 m².

The building was fitted out with financing from the Governing Council Special Fund. In addition, the United States of America and the United Kingdom generously provided technical equipment, while Australia and the Netherlands donated the furnishings for the Delegates' Lounge and the cafeteria.

Thus, IARC had gained its autonomy.

By June 1973, the staff amounted to a total of 129 persons, among whom were 26 scientists, 48 technicians, and 55 members of the administrative services, secretariat, and support staff. The 10 Participating States were then: Australia, Belgium, France, the Federal Republic of Germany, Italy, Japan, Netherlands, the Union of Soviet Socialist Republics, United Kingdom, and the United States of America.

ANNEXES

Annex 1. First Steps

On 9 November 1963, President de Gaulle addressed the following letter to Mr Louis Armand, the first named in the list of the 13 co-signatories of the letter he had received:

“Dear Sir,

The idea of promoting research into cancer by setting up an international institution is a noble one, and I consider it desirable that France should take an interest in it.

In my opinion, it is indeed consistent with its traditions that France should commit itself to a task that involves the three principles of international cooperation, human progress, and the advancement of science.

Hence, I have asked the Minister of Public Health to take all necessary steps in this matter.

I should be grateful if you would announce this to all the gentlemen who joined you in signing the letter addressed to me.

Yours sincerely

C. de Gaulle”

De Gaulle asked his Minister of Health, Mr Raymond Marcellin, to take immediate action. On 11 November 1963, Mr Marcellin duly telephoned Dr M.G. Candau, Director-General of WHO, to ask his advice, and initiated contacts with the governments of the Federal Republic of Germany, Italy, the United Kingdom, the United States of America, and the USSR. Shortly afterwards, he met Dr Candau in Paris.

It may be noted that a Committee of Experts on Cancer Prevention, set up a long time before by WHO, was to meet on 19 November 1963, chaired by Dr W.R.S. Doll.

Annex 2. Conferences Organized by WHO in Paris

Four technical conferences were held in Paris.

The first (17–18 December 1963) examined proposals for establishing an institute, and discussed its budget, its councils, and its administration.

The second (27–28 February 1964) established the principle of a close relationship with WHO. Documents available relating to this meeting were:

- (a) a draft convention for the establishment of the International Cancer Research Institute, comprising 21 articles [original available only in French];
- (b) a draft Statute prepared by the experts at the meeting, comprising 13 articles [original available only in French];
- (c) conclusions of the meeting [original available only in French];
- (d) a memorandum by the French Government, with an appendix;
- (e) an estimate of the defence budgets of the six founding states.

The third conference (27 July 1964) studied the relationship of the international centre with WHO, the financing of the project, and the building to be provided.

The fourth conference (29 September–2 October 1964) looked again at the relationship of the international centre with WHO.

First Technical Conference (17–18 December 1963)

The participants at this conference were:

Dr M.G. Candau, Director-General of WHO

Professor Alexander Haddow, President of the International Union Against Cancer (UICC)

Representatives of five of the six countries envisaged by Mr Marcellin at his meeting with Dr Candau on 13 November 1963: France, Federal Republic of Germany, Italy, the United Kingdom, and the United States of America

Proposals concerning the creation of an “institute”, its budget, its governing council, and its scientific council were examined, and it was agreed that it would be administered by WHO.

After this technical conference, Mr Marcellin gave a press conference on 20 December 1963, at which he announced that the USSR had been invited to participate in the next conference.

Second Technical Conference (27–28 February 1964)

This meeting endorsed the principle that the new organization would be closely attached to WHO, although it would have its own Governing Council, in which WHO would have a vote. It would also have a Scientific Council composed of eminent scientists proposed by the Director-General of WHO. A draft convention was proposed:

“Draft convention concerning the creation of the International Cancer Research Institute

The President of the Federal Republic of Germany, the President of the United States of America, the President of the French Republic, the President of the Italian Republic, Her Majesty the Queen of the United Kingdom of Great-Britain and Northern Ireland,

Considering that cancer is one of the greatest scourges of humanity and wishing to unite in their struggle to overcome it,

Considering that the means already devoted to fighting this disease would be more efficiently used by setting up an organized international collaboration and that it would be appropriate to establish an autonomous body for this purpose,

Considering that the World Health Organization has the mission of directing and coordinating work with an international character in the domain of health, is already actively engaged in the struggle against cancer, and thus is ideally suited to be closely associated with the activities of such a body and to contribute to its operation,

Desirous that a productive collaboration should be established with those international organizations directly or indirectly interested in the fight against cancer, notably with the United Nations Educational, Scientific and Cultural Organization,

Deeming it appropriate to call for the assistance of the International Union Against Cancer,

Have agreed as follows:

Article 1 – The High Contracting Parties decide to found and commit themselves to maintain at their common expense, an international cancer institute which shall have its headquarters at ...

Article 2 – The Government of ... will make the necessary dispositions to make available to the Institute land and possibly buildings for the headquarters of the Institute according to conditions to be agreed later.

Article 3 – 1. The mission of the Institute is to study the cancer problem and to promote and coordinate research in this area with the aim of hastening the discovery of measures to combat this disease.

2. In order to achieve this objective, the Institute may have recourse to the services of existing institutes, establishments, or laboratories, appeal for the cooperation of specialized research workers, and, if necessary, set up suitable training to respond to new or specialized research needs.

Article 4 – The basic programme of the Institute shall consist of:

1. The establishment of a centre for information and documentation responsible for the collection, classification, analysis, and dissemination of all scientific information on cancer, and in particular information of a statistical and epidemiological nature.

For this purpose, the centre shall make accessible, by all means scientific and technical, information relating to cancer, subject to third-party rights; facilitate exchange of information between Member States as well as between all researchers or any research establishment which places a request; it shall make use of the most advanced technical means and work towards improving methods for transmitting information at the international level.

2. The compilation of an international nomenclature and of a histopathological and clinical classification of human tumours, particularly by making use of the reference centres and of the works of the International Union Against Cancer and the World Health Organization.

3. The encouragement and coordination of epidemiological and etiological studies, studies in geographical pathology, and studies in comparative oncology to be conducted in various regions of the world.

4. The training of research workers in the various branches of oncological research: morbid anatomy, epidemiology, statistics, clinical oncology, and basic research.

5. Assistance to national research, by means of:

- a) the granting of facilities to research workers for the use of laboratories and equipment belonging to the Institute.
- b) the granting of credits to research workers and national laboratories.
- c) the supply to national laboratories of additional equipment or apparatus to enable them either to develop their own activities or to deal with special tasks that the Institute may have entrusted to them.

Article 5 – Any supplementary programme of the Institute must be submitted to the Council mentioned in article 7 below and approved by this body by a two-thirds majority of the Member States of the Institute.

Within the framework of its basic programme and any supplementary programme, the Institute shall collaborate so far as possible with the services and institutions of the Member States or those situated in their territories. As far as is compatible with the aims and the activities of the Institute, the latter should make every effort to avoid duplication of programmes already pursued by the said national services or institutions.

Article 6 – The Institute shall operate under the exclusive direction and supervision of a Governing Council assisted by a Scientific Committee.

Article 7 – Subject to the provisions of article 10:

1. The Council shall be composed of delegates from the Member States. Each Member State shall be represented by one delegate and have one vote. The delegates may be accompanied to the meetings of the Council by experts.

2. Subject to the provisions of the present Convention, the Council shall:

- a) determine the programme of activities of the Institute and decide upon any supplementary programme of activity;
- b) adopt the budget and lay down the financial arrangements of the Institute in accordance with the financial protocol annexed to the present Convention;
- c) review expenditure and approve and publish the annual accounts of the Institute;
- d) select staff to carry out the tasks assigned to the Institute and establish the staff regulations.
- e) appoint the members of the Scientific Committee.

3. The Council shall meet at least once each year.

4. Unless otherwise specified in the present Convention, the decisions of the Council shall be taken by a simple majority of the Member States.

5. The Council shall establish its own rules of procedure. It shall elect a Chairman whose term of office shall be ... years.

Article 8 – The Council shall appoint a Director for a fixed period by a two-thirds majority of the Member States and may terminate his duties by the same majority.

The Director shall represent the Institute in all civil affairs. For the financial administration of the Institute, he shall comply with the provisions of the financial protocol annexed to the present Convention. Subject to the provisions of article 7(2d), he shall select

the staff of the Institute. He shall submit an annual report to the Council and participate, without the right to vote, in all its meetings.

Article 9 – The Scientific Committee shall be composed of experts specialized in oncology, elected by a two-thirds majority by the Council following proposals by its members. It shall act in a consultative capacity.

It shall choose its Chairman and establish its rules of procedure. (The Scientific Committee shall meet at least ... times each year when convened by its Chairman.)

Article 10 – 1. The Institute shall cooperate in a permanent manner with the World Health Organization, hereinafter referred to as “the Organization”. This cooperation shall be exercised according to conditions determined by common agreement with the Organization.

2. The Organization shall be represented in the Council by a delegate, who shall have one vote.

3. The Director of the Institute shall have responsibility for the liaison between the Institute and the Organization.

Article 11 – The Institute shall maintain close contact with the United Nations Educational, Scientific and Cultural Organization, which shall be represented on the Council by a delegate in a consultative capacity.

The Director shall have responsibility for the liaison between the Institute and the United Nations Educational, Scientific and Cultural Organization.

Article 12 – The Institute shall cooperate with the International Union Against Cancer, hereinafter referred to as “the Union”, which shall be represented on the Council by a delegate in a consultative capacity.

Article 13 – The Institute may, subject to a decision by the Council taken by a two-thirds majority of its members, cooperate with other international or national organizations.

Article 14 – Each Member State shall contribute to the expenses of the Institute according to an assessment established by the Council in relation to the annual budget, on a scale defined by the financial protocol annexed to the present Convention. This scale may be modified by a unanimous decision of the Council.

No Member State shall be liable to pay a contribution to the basic programme exceeding 25% of the total contributions fixed by the Council to cover the costs of this programme.

The Institute may receive donations or legacies from individuals or legal entities, of which the allocation shall be consistent with the mission assigned to the Institute by the present Convention.

Article 15 – Should the Institute be called upon to undertake within the territory of a State work that falls within the general scope of the activities of the Institute but benefiting essentially that State, the funding of such work shall be determined by an agreement between the Institute and the said State.

Article 16 – The Member States shall recognize the personality and legal capacity of the Institute.

The Institute, the representatives of the Member States, the members of the bodies set up by virtue of articles 4 and 5, the Director, and the members of staff of the Institute shall enjoy on the territory of the Member States [and within the framework of agreements to be

entered into by the Institute with each Member State concerned, such privileges and immunities as are deemed necessary for the free exercise of the functions of the Institute] or [those privileges, exemptions and immunities defined in additional protocol no. 2 to the present Convention].

Article 17 – Any dispute relating to the application or interpretation of the present Convention shall be resolved through diplomatic channels.

Article 18 – 1. The Council may recommend to the Member States amendments to the present Convention and to the annexed financial protocol. Any Member State wishing to propose an amendment shall so notify the Director. The latter shall communicate such notified amendments to the Member States at least three months before their review by the Council.

2. The amendments recommended by the Council shall, without further notification, be the subject of written acceptance by all Member States, to be addressed to the Government of They shall enter into force thirty days after receipt by the Government of ... of the declarations of acceptance by all Member States.

The Government of ... shall inform the Member States, the Organization, and the Union of the date at which the amendments enter into force.

Article 19 – The dissolution of the Institute shall be the subject of an agreement between the Member States.

Subject to any agreement that may be reached between the Member States at the time of dissolution, the State on whose territory the headquarters of the Institute is located at that time shall take responsibility for its liquidation.

The assets shall be allocated between the Member States at the time of dissolution in proportion to the contributions actually paid by each since they became parties to the present Convention.

Should there be net liabilities, these shall be paid for by the same States in proportion to the contributions fixed for the current financial period.

Article 20 – The Council may invite any Member State of the United Nations to accede to this Convention, if it considers unanimously that the said State is in a position to bring a substantial contribution to the development of the activities of the Institute.

The invitation from the Council shall be transmitted to the interested State by the depositary Government of the present Convention.

Article 21 – 1. The present Convention shall be ratified or approved in accordance with constitutional procedures of each signatory State. Instruments of ratification or approval shall be deposited as soon as possible with the Government of

2. The present Convention shall enter into force when ... signatory States shall have deposited instruments of ratification or approval.

3. At the expiry of ten years after the entry into force of this Convention, any State shall be able to withdraw from it by notifying such withdrawal to the Government of ...

4. The Government of ... shall give notice to all Member States, to the Institute, and to the World Health Organization of the entry into force of the Convention and of any accession or withdrawal that shall have been notified to it and of any accession that has occurred under the conditions defined in article 20.

The Director shall so inform all organizations with which the Institute is or has been cooperating under the terms of articles 11 to 13 of the present Convention.

IN WITNESS WHEREOF ...

Done at ... in the French and English languages, the two texts being equally authentic, in a single original which shall be deposited in the archives of the Government of ... which shall deliver one certified copy to each of the Member States as well as to the World Health Organization.”

During this meeting, the experts formulated the following document:

“Text prepared by the experts at the meeting of 27 and 28 February 1964:
Project for a World Centre for Cancer Research”

Article 1 – Objective:

The objective of the World Centre for Cancer Research shall be to constitute a mechanism by which its Member States and the World Health Organization, in liaison with the International Union Against Cancer and other interested international organizations, cooperate in order to stimulate and support all aspects of research related to cancer.

Article 2 – Remit:

1. The Centre is intended to provide a core of eminent scientists whose responsibility is to plan, promote, and develop research relating to all phases of the causation, treatment, and prevention of cancer. These functions shall be fulfilled by (a) a programme of permanent activities financed by the regular annual contributions of its members and (b) specific projects financed by funds received as donations or as non-recurring contributions granted by the Members or arising from other sources.
2. As a permanent regular activity, the Centre shall collect and disseminate information on the occurrence of cancer, on cancer research, and on the prevention of cancer throughout the world.
3. Also as a permanent activity, the Centre shall determine the needs and prepare plans for cancer research projects or in support of such research. These projects should be designed to make the best possible use of the scientific and financial resources that may be offered by certain countries, and of special opportunities for valuable studies on the natural history of cancer that may be provided elsewhere.
4. Although the planning of research projects shall be considered as a permanent activity of the Centre, the actual projects shall be carried out only with express approval of the Governing Council based on the recommendations of the Scientific Council.
5. In addition to projects on cancer research, the Centre may also formulate projects in the area of education and training of personnel for cancer research and pilot projects for information programmes on cancer prevention.
6. Projects may be implemented by the Centre itself or in cooperation with other bodies.
7. Projects may involve the setting up of national research institutions to be put in place directly by the Centre.
8. The Centre shall in general encourage and assist national research programmes.

Article 3 – Members:

1. The founding members of the World Centre for Cancer Research shall be: France, the Federal Republic of Germany, Italy, the United Kingdom of Great Britain and Northern Ireland, the United States of America ...

2. Other Member States of WHO may become members of the Centre by accepting the clauses of the present charter, subject to the unanimous approval of the Governing Council of the Centre.

Article 4 – Administration:

The Centre shall be established as an organization administered by the Director-General of WHO, in accordance with rules approved by the Governing Council of the Centre.

Article 5 – Governing Council:

1. The Governing Council of the Centre shall be composed of one representative of each Member State and the Director-General of WHO.

2. Each of these persons shall have one vote in the Governing Council.

3. The Governing Council shall be the supreme authority of the Institute. On the basis of the recommendations of the Scientific Council, it shall adopt the long-term programme, approve the various research projects, and decide upon any supplementary programme. It shall adopt the budget and the financial provisions, audit expenditure, determine the number of staff, appoint its officials, and adopt its rules of procedure.

4. The decisions of the Governing Council shall be made by a simple majority of the members present and voting (quorum: the majority of the members), subject to the exceptions mentioned below³.

5. The Governing Council shall hold one regular session each year. It may also meet in special session at the request of at least two of its members.

Article 6 – The Scientific Council:

1. The Scientific Council of the Institute shall comprise twelve highly qualified scientists, selected on the basis of their technical expertise in the area of cancer research and in related domains, rather than according to nationality or geographical distribution.

2. The members of the Scientific Council shall be selected by the Governing Council by simple majority, following proposals from the Director-General of WHO, from a list of scientists drawn up after consultation with appropriate scientific bodies.

3. The members of the Scientific Council shall serve for a term of three years. At the time of its establishment, the Scientific Council shall comprise members to serve for different periods (mandates of one, two, and three years) in order to ensure the replacement of members each year.

4. The members of the Scientific Council may be reappointed only after at least one year has elapsed.

5. The Scientific Council shall be responsible for the permanent supervision of the activities of the Centre and of the projects sponsored by it, and for deciding upon the programmes and projects to be submitted for approval to the Governing Council of the Centre.

6. The Scientific Council shall devote sufficient time to such supervision and to the study of any proposals for research projects to ensure that its recommendations be considered authoritative.

7. The Scientific Council shall present to the Governing Council, when the latter is examining the programme and budget, a progress report describing the current programme and giving its scientific approval to projected new programmes.

³ A unanimous vote shall be required for the admission of new members, the settlement of disputes between members, and the dissolution of the Institute. A two-thirds majority shall be necessary to amend the present Charter.

Article 7 – Secretariat

1. The secretariat of the Centre shall operate in very close liaison with the secretariat of WHO.
2. The secretariat of the Centre shall comprise the Director and such technical and administrative staff as are necessary.
3. The Director shall be selected by the Governing Council following proposals from the Director-General of WHO, according to procedures to be determined by the Council.
4. The Director shall be the highest official of the Centre and its authorized representative. He shall be responsible, by delegation of authority given by the Director-General of WHO and endorsed by the Governing Council, for preparing the programme and budget estimates, for supervising the execution of the programme, and for overseeing all scientific, administrative, and financial matters. He shall select and dismiss the staff of the Centre.
5. Once each year, at least thirty days before the regular annual session of the Governing Council, the Director shall present a general report on the activities of the Centre to the Director-General of WHO, who shall transmit it to the members of the Organization.

Article 8 – Finance

1. The Centre shall be financed in a permanent manner by the annual contributions of each of its members. These funds shall cover the financing of the permanent activities of the Institute.
2. Payment of the annual contribution shall be made each year before the first day of the calendar year.
3. Any member who shall fail to pay the annual contribution in the twelve months following the due date shall lose its voting right until such time as the entire contribution has been paid.
4. Any individual, institution, or government may make donations or special contributions with the aim of financing the projects of the Centre, acceptance of such funds being subject to the approval of the Governing Council.
5. The Director-General of WHO shall receive all funds in the name of the Centre and shall assign them in accordance with the appropriations of the Governing Council and in compliance with the financial rules of WHO.
6. The travel expenses of the delegates attending the sessions of the Governing Council shall be covered by each member of the Centre.
7. The travel expenses of the Scientific Council shall be paid by the Institute from its regular budget.

Article 9 – Headquarters:

The location of the headquarters of the Institute shall be decided by the Governing Council, bearing in mind technical requirements and local possibilities.

Article 10 – Legal personality, privileges, and immunity:

(The terms of this article will be drafted by legal experts when the procedure for establishment of the Centre, which has not yet been decided, shall have determined the legal status of the Centre.)

Article 11 – Amendments:

Amendments to the present Charter shall enter into force after their adoption by the Governing Council by a two-thirds majority (and acceptance by the World Health Assembly).⁴

Article 12 – Withdrawal and dissolution:

A State or organization may terminate its membership of the Centre by sending a written notification to the Director-General of WHO twelve months before the date at which it wishes to cease its membership.

Dissolution of the Centre may be decided upon by unanimous vote of the Governing Council, according to procedures to be established by the latter.

Article 13 – Entry into force:

The present Charter shall enter into force (after receiving the approval of the World Health Assembly)⁴ and after three States shall have paid to the Institute their first annual financial contributions.”

At the end of this meeting, the following conclusions were adopted:

“Conclusions of the Second Technical Conference (27 and 28 February 1964) on the planned establishment of an international cancer research institution

In accordance with the decisions taken at their first meeting, the representatives of the public health authorities of France, the Federal Republic of Germany, Italy, the United Kingdom of Great Britain and Northern Ireland, and the United States of America, accompanied by cancer research experts, held a second meeting in Paris on 27 and 28 February.

Other participants at the meeting were the Director-General of WHO, the President of the International Union Against Cancer, and observers from UNESCO.

The participants studied different procedures for setting up the future body, its legal status, and its remit.

They agreed that the choice of procedure for setting up the future body and for concluding an agreement with WHO was a matter for the governments concerned.

The legal status that they envisaged would be that of a body founded mainly by the five States mentioned, administered by WHO, and having its own Governing Council, a Scientific Council, and a permanent secretariat.

They agreed to draw the attention of their Governments to the estimate of the expenditures to be foreseen for the establishment and operation of such a body.”

A memorandum was subsequently drafted by the French Government:

“Memorandum from the French Government regarding the meeting held on 27 and 28 February 1964 (dated 11 May 1964)

Following the second meeting of experts held in Paris on 27 and 28 February 1964, a draft Convention for the establishment of a world centre for cancer research was submitted to the relevant governments.

On 3 April 1964, the British Foreign Office transmitted to the embassies of Germany, the United States of America, Italy, and France in London a new draft which, without changing

⁴ Depending upon the procedure adopted for establishing the Centre.

the substance of the text prepared by the experts, clarified certain details and made some technical amendments.

The representative of the Foreign Office added that, in the view of the British Government, the annual contribution from each Member State should be of the order of 150 000 pounds sterling. He suggested that a further meeting be held, this time entirely at the diplomatic level, with the aim of finalizing the Convention.

The French Government considers that the analysis carried out by the British officials represents a valuable complement to the work undertaken by the five countries. It proposes that a diplomatic conference should meet in Paris from 15 to 20 June 1964 for final negotiations on the Convention and possibly its signature. This conference should bring together delegations from the five governments vested with the necessary powers.

In the opinion of the French Government, Dr Candau, Director-General of the World Health Organization, who participated as an observer in the preparatory meetings of experts, should be invited with a similar status on this occasion. It would seem essential that this leading international official should be asked for his opinion on the clause of the Convention dealing with the respective roles of the Member States and of the organization with which it is envisaged that an agreement should be concluded.

The question should be considered as to whether it would be desirable to invite observers from the International Union Against Cancer, as at the previous meetings of experts.

The Soviet Union was invited to the first meeting of experts and chose not to attend, but was informed of the outcome at the last General Assembly of WHO. The French Government proposes to advise the Soviet government of the planned diplomatic conference, when this has been decided and a date fixed by agreement between the five governments, and would transmit to the other governments any response from the Soviet government.

The French Government considers that it would be necessary, as in some previous instances of international cooperation, to plan for a temporary body to work on the fight against cancer while awaiting the ratification and entry into force of the Convention. This temporary body could start working immediately on this task, of which the urgency is already recognized by the governments. The French Government proposes to submit to the other governments concerned, before the diplomatic conference, a draft text about the temporary body.

The French Government suggests the following agenda of the conference:

1. Final drafting of the Convention, which might be signed at the end of the meeting;
2. Discussion of the nature of an agreement to be concluded with WHO;
3. Setting up of a temporary body;
4. Determination of the contributions for the first year;
5. Choice of location for the headquarters of the Organization.

The French Government would be most obliged to the German, American, British, and Italian Governments if they would be so kind as to let it know as soon as possible if the place and date proposed for the conference suit them or if they wish to propose alternatives. It wishes to fix these points rapidly in view of the material and technical preparations that such a meeting requires.

The French Government would likewise be grateful to the other governments if they would let it have any comments on the proposed agenda.

It also suggests that since the British Government has already sent its revised draft Convention to the other governments, it would be useful if all comments on this document could start to be exchanged now, so that the work of the conference, thus prepared, can be accomplished as efficiently as possible. Attached to this memorandum are the initial

comments of the French Government about the British draft, of which it is satisfied with the overall approach.

Finally, concerning the amount of the national contributions, which will indicate the scale of the tasks that can be entrusted to the new organization and which therefore gets to the heart of the problem, the French Government accepts the proposal by the British Government to fix the sum at about two million francs for each State in the first year.

The present memorandum will be submitted to the Governments of the United States of America, the Federal Republic of Germany, the Italian Republic, and the United Kingdom and will also be transmitted to the Director-General of the World Health Organization.”

APPENDIX

First observations of the French Government on the draft Convention for the creation of a World Cancer Research Institute presented by the British Government. The order in which these observations appear follows that of the provisions in the British draft.

1. Although the expression “cancer research” is appropriate from the scientific point of view, it would seem that with regard to the intended impact on public opinion, which needs to be convinced of the vital necessity for this additional effort to combat the cancer scourge, the words “struggle against cancer” should rather be used in the title and preamble. The duties assigned to the Institution at the expert meetings remain unchanged.

2. In article 1, the British draft distinguishes between financing of the permanent activities of the Institution, which would be funded from the annual contributions, and special projects that would require extrabudgetary funding (donations or special contributions). This distinction, which appeared less clearly in the text drafted by the experts, should not be absolute. It would seem desirable that the annual contributions, although their priority function is to cover the permanent tasks of the Institution, should also be able to be devoted to supporting specific projects, subject to express approval by the Governing Council following a proposal from the Scientific Council.

Such support would encourage donors to cover the rest of the funding of these projects through special contributions or donations.

3. Paragraph 1 of article IV, which deals with the administration of the Institution, should appear elsewhere. The logical sequence implies that administrative questions should be covered in article VII, after the provisions relating to the membership and responsibilities of the Governing Council (article V) and of the Scientific Council (article VI).

4. In article VII, it would doubtless be preferable not to retain the phrase “the secretariat shall comprise the Director and the necessary administrative and technical staff”. A clearer distinction should be made in the text to take account on the one hand of the hierarchical relationship between the Director and his staff and on the other hand of the procedures for their appointment, which are different. It was in fact envisaged during the expert meetings that the administrative and technical staff forming the secretariat or services should be made available to the Institution by WHO. The Director, on the other hand, would be selected by the Governing Council. It should be pointed out that, while it may be considered (as foreseen in article VI) that the Director-General of WHO is best placed to draw up lists of candidates for the twelve members of the Scientific Council, in contrast the Governing Council should be able to select the Director without a preceding proposal from one of its members.

5. Article VIII should be amended to take account of the comment under point 2 above (financing of permanent activities and of special projects).

6. In article IX, it would be desirable for the location of the headquarters of the Institution to be stated in the text rather than referring the decision to a meeting of the

Governing Council. Quite apart from the time that this would gain for the installation of the Institution, a decision on this point would seem to be more a matter for the delegations responsible for the creation of the Institution than for one of the organs of that body.

7. In article XIV, the entry into force is envisaged as requiring five ratifications. To avoid possible delay, it would seem preferable to revert to the provision in the text drafted by the experts, which set at three the number of ratifications needed for entry into force.

8. In article XV, the British text provides for accession of new members subject to agreement by the Governing Council without specifying on what basis the latter will take a decision. It would seem appropriate to state, as in the text drafted by the experts, that the agreement of all the founding members is necessary for the accession of new members. This requirement is justified by the fact that the effectiveness of the special effort deemed necessary depends largely on the burden and responsibility that have been taken on by a small number of countries who are best able to carry it out. Another consideration is that it would be difficult for the Director-General of WHO, as an *ex officio* member of the Governing Council, to participate in a vote on such a matter.

Tentative estimation of the defence budgets of the six presumed founding states

A document that had been filed with those pertaining to the second technical conference in Paris, but the source of which is unknown, stated the amounts of the defence budgets of France and those countries contacted about President de Gaulle's project by Mr Marcellin, Minister of Public Health, after he had taken the advice of Dr Candau, Director-General of WHO:

	Total defence budget		0.5%	Exchange rate per \$	0.5% in \$
USA	\$	53 000 000 000	265 000 000	–	265 000 000
USSR	R	13 888 808 000	69 444 040	0.90	77 160 044
United Kingdom	£	2 100 968 350	10 504 842	2.80	29 413 558
Fed. Rep. Germany	DM	3 902 284 900	19 511 425	4.00	4 877 856
Italy	L	886 328 326 000	4 431 641 630	621.00	7 136 299
France	F	11 811 346 577	59 056 733	4.90	12 052 395
					395 640 152

\$: United States dollar

R: rouble

£: pound sterling

DM: deutsche mark

L: Italian lire

F: French franc

Third Technical Conference (27 July 1964)

This meeting was held at the Ministry of Foreign Affairs in Paris, to which had been invited representatives of the embassies of the Federal Republic of Germany (Mr Henschel), the United States of America (Mr Hutterer, Mr Menscher, and Mr Grant), Italy (Mr Delarocca), and the United Kingdom of Great Britain and Northern Ireland (Mr Farqharson and Mr Melville). The Director-General of WHO was represented by Dr A.B. Zarb.

Mr de Chambrun (France) stated that the five governments appeared to have a unanimous desire to take action against cancer, but had various reservations on the procedures followed in drafting the texts expressing their wishes.

The representative of the Director-General of WHO explained that he intended to cooperate in the drafting of texts that would be consistent with requirements of the WHO Constitution.

He pointed to three possible solutions: one based upon Article 19 of the Constitution, a second upon Article 18, sections (k) and (l), and a third based on an internal measure whereby the Director-General, having obtained approval of his proposals and the requisite credits by the competent organs of WHO, would set up a special service to meet a technical or administrative need not yet satisfied.

The governments could propose a convention for the creation of a new enterprise that they considered necessary and, to avoid duplication of effort, enter into an agreement with WHO, which would require approval by the members of WHO by a two-thirds majority.

Each of the representatives of the five countries participating in this meeting presented the views of their respective governments.

The representative of France then presented the point of view of his government, which was worried that a debate in the World Health Assembly might become confused. It would be preferable to restrict negotiations concerning a Convention to the five governments represented at the meeting; once prepared, that Convention would not have to be discussed at the Health Assembly. It was proposed that the agenda for the meeting of experts to be held in September 1964 should include an item "Procedures for the creation of a new organization and examination of an agreement to be entered into with WHO".

Among the other topics discussed during this conference, the following may be noted:

As concerned the funding, the French representative mentioned that contributions from each state of an annual sum of US\$ 100 000 or 150 000 had previously been proposed. No decision was taken on this matter.

For the headquarters of the new organization, the French delegate proposed that it be established in France. He suggested that it could be either in Paris or nearby at Garches, or else in Lyon, because of the proximity to Geneva, where WHO is located.

The next meeting was to be held in Paris on 29 September. The question of the participation of UICC was raised, but, since UICC was not an intergovernmental body, this appeared not to be possible.

Fourth Technical Conference (29 September–2 October 1964)

The participants at this conference, held in Paris from 29 September to 2 October 1964, were representatives of the Governments of France, the Federal Republic of Germany, Italy, the United Kingdom of Great Britain and Northern Ireland, and the United States of America.

At this conference, the delegates approved the statute of an international agency for research on cancer to be submitted to the Eighteenth World Health Assembly in a draft resolution in accordance with Article 18 of the Constitution of WHO.

It was also proposed that, during the intervening time, preparatory meetings should be organized at which representatives of the relevant governments and of WHO would participate, as well as scientists selected by the governments after consultation with the Director-General.

These meetings, to be held in Lyon, would establish a programme of work for the future agency and would study the problems relating to expenditure. WHO was asked to provide the necessary staff and equipment.

The Director-General of WHO was taking all appropriate steps to prepare for these meetings, which would start in February 1965.

Annex 3. Meetings Organized by WHO in Lyon

Preparatory meetings for the establishment of an International Agency for Research on Cancer (Lyon, 16–18 February 1965)

Four meetings were held, which were attended by representatives of the five countries that had replied to President de Gaulle's appeal and had agreed on the project for a world centre for research on cancer and, in addition, a representative of the Netherlands. The proceedings of these meetings are briefly summarized below, along with an aide-mémoire on the membership of the Provisional Scientific Committee.

First meeting (16 February 1965)

The participants reviewed the draft statute, article by article, taking as the basis for discussion a text that had been distributed to them, but of which unfortunately no copy has been preserved in the archives of IARC. This text appears, however, to have not differed greatly from the one drawn up by the experts at the meeting of 27 and 28 February 1964 (see "Text prepared by the experts at the meeting of 27 and 28 February 1964").

Only the most important parts of the discussions of articles of the statute are noted here; the following led to lengthy debates.

Article VI (paragraph 4) concerning the Scientific Council and in particular the projects and programmes. The text adopted read: "recommending programmes and preparing special projects for submission to the Governing Council".

Article VII relating to the secretariat: for paragraph 1, the English text was modified by replacing the word "body" by "organ" and it was agreed that the word "administrative" should precede the word "technical" (the French text remaining unchanged). In paragraph 5, after discussion, the agreed wording read: "supervising the execution of the programme and the scientific activities" and "directing administrative and financial activities".

Article XI concerning the Member States was the subject of a discussion which, however, led to no significant modification.

Article VIII dealing with finance was discussed without any decision being taken.

The name to be adopted for the new institution was another subject of debate. Dr Candau, Director-General of WHO, proposed that in English the term "International Centre" should be used instead of "International Agency" (as a translation of the French "Centre International"). The representative of the United Kingdom, however, pointed out that the word "Centre" in English has a connotation of concentration of activities in a single place, which would be the contrary of the intended sense, the planned dispersal of activities. He asked that the term "Agency" be maintained in English.

Second meeting (17 February 1965, morning)

The discussions on the draft statute continued.

Articles VIII, X, XII: In all these articles, it should be made clear that the two-thirds majority required was of the "members which are Participating States".

Article VIII: Concerning the amount of the annual contributions and the date for their payment, several participants wished for the subject to be dealt with later.

During the discussion, it was considered necessary (a) to have the views of the scientists; (b) to know what research programmes were envisaged before deciding what amounts would

be required; and (c) to know whether the contributions to be fixed were to cover the total costs (secretariat, scientific meetings, research programmes, etc.).

Dr Candau pointed out that a minimum contribution of US\$ 150 000 for each Member State had already been mentioned, a sum that was accepted by the representatives of the United Kingdom and the United States of America and conditionally by the representative of the Federal Republic of Germany, subject to the advice of the scientists.

The Chairman stated that this amount was insufficient and was liable to discourage the scientists. One of the French delegates proposed the sum of US\$ 400 000. Dr Candau regarded this as reasonable, corresponding to a total of US\$ 2 million available to the Agency.

A French delegate made a new estimate of expenditure and calculated that, for the first five years, excluding the construction of the building and laboratory, a total of US\$ 24 million would be necessary. Finally, an annual budget of US\$ 2 million was considered acceptable.

Nominations of scientists to be invited to participate in the meetings to establish the programme of work and the activities of the Agency, in agreement with the Director-General of WHO, were proposed by the Chairman to be dealt with in closed session, which was agreed.

Third meeting (17 February 1965, afternoon)

It was decided that the dates of forthcoming meetings would be 30 March for the meeting of the scientists and 5 and 6 April for that of the representatives of the Participating States.

The discussion then turned to the question of inviting other countries to join the five that had participated in the establishment of the Agency, while recognizing that there might be certain limits to the total number. The Government of the Netherlands had not yet reached a decision.

Dr Candau, Director-General of WHO, coming back to the question of the invitation to be extended to other countries and of their geographical distribution, considered that the current situation with four European Member States and one American was satisfactory. Adding new members ought not to be allowed to alter greatly the present balance. Another question was the participation of developed countries versus developing countries. He was of the view that any country wishing to become a participant should have the possibility of being admitted if it accepted the conditions required, without the five founding states having to give approval, if the World Health Assembly so agreed.

Fourth meeting (18 February 1965, morning)

The first topic discussed concerned the designation, with the approval of the Director-General of WHO, of scientists to be invited to participate in a meeting to establish the programme of work and the activities of the Agency. The letter to be sent to the scientists selected to contribute regarding the activities of the Agency was the subject of some debate.

It was pointed out that from the financial point of view, the research programme should correspond to an annual budget of US\$ 2 million, although this was only a general indication. Bearing in mind that the total sum available to the Agency would depend both on the size of the national contributions and on the number of Participating States, it was quite possible that the budget would not initially reach the level mentioned.

The next item on the agenda was further review of the statute. For article VI, paragraph 3, agreement was reached on the appointment of members of the Scientific Council and their terms of office.

Dr Candau then informed the participants of a request from the Government of the United States of America that Dr Kotin, Associate Director for Field Studies at the National Cancer Institute in Bethesda, should be added to the list of experts, which was accepted.

Finally, the Chairman presented the following draft press release for consideration by the participants:

“The first of the preparatory meetings for the creation of an International Agency for Research on Cancer was held at Lyon from 16 to 18 February 1965. Representatives of the Governments of the Federal Republic of Germany, France, Italy, the United Kingdom, and the United States, as well as the Director-General of WHO, took part. Representatives of the Netherlands Government, which had expressed its interest in the negotiations in October 1964, also attended the meeting.

The participants established the final text of the Statute of the Agency.

Subsequently they decided that the next preparatory meeting would be held at Lyon, as from 30 March 1965, and would comprise two parts. The first would be devoted to drawing up a draft programme of scientific activities of the Agency. For this purpose the participants have invited 12 leading specialists in the field of cancer research: [names of scientists].

This group of 12 scientists will be assisted in its work by the Director-General of the World Health Organization and by WHO experts. The latter, at the end of the first week, will draw up a report on the scientists' recommendations and will estimate the expenditure required to implement the various sections of the programme proposed.

In the second part, which will commence immediately afterwards, on 5 April, the representatives of the participating governments will meet with the group of 12 scientists in order to take cognizance of the results of their discussions and decide on the provisional programme to be adopted. These representatives will also determine the amount of the financial contribution of each participating State.

As an indication of the scale of the programme, the scientists have been asked to plan within an annual sum of \$ 2 000 000. Since the total sum at the disposal of the Agency will depend both on the amount of the contribution and the number of Participating States, it is possible that the budget may reach a different figure.”

Aide-mémoire on the membership of the Provisional Scientific Committee

“Representatives of the Governments of France, the Federal Republic of Germany, Italy, the United Kingdom of Great Britain and Northern Ireland, and the United States of America, together with an observer from the Netherlands and the Director-General of the World Health Organization, met under the chairmanship of Dr E.J.Y. Aujaleu (France) at Lyon from 16 to 18 February 1965 to consider further the establishment of an International Agency for Research on Cancer.

On the afternoon of 17 February 1965, one representative each from France, the Federal Republic of Germany, Italy, the United Kingdom of Great Britain and Northern Ireland, and the United States of America, together with an observer from the Netherlands and the Director-General of the World Health Organization, met in private session to select from a list established by the Director-General of the World Health Organization and including suggestions from the Governments of France, the Federal Republic of Germany, Italy, the United Kingdom of Great Britain and Northern Ireland, and the United States of America, twelve scientists to be members of the Provisional Scientific Committee charged with the task of elaborating the Agency's provisional programme.

Twelve names were agreed upon. It was further agreed that if any one of the twelve members who was a national of one of the six countries mentioned above was unable to attend the meeting of the Provisional Scientific Committee, the Director-General of the World Health Organization would propose to the Chairman (Dr E.J.Y. Aujaleu) the name of a replacement of the same nationality selected from the list of experts established by the Director-General of the World Health Organization. If an expert belonging to a country other than the six mentioned above was unable to attend the Committee, no replacement would be made for him.

At the open session on 18 February 1965, the Director-General of the World Health Organization informed the meeting that he had received from the Government of the United States of America a request to include the name of Dr Paul Kotin, Associate Director, Field Studies, National Cancer Institute, Bethesda, Maryland, among the list of experts originally presented by him to the private session which had taken place the previous afternoon. The Director-General asked for authorization to include this name in the original list. The meeting accepted that the name of Dr Paul Kotin should be included in the original list presented by the Director-General in view of the limitation regarding replacement of members of the Provisional Scientific Committee agreed upon the previous afternoon.”

Preparatory meetings for the Scientific Committee

The meeting of the Scientific Committee in Lyon on 30 March–5 April 1965 was preceded by discussions and consultations organized by WHO in Geneva, at which documents IARC/1 to IARC/5 were prepared, as summarized below.

IARC/1: Agenda.

IARC/2: Setting up of an information centre as part of the International Agency for Research on Cancer.

IARC/3: Opportunities for epidemiological study in the International Agency for Research on Cancer.

IARC/4: Opportunities for study on pathology in the International Agency for Research on Cancer.

IARC/5: Training activities of the International Agency for Research on Cancer. This document was drafted by the secretariat of WHO.

Proposal for a cancer research information centre as part of the International Agency for Research on Cancer (Document IARC/2 – Geneva, 3–5 February 1965)

The various scientists consulted agreed that it was necessary (a) to disseminate rapidly current information on a selective basis and (b) to provide a comprehensive retrospective indexing and bibliographic service for easy consultation.

Such a system should have, compared with existing systems, the advantages of:

- (a) providing faster and more adequate information than currently available;
- (b) including both published and unpublished material (or material at the prepublication stage);
- (c) keeping scientists informed on research in progress;
- (d) providing indexing and analysis by qualified personnel.

Existing sources of information were reviewed:

- (1) The “MEDLARS” system from the National Library of Medicine in Bethesda, MD, United States of America, which produced Index Medicus for the medical sciences
- (2) The Cancer Information Unit of the Gustave Roussy Institute, in Paris

(3) The publications *Current Contents*, *Biological Abstracts*, *Chemical Abstracts*, and the CNRS's *Bulletin signalétique*

(4) The WHO Biomedical Research Information Service (WHOBIRIS)

The functions of an information centre at the International Agency for Research on Cancer were analysed in detail. It was noted that this service would need to have available:

- (a) published information (articles in journals, books, congress proceedings), on both the clinical and experimental aspects of cancer;
- (b) unpublished information (current research projects, epidemiological studies, clinical trials, etc.);
- (c) information on research workers and cancer research institutes and on congresses, symposia, and seminars.

It was estimated that between 30 000 and 50 000 journal articles published each year in the field of cancer would need to be indexed exhaustively.

A study of the organization and structure of an information centre led to the conclusion that a decentralized structure for information collection should be applied, based on a set of national or regional sub-centres. Such sub-centres could be located as follows:

- United States of America (Washington, DC) (MEDLARS and English language)
- France (Gustave Roussy Institute, Villejuif) (French language)
- Federal Republic of Germany (Heidelberg) (German language)
- USSR (Moscow) (Slavic languages)
- Japan (Tokyo) (Japanese and, if possible, other oriental languages)
- Latin America (Spanish and Portuguese languages)
- Africa

A tentative budget estimate for an information centre, based on indexing of 20 000 articles, gave figures of US\$ 300 000 for preliminary studies, US\$ 850 000 for annual operating costs, and US\$ 350 000 for specialized activities, making a total of US\$1 500 000.

Opportunities for epidemiological study in the International Agency for Research on Cancer (Document IARC/3 – Geneva, 14–16 December 1964)

The principal objectives of epidemiological studies in an international centre for cancer research should be:

- (a) the identification of environmental and endogenous factors which may modify or cause cancer in humans,
- (b) application of these observations to the prevention of cancer.

These studies should be developed in great depth using appropriate methods. Their scale should permit the exploration of opportunities previously neglected, especially in fields where international collaboration is necessary. Such epidemiological research should be productive and should help to reveal not only the causes and pathogenesis of the disease, but also methods by which it may be prevented.

The types of inquiry were summarized under four broad headings:

- (1) The search for correlations between the incidence of cancer and the characteristics of the local environment or the genetic constitution of the population;
- (2) The search for characteristics which distinguish between groups with different incidences of cancer;
- (3) The search for correlations between exposure to a suspected agent and the development of cancer, particularly in industry;

- (4) The study of new methods for the prevention or treatment of disease, and also for early diagnosis.

Descriptive epidemiology

Cancer incidence can be assessed directly or indirectly by analysis of (a) statistics on mortality from cancer and (b) statistics on morbidity that can be obtained either from cancer registries or from hospital statistics and also from prevalence surveys, and should be accompanied by data on the characteristics of the environment and of the lifestyle of the populations.

Such international studies, when coordinated by an international research institute, should be highly effective.

Analytical epidemiology

The main methods used are either retrospective, with affected subjects and unaffected controls, or prospective, with initially unaffected subjects who have varying degrees of exposure to the agent under study.

Fruitful opportunities for analytical epidemiological study may occur among:

- (a) populations showing differences in cancer incidence and exposure to suspected carcinogenic factors;
- (b) populations in which cultural habits appear related to a specific cancer;
- (c) populations with unusual risks of exposure to a suspected carcinogen;
- (d) populations in which recent changes in cancer incidence or in exposure to a suspected carcinogen have occurred;
- (e) immigrant populations with different cancer patterns as compared to the country of origin;
- (f) populations that are geographically and culturally isolated.

Studies that seemed especially suitable for international collaboration included the following: cancer of the mouth and pharynx in relation to chewing habits; breast cancer in relation to lactation and hormonal status; cancer of the cervix uteri and sexual behaviour; geographical localization of Burkitt lymphoma; oesophageal cancer and social customs; carcinogenic effects of ionizing radiation.

Experimental epidemiology

Applications remained very limited or could be implemented only indirectly, as in the case of eliminating exposure to a suspected carcinogenic product in industry.

Also under this heading could be considered mass cytological examination to identify premalignant cells and the comparative study of the effects of different methods of contraception upon the development of a cancer.

Cancer prevention

This could feature among epidemiological studies, dealing with early detection by mass screening or the study of risk groups.

Complementary investigations

In comparative oncology, studies should be carried out on:

- exposure to different atmospheric or alimentary agents;
- standardization of diagnostic methods and its consequences for diagnosis;
- relations between epidemiology and other scientific disciplines.

Attention was drawn to the need for cooperation between epidemiology and numerous other disciplines, such as pathology, physiology, biochemistry, virology, anthropology, veterinary medicine, etc.

Opportunities for study on pathology in the International Agency for Research on Cancer
(Document IARC/4 – Geneva, 14–18 December 1964)

Despite the progress made towards solving the problems posed by cancer with the help of the World Health Organization, it would be valuable to put in place a new approach of coordination of efforts at the international level.

Due to the magnitude of the problem, the International Agency for Research on Cancer should apply its efforts to increasing the potential required, not only in the areas of epidemiology and training but also in the field of pathology, increasing coordination while avoiding overlap with existing programmes.

International nomenclature and classification

All research on cancer depends upon accurate initial diagnosis, which requires a histological classification of tumours. Solutions had begun to be implemented by having an international classification and nomenclature agreed by various groups, such as the WHO International Reference Centres, the UICC Committee on Nomenclature, the International Council of Societies of Pathology (ICSP), as well as the Armed Forces Institute of Pathology in the United States of America, which had published fascicles of an *Atlas of Tumour Pathology*.

Knowledge on tumours was improving with time, and therefore these classifications would need periodic revision as new information was gathered on a national or regional basis. Cooperation with the national and international centres should make it possible to obtain agreement on this classification.

The reference centres should be continued and new ones established. Indeed, without international agreement on standardized diagnosis and classification, it would be difficult to carry out analytical studies. The International Agency for Research on Cancer would be a vital information centre for this purpose. Pathological diagnosis is the basis of accurate cancer statistics, and the Agency should participate in making it possible.

Relation of pathology with epidemiology

Valid epidemiological studies require agreement on nomenclature internationally accepted by scientists and statisticians. An international centre should be able to obtain the necessary collaboration and agreement between national societies.

It was deemed necessary to: stimulate the relevant research; periodically revise the classification in the light of new knowledge; utilize and cooperate with existing organizations, such as the International Council of Societies of Pathology; evaluate relevant hypotheses and theories in existing laboratories with groups of specialized research workers.

Role of pathology in the new international agency

The shortage of qualified pathologists was noted; difficulties in recruitment resulted from their inadequate remuneration compared with other specialists, leading to their work often being intermittent and not solely devoted to this discipline.

The new Agency should therefore:

- develop programmes for training of pathologists, in particular in the field of cancer;
- draw the attention of administrators to the need to give pathologists a status comparable to that of specialists such as surgeons or radiologists, and point out how

they contribute to the prevention of disease (see *World Health Organization Technical Report Series No. 175, 1959*);

- organize the training of pathologists in developing countries.

During its first years of operation, the International Agency for Research on Cancer should pay particular attention to the developing countries, setting up national centres and helping with the training and recruitment of specialists. It should establish relations with existing national and international organizations.

Cancer research on an international basis

The approach should be different between developed and developing countries. Examples were given of the many difficulties encountered in developing countries in setting up a system for general practitioners and even more so in training specialists, particularly for pathology. In addition, problems of terminology were harder to resolve in such countries. It was therefore necessary to provide suitable training for specialists in parallel with that of clinicians, but such specialized training was often delayed.

The new centre should set up a programme to develop epidemiological and statistical studies and endeavour to organize new research centres in developing countries.

Particular attention needed to be paid to the facilities for training, establishing libraries and laboratories to stimulate students' interest in pathology, which could provide a link between the clinic and basic sciences. Students should be introduced to the pathogenesis and causal factors of diseases and some be directed towards pathology as a complement to their clinical work, pointing out the links between the clinic, surgery, radiology, and pathology.

A WHO consultant had highlighted the importance of pathology not only for diagnosis but also for treatment of cancer.

It would be desirable for some pathologists to visit developing countries to help them to set up the necessary laboratories, to train technicians, and to draw up a budget for equipment.

The WHO international reference centres

It was noted that there were currently nine such centres and that the setting up of 11 new ones was envisaged.

Preliminary programme for the International Agency for Research on Cancer

A programme of 13 points was proposed for the initial period of activity, among which could be highlighted: surveys of developing countries; visits by consultants; relations with national and international organizations able to provide teaching materials; quality control; public information campaigns on cancer prevention; survey and development of libraries.

Proposal for training activities of the International Agency for Research on Cancer (Document IARC/5, drafted by the secretariat of WHO)

It was first noted that training for research was an activity of all institutions interested in the promotion and intensification of research and that much experience had already been gained in running training programmes. There was a need for international promotion and for training young scientists in countries other than their own. For example, the United States of America was receiving annually about 1500 foreign research trainees in the field of medicine and related sciences, usually for 2–3 years, so that there were at any time more than 4000 foreign trainees in the country. At the same time, some 300 American citizens were awarded medical research fellowships to work in Europe.

Various types of grant existed:

1. Research training grants: postdoctoral fellowships for periods of one to three years.
2. Grants for exchanges of established research workers, for periods of several weeks to a few months.
3. Graduate training grants, designed to help scientific institutions (universities, research institutes) to develop research training programmes, usually for nationals of their own countries.
4. Research career awards, designed to assist trained scientists to pursue research careers in a recognized research institution, for periods of three to five years.

It was proposed that the International Agency for Research on Cancer should consider a dual training programme, with one arm to provide for qualified personnel to be employed by the Agency for the development of its own research activities and the second as a service activity for the promotion of research in existing institutions and the development of cancer research institutions in developing countries.

In terms of the Agency's own needs, the two major fields of planned activities in which training of staff would be required were epidemiological research and an information centre.

For epidemiology, the main needs would be to organize:

- training of young professional epidemiologists;
- training of clinicians, pathologists, basic scientists, etc. in epidemiological methodology;
- short refresher courses for small groups, especially those engaged in field studies.

For the information centre, the Agency would need to consider training indexers and analysts, as well as computer operators and programmers.

In terms of training as a service activity, two target groups were envisaged: on the one hand, scientists requiring postdoctoral training and, on the other, auxiliary technical personnel.

Estimates of the costs of the various proposed training activities covered one-year training in basic epidemiology, grants for scientists, refresher courses in epidemiology, training of indexers, postdoctoral training grants, grants for exchanges of research workers, and training of auxiliary technical personnel, for an estimated total budget of US\$ 414 000.

Two annexes to this document reviewed:

- (a) the research training programmes of WHO, UICC, and the United States National Cancer Institute and other training programmes focused particularly on cancer research, along with an estimate of the sums allocated to them;
- (b) the distribution of grants: about 35% of international training grants were specifically for cancer research, and of these 68% of the recipients were from seven countries, the leading ones being the United Kingdom, the United States of America, and Japan. More than 70% of the awardees chose to study in either the United States of America (57%) or the United Kingdom (14%).

Meeting for the establishment of an International Agency for Research on Cancer

Meeting of the Scientific Committee (Lyon, 30 March–2 April 1965)

The participants were first reminded that the proposals to be made at the meeting would be presented to the Eighteenth World Health Assembly as a resolution sponsored by the governments concerned and calling for the establishment of an International Agency for Research on Cancer, under the terms of Article 18 of the WHO Constitution.

Professor Aujaleu noted that these proposals would determine the functions of this Agency, whose programme would include, on the one hand, permanent activities financed by

the annual contributions from its member governments and, on the other hand, special projects financed by any additional funds that might become available to the Agency. He also pointed out that the sum of US\$ 2 million per year was still only a proposal and that the Committee would need to establish priorities for setting up a research programme.

General considerations

Certain principles were reaffirmed:

1. Projects would be selected solely on the basis of their scientific merit.
2. The programme should be flexible, allowing advantage to be taken of unforeseen opportunities.
3. The prime need for cancer research was additional support to individual institutions at the national level.
4. Research carried out at the international level should be limited to those fields where international collaboration could make a qualitative improvement in the standard of the work being carried out, which might involve:
 - (i) Grants to support work in departments of a high scientific standard in countries that lacked the necessary financial resources,
 - (ii) Support for work in specialized fields that did not attract adequate national funding,
 - (iii) Collection of data on the distribution of cancers across the world as a function of the characteristics of the population and its environment, distinguishing between native-born and immigrant groups,
 - (iv) Provision of selected services for research workers, such as distribution of experimental animals and specialized standardized materials,
 - (v) Enhanced opportunities for training of scientists and for exchange of ideas.
5. There would be no advantage in taking over work from existing international organizations which were already doing it effectively.

Information services

It was proposed to combine centralized and decentralized facilities for the collection, analysis, and storage of information and for its selective dissemination on demand. This would give benefits in terms of rapidity, comprehensiveness, quality, and economy and would allow gradual expansion from a modest beginning.

One aim would be rapid exchange of preliminary information on research that was not yet published, and this could involve publication of a bulletin.

It would be necessary to take into account differences between developing countries having access to only very limited information and developed countries which already had easy access.

Training of research workers

Various types of support for training were listed:

- (a) Postgraduate fellowships for individuals already having basic technical experience (1 to 3 years);
- (b) Grants for short visits for established scientists;
- (c) Support given to institutions for development of training activities (5 years);
- (d) Temporary payment of salaries pending a career appointment (3 to 5 years);
- (e) Temporary research grants for fellows after training (3 to 5 years).

This training programme was deemed to be one of high priority for IARC, within which it was recommended that:

1. Postgraduate fellowships and short visits for established scientists should be a particularly important feature of the Agency's programme.
2. Postgraduate fellowships should be granted irrespective of age.
3. Temporary research grants following training should be an integral part of the programme and be largely reserved for young scientists.
4. A further type of grant proposed was for experienced scientists, to enable them to master new techniques in various domains. Such "adaptation" fellowships could be granted for periods of 2 to 12 months.
5. The training programme should have two orientations, one towards training scientists for work within the Agency's own activities and the other towards helping to promote research in existing institutions.

It would be important to avoid duplication with training programmes provided by existing organizations, and to try to ensure that the trainees would be able to continue research in the field in which they were trained when they returned to their home country.

Pathology

The Committee recommended that the Agency should confine its efforts in this field to topics of particular relevance to epidemiological research, especially to obtain international agreement on nomenclature and classification.

Only a limited part of the budget should be allocated to pathology, but it was important that there should be regular consultations with all other relevant international organizations.

Epidemiology

The Committee considered that epidemiology should be the principal field of activity for the Agency. The presence of wide differences in cancer incidence between communities was noted. Studies should focus in particular on the effects of lifestyle, environment, and socioeconomic status.

Research should be conducted in liaison with existing national bodies, the Agency coordinating work at the international level.

The Agency should concentrate initially upon the following projects:

1. Establishment of cancer registries;
2. Collection of hospital and pathological data in areas where the true cancer incidence was unknown;
3. Studies of gastric cancer incidence in relation to diet, particularly in regions where foodstuffs were almost exclusively derived from local production;
4. Studies to define regions where incidence of cancer of the oesophagus was high and to examine the social and cultural characteristics of the populations;
5. Studies of primary liver cancer and its relationship to foodstuffs contaminated with fungal toxins;
6. Studies of the distribution of various types of buccal cancer in Asia and their correlation with specific chewing habits, bearing in mind the research that the Cancer Unit of WHO was already undertaking on this subject – it would be necessary to identify the constituents of such products that might be responsible for these cancers;
7. Similar considerations applied to the study of childhood lymphoma in Africa (Burkitt lymphoma) and its possible viral origin.

In all these studies, the Agency should be prepared to follow up clues derived from epidemiological data by initiating appropriate laboratory work. To achieve this, grants might

be made to existing institutions. The Committee felt it would be essential to keep in regular contact and close collaboration with laboratory scientists in the relevant fields.

The programme of the Agency should have sufficient flexibility to take account both of new developments and of the research ideas of its own staff.

Comparative oncology

It was proposed that the Agency carry out research in this area by collecting information on differences in the occurrence of tumours in domestic and wild animals. The appearance of similar tumours in humans and animals would be noted and could suggest the involvement of the same causal agent.

The Agency could act as a repository for information and should encourage the collection of material by other organizations.

Support for research

The Committee was of the view that reducing the incidence of cancer and the mortality due to it could be achieved only through both applied and basic research.

It also considered that the involvement of the Agency in laboratory studies was an integral and necessary part of its function. It recommended that it should offer support particularly for research on tumour virology, tumour immunology, cell biology, and mechanisms of chemical carcinogenesis and chemotherapy.

Special projects

The Committee proposed that these projects and activities be prioritized, just as the issue of recruiting permanent staff of high scientific calibre.

Budget

The Committee felt that a sum of US\$ 2 million per annum would constitute the minimum necessary for the Agency to adopt a balanced programme. For the distribution of the funds available, two different estimates prepared at the meeting have been preserved, with percentages as follows:

- (1) Education and training 29%
 - Epidemiology 29%
 - Support for laboratory research 29%
 - Information 3%
 - Administration 10%

- (2) Education and training 34%
 - Epidemiology 34%
 - Support for laboratory research 16.5%
 - Information 3%
 - Administration 10%
 - Contingency 2.5%

Estimated costs of the proposed programmes

The Scientific Committee included the estimated additional expenses to cover the meetings of the Governing Council and the Scientific Council, to give an overall proposed distribution of the budget as below:

Central administration (Director, Translation service, Administration)	161 000
Epidemiology	560 000
Central training service and grants	132 900
Education and training. Fellowships	514 100
Research support	490 000
Information	60 000
Contingency	43 000

	\$ 2 000 000

Second Preparatory Meeting for the Establishment of an International Agency for Research on Cancer (Lyon, 5–6 April 1965)

First session (5 April, morning)

The rapporteur summarized the work carried out by the Scientific Committee during its meeting from 30 March to 2 April 1965. There was then an exchange of views concerning the proposals made by the Committee, during which the following comments were made:

It would be important to avoid duplication between the programmes of the Agency and those of national bodies. The Agency should aim, preferably, to carry out projects that national bodies were unable to undertake.

One of the responsibilities of the Agency, in addition to its own programmes, would be to provide support for high-quality research performed elsewhere.

It was again pointed out that the sum of US\$ 2 million used in planning the work of the Agency was a minimum and should probably be increased.

The emphasis was to be placed on epidemiology, in which research should be oriented towards international studies.

Certain areas such as radiobiology were quite satisfactorily developed by national institutes, but the same was not the case for immunology and biology, the extent of the difference depending on the country considered.

Reservations were expressed concerning the place of basic research among the activities of the Agency.

Attention was drawn to the different capabilities of countries: one group comprising those that had well-developed research facilities and satisfactory financial resources, a second group that had adequate technical means but insufficient funding, and finally a third group that lacked both. The Agency should place a priority on helping countries of the second group and on providing training for those of the third.

Among various comments on the choice of topics for research, one was that certain projects might be relatively easy and inexpensive to perform and generate publications, but had little real scientific interest.

Emphasis was again placed on the importance of the collection and dissemination of information on epidemiology of cancer.

In a discussion concerning laboratory animals and experimental materials, it was remarked that for animal experimentation, it was sufficient to provide a researcher with one male and two females of the required strain. It was, however, agreed that provision of such supplies should not be an activity of the Agency. The most it might do in this respect was to help national centres such as one existing in the Netherlands.

Information services were of particular interest, in view of their role in the development of research. The possibility of publishing a bulletin with preliminary notes on cancer research was discussed. This might contain items in a similar style to those published by the periodical *Nature* in its "Letters to the Editor". A decision on this matter was, however, deferred until later.

Regarding the training of cancer researchers, the importance was pointed out of encouraging physicists, biophysicists, chemists, and biochemists to collaborate in work on cancer. Grants to cover the continued work of foreign research trainees returning to their home countries should not be granted automatically but only when necessary.

Second session (5 April, 2:30 pm)

The discussion of the report of the Scientific Committee continued, with consideration of issues regarding pathology, epidemiology, comparative oncology, support for research, special projects, distribution of the available funds, activities during the period before the Agency would be fully established, and the cost estimates for the proposed programmes.

Pathology: The Scientific Committee had considered this not to be a priority area. It was proposed that the Agency might refer to existing institutions for problems of classification and nomenclature, in particular the World Health Organization and UICC.

Epidemiology: The very important role of epidemiology in the programme was again emphasized.

Comparative oncology: The recommendations of the Committee concerning this field of study were accepted.

Research support: This should, according to the Chairman, cover laboratory research, epidemiology, and therapeutic research. It was noted that the laboratories should provide support for epidemiological research, and two participants suggested that at least 50% of the relevant funds should be devoted to epidemiology, for grants or fellowships, but others considered that other disciplines must not be neglected.

Special projects and permanent activities: Participants considered the issue of support to national research laboratories and how such support might be conditional upon availability of voluntary contributions.

The Chairman drew attention to the respective functions of the Scientific Council and the Governing Council, which should not be confused.

The question was raised of whether the permanent budget of the Agency would permit the launching of a research programme with high-quality scientific staff; this brought up again the issue of whether research should be carried out within the Agency or in national laboratories with its collaboration.

The rapporteur of the Scientific Committee pointed out that the epidemiological studies would be carried out by the Agency's scientists, but it was not specified whether its own laboratories should take part in it. In other areas, the Agency could ask for help from appropriately qualified national laboratories.

Regarding the distribution of the Agency's own financial resources, the Chairman reminded the meeting that a budget of US\$ 2 million had been used by the experts as a basis for setting an order of priorities.

The question was raised of the financing of activities during the period before or immediately after the establishment of the International Agency for Research on Cancer. On this point, it was stated that the French Government, through the Ministry of Public Health and Population, had made available to the National Institute for Health and Medical Research (INSERM) a sum of 1 million francs for funding the activities of the International Agency for Research on Cancer.

Estimates of the likely expenditure were examined, assuming:

- (a) one meeting of the Governing Council and one of the Scientific Council each year, with funding sufficient to allow the use of two languages;
- (b) central services, according to the scale used by WHO;
- (c) programmes of activities based on the percentage distribution across the various activities of the Agency agreed by the Scientific Committee.

Third session (5 April, 4 pm)

The minutes of the first preparatory meeting were approved.

Following the preceding discussion of the report of the Scientific Committee, it was proposed that the problem of priorities within the major categories of research should be examined.

The divergent interests within the Committee had made choice of priorities difficult, but a key feature of the new Agency, distinguishing it from other institutions, was to avoid duplication of work done elsewhere and to concentrate on tasks for which its international status made it particularly suitable. Epidemiology was indubitably the most international aspect of the proposed research and should thus be given first priority, and the training programme second priority.

The issue was discussed of whether grants should be provided to fellows after their training to enable them to continue their work after they returned to their country of origin, and this was considered acceptable in relation to trainees from developing countries when facilities there were inadequate.

Research grants should be provided with discrimination and should encourage research in fields such as epidemiology that the Agency wished to support.

The priority given to epidemiology should be based on its international approach.

Other activities envisaged were small group discussions of a highly technical nature, and the publication of a bulletin to provide rapid exchange of preliminary information about new findings.

Although the report of the committee did not fully deal with the issue, one participant pointed out that the Scientific Committee had considered what information services would be most helpful to investigators rather than what information would be required by the Agency for its own purposes.

Following discussion of the sum of US\$ 490 000 proposed by the Scientific Committee to be allocated to international epidemiology research, most participants agreed with the view that the order of priorities for the permanent programme of activities should be: first epidemiology, second training, and third research support.

The French Government had informally informed the Director-General of WHO of its intention to hold a conference very soon at the diplomatic level, to which the Director-General would be invited.

Annex 4. Official Records of WHO for the Establishment of an International Agency for Research on Cancer

Seventeenth World Health Assembly (A17/P&B/20, 16 March 1964)

Establishment of a world research agency for cancer

A document was submitted to the Health Assembly by the delegations of France, the Federal Republic of Germany, Italy, the United Kingdom of Great Britain and Northern Ireland, and the United States of America.

This document, summarized below, recalled the proposal by the President of the French Republic to allocate 0.5% of the defence budgets of each country to the establishment and running of a world research agency for cancer. The French Government had invited the above-mentioned governments and the Union of Soviet Socialist Republics to participate in a meeting of their respective directors of public health, accompanied by cancer research experts, with a view to examining the technical aspects of the problem.

On 17 and 18 December 1963, and again on 27 and 28 February 1964, meetings were held in Paris between the delegates of those countries, with the exception of the Union of Soviet Socialist Republics, which was unable to send delegates for the time being. The Director-General of WHO took part in the discussions, contributing his advice and the experience of cancer research already acquired by that organization; the President of the International Union Against Cancer (UICC) also participated, and observers from UNESCO attended the second meeting.

Those taking part in the meetings agreed on the following points:

1. Statutes – The institution would provide the machinery by which Member States of WHO, in collaboration with UICC and other international organizations concerned, would cooperate with a view to stimulating and supporting all branches of cancer research.

Although not an entirely new and autonomous organization, the World Research Agency for Cancer should have its own Board of Governors, Scientific Council, and budget. On the other hand, if WHO agreed, it could be administered by the Director-General of WHO, on a basis to be agreed upon later, with WHO being reimbursed for the administrative expenses incurred.

The Board of Governors would consist of one representative of each of the founding States and the Director-General of WHO, as well as representatives of other States admitted by the Board of Governors. The Board would approve the programme of work and the budget and control expenses; technical decisions would be taken on the proposal of the Scientific Council. The Board could call upon anyone whose advice it considered useful, in particular representatives of UICC and of the interested specialized agencies of the United Nations (FAO, UNESCO, etc.).

The Scientific Council would consist of 12 scientists eminent in the various branches of cancer research. They would be appointed for three years from a list of 20–24 persons drawn up by the Director-General of WHO, who could consult UICC and any national or international scientific bodies. The members of this Council could be reappointed after a certain period, probably one year.

The secretariat would consist of a Director appointed by the Board of Governors on the proposal of the Director-General of WHO, and of the necessary technical and administrative staff.

2. Functions – The participants agreed that the agency ought not to establish and operate a central international research laboratory. They considered that laboratory research and, *a fortiori*, clinical research should be carried out in national establishments, the role of the Agency being to assist those establishments. However, they conceded that in certain cases, particularly in areas where special cancer problems arise or where research equipment is inadequate, the Agency could establish and operate “peripheral” research laboratories, subject to the consent of the country concerned.

Subject to the foregoing considerations, the general functions of the World Research Agency for Cancer were defined as follows:

- Collection, processing, and dissemination of information on the incidence of cancer, cancer research, and cancer prevention throughout the world;
- Drawing up of an international tumour nomenclature in consultation with the WHO Reference Centres and UICC;
- Studies of cancer epidemiology, the geographical pathology of cancer, comparative oncology, etc.;
- Assistance in the education and further training of the staff necessary for cancer research at the national level: epidemiologists, pathologists, oncologists, laboratory research workers, etc.;
- The supply to national laboratories of research material, which could be prepared by a few establishments of a particularly high standard: laboratory animals of pure line, specimens of pathological material, strains of virus, etc.
- Drawing up of a world programme of cancer research in which the various tasks would be allocated to national laboratories in such a way as to make the best possible use of the scientific and financial resources that could be provided by certain countries, without prejudice to the facilities and financial aid which might be given to the national laboratories, in case of need, by the World Research Agency for Cancer.

3. Financing and budget – The participants at the Paris meetings left it to their governments to decide the method by which the World Research Agency for Cancer should be financed. They did not discuss in detail the budget of such an Agency. They merely agreed to draw the attention of their governments to the estimated expenditure – and it would be large – to be envisaged for the establishment and operation of such a body.

4. Procedure for establishing the Agency – The experts considered several possibilities but did not take up a definite position regarding the legal procedure for the establishment of the Agency or the terms of the agreement which would have to be concluded with WHO. They recognized that the selection of the procedure was a matter for the governments and that determination of the terms of an agreement with WHO was a matter for the governments and the World Health Assembly.

In brief, the experts who met in Paris carried out what was essentially preparatory work on the technical and administrative aspects of a World Research Agency for Cancer. Their conclusions, which have been summarized above, were designed to enable their governments to take, in full knowledge of the facts, a decision as to whether to participate

or not in the establishment and operation of the World Research Agency for Cancer which was the subject of a proposal by the French Government.

These conclusions may also be of use to the members of the World Health Assembly in considering the possible participation of WHO in the projected scheme and may allow them to decide whether they can authorize the Director-General of WHO to enter into discussions on this matter with the governments concerned.

Participation of WHO in a World Research Agency for Cancer
(Resolution WHA17.49 – 19 March 1964)

“The Seventeenth World Health Assembly,

Considering the initiative taken by several governments concerning the campaign against cancer; and

Convinced of the advantages that might be derived from a special effort of international cooperation in this sphere,

1. AUTHORIZES the Director-General to enter into discussions with the countries concerned with a view to the establishment and operation of a World Research Agency for Cancer, and
2. REQUESTS the Director-General to report on the progress of these discussions at the forthcoming sessions of the Executive Board and the World Health Assembly.”

Executive Board (Thirty-Fourth Session)

Report of the Director-General on the Participation of WHO in a World Research Agency for Cancer (EB34, 21–22 May 1964)

It has been noted that at the Seventeenth World Health Assembly a document was submitted by the delegations of France, the Federal Republic of Germany, Italy, the United Kingdom of Great Britain and Northern Ireland, and the United States of America about the establishment of a world research agency for cancer.

This document recalled the proposal made originally by the French Government for the establishment of this body and the meetings that had been held at the level of the directors of public health of the five governments concerned, accompanied by cancer research experts, and to which the Director-General of WHO had been invited in an advisory capacity.

Pursuant to resolution WHA17.49, the Director-General communicated its contents to the five interested governments, pointing out particularly that it authorized him to enter into discussions with them.

Annex 5. Establishment of an International Agency for Research on Cancer

*Resolution WHA18.44 of the Eighteenth World Health Assembly
(twelfth plenary session, 20 May 1965)*

The Eighteenth World Health Assembly,
Cognizant of Article 18 of the Constitution which provides, *inter alia*, that one of the functions of the Health Assembly shall be to establish such other institutions as it may consider desirable, with a view to promoting and carrying on research;

Considering that the Governments of the Federal Republic of Germany, France, Italy, the United Kingdom of Great Britain and Northern Ireland, and the United States of America have agreed to sponsor the creation and to participate in the functioning of an International Agency for Research on Cancer in accordance with the provisions of its Statute;

Considering that many governments have expressed their interest in the creation of such an Agency; and

Considering resolution WHA17.49 of the Seventeenth World Health Assembly,
DECIDES to establish an International Agency for Research on Cancer which shall carry on its functions in accordance with the provisions of its Statute (annexed).

Statute of the International Agency for Research on Cancer^{5,6}

Article I – Objective

The objective of the International Agency for Research on Cancer shall be to promote international collaboration in cancer research. The Agency shall serve as a means through which Participating States and the World Health Organization, in liaison with the International Union Against Cancer and other interested international organizations, may cooperate in the stimulation and support of all phases of research related to the problem of cancer.

Article II – Functions

In order to achieve its objectives, the Agency shall have the following functions:

1. The Agency shall make provision for planning, promoting, and developing research in all phases of the causation, treatment, and prevention of cancer.
2. The Agency shall carry out a programme of permanent activities. These activities shall include:

⁵ Pursuant to its Articles III and XI, the Statute entered into force on 15 September 1965, by which date five of the States that had taken the initiative in proposing the creation of the International Agency for Research on Cancer had given the undertaking referred to in Article III.

⁶ The document reproduced below is the initial version approved by the Eighteenth World Health Assembly on 20 May 1965. Modifications have been approved by the Agency's Governing Council on several subsequent occasions.

- (a) the collection and dissemination of information on epidemiology of cancer, on cancer research, and on the causation and prevention of cancer throughout the world;
- (b) the consideration of proposals and preparation of plans for projects in, or in support of, cancer research; such projects should be designed to make the best possible use of any scientific and financial resources and special opportunities for studies of the natural history of cancer which may arise;
- (c) the education and training of personnel for cancer research.

3. The Agency may arrange for the carrying out of special projects; however, such special projects shall be initiated only upon the specific approval of the Governing Council, based upon the recommendation of the Scientific Council.

4. Such special projects may include:

- (a) activities complementary to the permanent programme;
- (b) the demonstration of pilot cancer prevention activities;
- (c) the encouragement of, and the giving of assistance to, research at the national level, if necessary by the direct establishment of research organizations.

5. In carrying out its programme of permanent services or any special projects the Agency may collaborate with any other entity.

Article III – Participating States

Any Member of the World Health Organization may, subject to the provisions of Article XII, participate actively in the Agency by undertaking, in a notification to the Director-General of the World Health Organization, to observe and apply the provisions of this Statute. In this Statute, Members which have made such a notification are termed “Participating States”.

Article IV – Structure

The Agency shall comprise:

- (a) the Governing Council;
- (b) the Scientific Council;
- (c) the Secretariat.

Article V – The Governing Council

1. The Governing Council shall be composed of one representative of each Participating State and the Director-General of the World Health Organization, who may be accompanied by alternates or advisers.

2. Each member of the Governing Council shall have one vote.

3. The Governing Council shall:

- (a) adopt the budget;
- (b) adopt financial regulations;
- (c) control expenditure;
- (d) decide on the size of the Secretariat;
- (e) elect its officers;
- (f) adopt its own rules of procedure.

4. The Governing Council, after considering the recommendations of the Scientific Council, shall:

- (a) adopt the programme of permanent activities;
- (b) approve any special project;
- (c) decide upon any supplementary programme.

5. Decisions of the Governing Council under subparagraphs (a) and (b) of paragraph 3 of this Article shall be made by a two-thirds majority of its members who are representatives of Participating States.

6. Decisions of the Governing Council shall be taken by a simple majority of members present and voting, except as otherwise provided in this Statute. A majority of members shall constitute a quorum.

7. The Governing Council shall meet in ordinary session at least once in each year. It may also meet in extraordinary session at the request of one-third of its members.

8. The Governing Council may appoint subcommittees and working groups.

Article VI – The Scientific Council

1. The Scientific Council shall be composed of twelve highly qualified scientists, selected on the basis of their technical competence in cancer research and allied fields.

2. The members of the Scientific Council shall be appointed by the Governing Council. The Director-General of the World Health Organization, after consultation with qualified scientific organizations, shall propose a list of experts to the Governing Council.

3. Each member of the Scientific Council shall serve for a term of three years. However, of the members first appointed, the terms of four members shall expire at the end of one year, and the terms of four more members shall expire at the end of two years. The members whose terms are to expire at the end of one year and the members whose terms are to expire at the end of two years shall be chosen by lot to be drawn by the Director -General of the World Health Organization immediately after the first appointments have been made. Any member leaving the Scientific Council can be re-appointed only after at least one year has elapsed, except those who have been chosen by lot in accordance with the above procedure.

4. The Scientific Council shall be responsible for:

- (a) adopting its own rules of procedure;
- (b) the periodical evaluation of the activities of the Agency;
- (c) recommending programmes of permanent activities and preparing special projects for submission to the Governing Council;
- (d) the periodical evaluation of special projects sponsored by the Agency;
- (e) reporting to the Governing Council, for consideration at the time that body considers the programme and budget, upon the matters dealt with in sub-paragraphs (b), (c), and (d) above.

Article VII – Secretariat

1. Subject to the general authority of the Director-General of the World Health Organization, the Secretariat shall be the administrative and technical organ of the Agency. It shall in addition carry out the decisions of the Governing Council and the Scientific Council.

2. The Secretariat shall consist of the Director of the Agency and such technical and administrative staff as may be required.

3. The Director of the Agency shall be selected by the Governing Council. The appointment shall be effected by the Director-General of the World Health Organization on such terms as the Governing Council may determine.

4. The staff of the Agency shall be appointed in a manner to be determined by agreement between the Director-General of the World Health Organization and the Director of the Agency.

5. The Director of the Agency shall be the chief executive officer of the Agency. He shall be responsible for:

- (a) preparing the future programme and the budget estimates;
- (b) supervising the execution of the programme and the scientific activities;
- (c) directing administrative and financial matters.

6. The Director of the Agency shall submit a report on the progress of the Agency and the budget estimates for the next financial year to each Participating State and to the Director-General of the World Health Organization, which shall be distributed to reach them at least thirty days before the regular annual meeting of the Governing Council.

Article VIII – Finance

1. The administrative services and permanent activities of the Agency shall be financed by equal annual contributions by each Participating State.

2. These annual contributions shall be due on 1 January of each year and must be paid not later than 31 December of that year.

3. These annual contributions shall be \$ 150 000.

4. The amount of these contributions shall not be changed for five years except by unanimous decision of the Governing Council. After that period, any decision to change the amount shall require a two-thirds majority of the members of the Governing Council who are representatives of Participating States.

5. A Participating State which is in arrears in the payment of its annual contribution shall have no vote in the Governing Council if the amount of its arrears equals or exceeds the amount of contributions due from it for the preceding financial year.

6. The Governing Council may establish a working capital fund and decide its amount.

7. The Governing Council shall be empowered to accept grants or special contributions from any individual, body, or government. The special projects of the Agency shall be financed from such grants or special contributions.

8. The funds and assets of the Agency shall be treated as trust funds under Article VI (6.6 and 6.7) of the Financial Regulations of the World Health Organization. They shall be accounted for separately from the funds and assets of the World Health Organization and administered in accordance with the financial regulations adopted by the Governing Council.

Article IX – Headquarters

The site of the Headquarters of the Agency shall be determined by the Governing Council.

Article X – Amendments

Except as provided in Article VIII, paragraph 4, amendments to this Statute shall come into force when adopted by the Governing Council by a two-thirds majority of its members who are representatives of Participating States and accepted by the World Health Assembly.

Article XI – Entry into force

The provisions of this Statute shall enter into force when five of the States which took the initiative in proposing the International Agency for Research on Cancer have given the undertaking referred to in Article III to observe and apply the provisions of the present Statute.

Article XII – New Participating States

After the entry into force of this Statute, any State Member of the World Health Organization may be admitted as a Participating State, provided that:

- (a) the Governing Council, by a two-thirds majority of its members who are representatives of Participating States, considers that the State is able to contribute effectively to the scientific and technical work of the Agency;
- (b) and thereafter, the State gives the undertaking referred to in Article III.

Article XIII – Withdrawal from participation

A Participating State may withdraw from participation in the operation of the Agency by notifying the Director-General of the World Health Organization of its intention to withdraw. Such a notification shall take effect six months after its receipt by the Director-General of the World Health Organization.