

WAGO 2025 ANNUAL MEETING

ORAL ABSTRACT



What do we have to lose? An evaluation of NIH funding for gynecologic cancers

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Objectives

We evaluated the distribution of National Institute of Health (NIH) funding for gynecologic cancer research from 2020-2025. Institutions receiving grants and their locations were identified in order to assess trends and potential impact of changes in federal funding.

Methods

Using the NIH Research Portfolio Online Reporting Tools (RePORT), we analyzed the number of grants and funding allocated to gynecologic cancer research from 2020-2025. Funding was categorized by cancer type (ovarian, uterine, cervical, or all gynecologic cancers), research area (basic and translational science, diversity, equity, and inclusion (DEI), patient-reported outcomes (PRO), and clinical trials), institution, and location. We evaluated the distribution and trends in funding by type, including Research Project Grants (RPGs) for Small Business Innovation Research (SBIR) and Small Business Technology Transfer (STTR), RPGs - Non SBIR/STTR, Research Centers, Research and Development (R&D), and Other Research Related.

Results

As of March 2025, a total of 9,369 grants and \$4,454,791,327 were awarded by the NIH for the current year. Of these, 46 grants (0.49%) and \$19,859,189 (0.45%) were awarded to gynecologic cancer research, with \$11,632,443 (58.57%) for ovarian, \$2,060,568 (10.38%) for uterine, \$4,047,448 (20.38%) for cervical, and \$2,118,730 (10.67%) for studies that included all gynecologic cancers. By research type, \$14,086,958 (70.93%) funded basic and translational research, \$3,988,374 (20.08%) for DEI, \$485,869 (2.45%) for PRO, and \$1,297,988 (6.54%) for clinical trials. Of these, 89.34% of funding was allocated for RPGs - Non SBIR/STTR, 6.47% RPGs - SBIR/STTR, 1.06% Research Centers, and 3.12% Other Research Related. Pennsylvania received the highest net funding among the states, while the University of Texas MD Anderson Cancer Center was the top-funded institution. A longitudinal analysis from 2020 to 2024 demonstrated fluctuating funding trends, with a peak in 2023 at \$473.84 million, followed by a decline to \$396.53 million in 2024. Each year, the most funding was allocated to Non SBIR/STTR research (Figure 1).

Conclusions

Gynecologic cancer research risks losing up to \$19,859,189 in NIH funding amidst the evolving political landscape. Most imminently, we risk losing up to \$3,988,374 (20.08%) in NIH funding towards DEI research. Implications for these funding losses include fewer treatments for women in all populations, reduced pipeline of new investigators, and an overall future with increasing gynecologic cancer morbidity and mortality. Identifying the institutions and research areas most vulnerable to funding loss is crucial as we navigate advocating for continued advancements in the field.

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