

1. WHAT IS THE CANCER FOUNDATION'S SLOGAN?

- A () Together for life.
- B () Against cancer.
- C () Healthy life.
- D () With you, for life.



CHECK OUT THE
EXPECTATIONS FOR 2009

DISCOVER HOW THE
CANCER FOUNDATION
SUPPORTS THE BRAZILIAN NATIONAL
CANCER INSTITUTE - INCA



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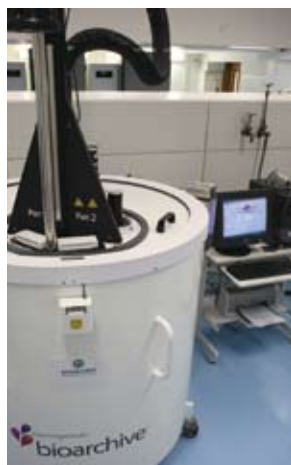
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Expansion of the BrasilCord Network, with the support of the BNDES

The Cancer Foundation signed a contract with the Brazilian Development Bank (BNDES - *Banco Nacional de Desenvolvimento Econômico e Social*) to implement the project for expansion of the Brazilian Network of Umbilical Cord and Placenta Blood Banks and Stem Cell Storage (BrasilCord). The R\$ 32 million in financing from BNDES will be invested in construction of the eight new units that will be added to the four already existing ones.



New logo for the Cancer Foundation

To get closer to society in general and grant enhanced visibility to the actions it undertakes, the Ary Frauzino Foundation for Cancer Research and Control adopted an easier name: the Cancer Foundation, along with the slogan "With you, for life".

Service agreement with the National Cancer Institute (INCA)

The signing of a service agreement between the Cancer Foundation and INCA in October of 2008 guaranteed continuity of the partnership between the two institutions, granting financial equilibrium to the relationship.

Funding for Pediatric Emergency Center

A record was set in terms of pre-sold sandwiches for the Happy McDay through the local branch of McDonald's (McDia Feliz) – 44 thousand units. The funds obtained, added to the contributions of voluntary donors and the American School in Barra permitted establishment of the Pediatric Emergency Center for the children of INCA.



New member of the UICC

The Cancer Foundation became a member of the International Union Against Cancer (UICC), an NGO that works on preventing and controlling cancer all over the world. Joining forces with UICC expands the exchange of know-how and competences between the entity's members.

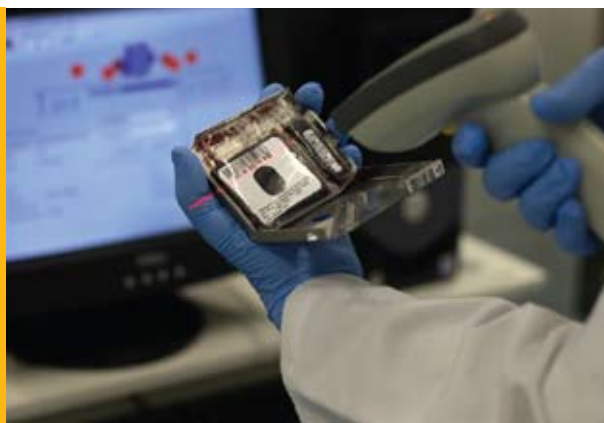


INFORMATION TECHNOLOGY

Development of information systems for INCA and investment in software programs considered of strategic importance, as well as the license for use of the Business Intelligence program and acquisition of the rights to use Absolute, which manages INCA's assistance activities. These programs are a major step forward in consolidating information about cancer in Brazil.

INVESTMENTS IN THE FIRST UNITS OF THE BRASILCORD NETWORK

Inauguration of the Umbilical Cord and Placenta Blood Banks in Florianópolis (SC) and Curitiba (PR) to become integral parts of the BrasilCord Network. Units in Fortaleza (CE), Recife (PE), Belém (PA), Brasília (DF), Porto Alegre (RS) and Belo Horizonte (MG) will be inaugurated in 2010.



Inauguration of the Pediatric Emergency Center



The opening of the INCA unit to serve children in March of 2009 has given youngsters more personalized and appropriate treatment.

Obtaining funding

In order to increase the projects undertaken, the Cancer Foundation intends to expand its funding activities. To this end, it has launched a publicity campaign with advertising space granted free of charge by media outlets, as well as structuring and creation of a call center and promotion of beneficiary events.



Regulations and more resources for the bone marrow search system

A series of regulations governing the sending of Brazilian bone marrow donations overseas, which were put into effect in January of 2009, is an important stride forward for Brazil. Now, besides seeking marrow abroad, which has been done since 1999, the nation can now send it out to foreign patients, thus participating in an international network of solidarity. This has become possible by signing an agreement that integrates the National Bone Marrow Donors Register (REDOME) as a Cooperative Register of the National Marrow Donor Program (NMDP), which is the agency responsible for the Bone Marrow Donation Program in the United States, the world's largest. The resources obtained by sending hematopoietic stem cells will be administered by the Cancer Foundation and reinvested in international search and in modernization, expansion and training of the hemocenters that are part of the BrasilCord Network.

**NATIONAL
MARROW
DONOR
PROGRAM®**

Renewed commitments with new challenges

What were the main accomplishments of the Cancer Foundation in 2008? How did these highlights contribute to actions for prevention and control of the disease in Brazil? We have developed this report, in which we render account for the past year, guided by these questions. Our objective is to show to our partners, donors, volunteers and employees the main victories achieved in the alliance between the Cancer Foundation and the National Cancer Institute (INCA), which has been reiterating ever since 1991 just how much it is possible to do for life.

The most visible change was adoption of a new name and logo to bolster our image in terms of communication and to make it easier for our various public allies to identify with us. Although we have maintained our formal legal name, the Ary Frauzino Foundation for Cancer Research & Control, we have reduced and simplified our commercial name to the Cancer Foundation. We have also launched a new logo, the purple color of which underscores overcoming disease. Accordingly, we have begun a process of repositioning not just our image but, above all, our role, which results from our accumulated experience and our new challenges. By taking this approach, we are seeking to become better known by society at large and grant increasingly greater visibility to the activities of our Foundation in preventing and controlling cancer.

One of the major victories in 2008 was the signing of a service agreement with INCA. This agreement provides financial re-equilibrium to the relationship, allowing maintenance of Foundation employees allocated to INCA, who account for almost one third (30%) of the Institute's total work force. The change in the form of relationship has the further advantage of meeting the requirements of the Federal Audit Board (TCU) and the Federal Attorney's Office.

The agreement guarantees continuity of the Cancer Foundation's partnership with INCA, which is an exemplary model for a union between the public and private sectors in the area of health-care. The agreement signed preserves, in terms of its legal framework, the effective model developed by the two institutions for prevention and control of cancer. Besides adaptations to applicable legislation, the new agreement modernizes and guarantees sustainability for the Cancer Foundation, insofar as it opens up new possibilities for action. Among our forthcoming challenges are increasing funding capacity and performing services linked to oncology for other institutions, thus permitting us to share our accumulated project management experience.

The support provided by the Brazilian Development Bank (BNDES) to the project for expansion of the Brazilian Network of Umbilical Cord and Placenta Blood Banks and Stem Cell Storage (BrasilCord) attests to our capacity. Begun in 2008, this project calls for eight new units and improvements in the installations of the four already existing units. The financing BNDES granted, in the amount of R\$ 32 million, is the largest volume of non-reimbursable funds ever earmarked by BNDES's Social Fund for a social project. This important victory reflects the reputation for honesty and effectiveness we have earned in terms of managing resources. In 2006 and 2007, Brazil's first public umbilical cord blood bank, integrated with INCA's Bone Marrow Transplant Center, was expanded thanks to a R\$ 4 million financing granted by BNDES to a project managed by the Cancer Foundation.

Expansion of the BrasilCord Network will increase the chances of finding non-kin donors of bone marrow in Brazil, speeding up the treatment process and further boosting foreign exchange savings to the ex-

tent that there will be a drop in our demand for bone marrow from foreign banks. This project is of fundamental strategic importance in our nation's fight to prevent and control cancer. The Foundation is proud of managing it in partnership with INCA, along with so many other projects that are the fruit of this union of forces.

In the area of research, we should highlight the initiatives undertaken with the support of the Swiss Bridge Foundation, an institution that has provided financial support for the Brazilian National Tumor and DNA Bank. There are further studies underway that analyze the genetics of patients stricken with cancer and the molecular markers of childhood leukemia, among others. We have also consolidated our support for the Oncobiology Program at Rio de Janeiro Federal University (UFRJ), which brings together no less than 200 researchers from various institutions in Brazil.

Our next major challenge is construction of a Hospice, the first rest home in Brazil intended for patients undergoing palliative treatments. At this center, persons stricken with cancer will get special care and be ensured a solid quality of life index (QLI). It is through our engagement with society that we have managed to carry these and other projects forward. We are increasingly convinced that it is necessary to grant continuity to the successful model established by the Cancer Foundation with INCA and society. For this reason, we count on your help and engagement too.



DR. MARCOS MORAES

CHAIRMAN OF THE BOARD OF TRUSTEES



Dr. Luiz Antonio Santini GENERAL DIRECTOR OF INCA

The Cancer Foundation and INCA: heading toward a new stage in our relationship



The model on which the relationship between the Cancer Foundation and the National Cancer Institute (INCA) is based is in the process of being updated and reinvigorated. The change will allow us to undertake more actions to prevent cancer and conduct research to fight the disease. The year 2008 saw the clearing of a major hurdle towards consolidating this experience. A service agreement was signed between the two institutions and calls for establishment of productivity goals and indicators, guaranteeing transparency with respect to the use of public resources.

Luiz Antonio Santini, who has served as General Director of INCA since 2005, played an active role in bringing about this new agreement. In this interview, he explains the importance of the model for management of the Institute in partnership with the Cancer Foundation and presents the main challenges faced by Brazil in terms of policies for preventing and controlling this dreaded disease.

What were the main results achieved in 2008 in the context of INCA's mission?

We consolidated the project for the new INCA campus, with the Rio de Janeiro State Government granting the area where the Rio de Janeiro State Public Servants' Assistance Institute (IASERJ) is located. More than just a physical and functional reorganization, however, this project will promote the technical and scientific advance of our institute. The new space that will be created makes it feasible

to carry out our major challenge at present – reversal of the high rates of cancer deaths in Brazil. The design will be ready in 2009 and construction work will start at the beginning of 2010.

Another accomplishment was the reorganization and reformulation of the management structure of INCA. We developed a managerial model that is more participative, involving more empowerment, in which all the areas of the Institute are included. The aim of the change is to update INCA to handle the new challenges looming, preparing it for the future. The new structure took effect in 2009, but was prepared and indeed concluded in 2008.

What was the role of the Cancer Foundation in these accomplishments?

The Cancer Foundation is playing a very important role by making it feasible to achieve a new vision of the organization in technical-scientific terms, represented physically by the campus that will be built and in the manner whereby this INCA management model is directed. The Cancer Foundation has played a crucial role at various times as partner in discussing the management model and, mainly, as regards the financing alternatives for the Institute. It was during the course of this debate that there arose the possibility of us moving to a higher platform in the relationship between the two institutions, the concrete realization of which came about with the signing of a service agreement.

What precisely does this new agreement entail?

Signing the agreement actually meant formally legalizing and preserving a model that has already

proven its worth and is indeed quite successful. The Brazilian Federal Health Ministry contracts INCA for the actions that it wants the Institute to develop. To this end, it establishes certain follow-up indicators. In those actions that the Institute is not able to carry out itself, INCA contracts the Foundation, which performs them in conjunction with the working plan agreed to with the Health Ministry. This is the transition model. We have created this alternative to make our situation legally feasible and we are constructing a new juridical model that will establish a new relationship with the Cancer Foundation. Although the agreement was formally signed between INCA and the Health Ministry, it was done with the participation of both the Rio de Janeiro State and Municipal Health Secretariats. It was a model into which a great deal of discussion and debate was poured, involving all the parties that participated in the process.

Why was this model adopted?

The agreement is the answer that INCA and the Foundation encountered to adapt the model to the new law in effect that determines that there can be no outsourcing of the activities of public agencies or supplementary salaries for public servants.

We demonstrated the results that we achieved through this model up to that point. It was the partnership established between INCA and the Foundation that has allowed Brazil to reach the present levels of actions to control cancer in the nation. Without the Foundation, we would not have been able to carry out this work. In the absence of such support, INCA would in all likelihood be in the same dire straits that most public entities in the country

find themselves in. Rather than being a problem, the Cancer Foundation is a solution. It is a fundamental element in our management approach, since it makes it feasible for us to continue with the activities that we undertake.

And what are the effects of this new agreement in practical terms?

The main impact of the agreement is the enhancement of our ability to track the results of our processes. Each and every one of the Institute's activities has a set of goals and indicators. Actual figures are established for the number of consultations, surgeries and radio- and chemotherapy procedures. National actions are defined for prevention, research and instruction. This provides total transparency regarding the use of public funds. This mechanism, already widely used in the private sector, is an innovation in the public sector. In the event some of the targets are not met, it is possible to determine precisely why they were not attained and to correct any mistakes that may have been made.

You mentioned that this is a transition model. What is the next step?

As a new legal model for the partnership between INCA and the Cancer Foundation is defined, the agreement – which is valid for a period of 2 (two) years – will be revised. When we get to this point, the Institute will be able to contract its work force directly. The relationship with the Foundation will change for the better, going back to the one that originally was the Cancer Foundation's reason for being, that is to say, an institution that supports technical and scientific development.

What are INCA's main challenges today?

In terms of our most immediate needs, num-

ber one on the list is carrying out the agreement. On a medium- to long-term horizon, our objective is to expand the INCA's role in the production of knowledge and development of technical-scientific know-how in the area of cancer. For this, we strongly need the ongoing support of the Cancer Foundation. Besides handling patients stricken with cancer, one of INCA's main responsibilities is establishing standards of excellence that will be reproduced throughout the nation. This is an absolutely crucial result that, historically speaking, has been achieved, and we aim to increasingly enhance, perfect and expand it.

How do you evaluate policies for prevention and control of cancer in Brazil and in the world?

Cancer is already the number one disease and the leading cause of death in the world, including in the most developed countries. In Brazil, it is the second leading cause of death. It is a very grave and serious problem wherever you turn. Policies to prevent and control cancer are a major challenge all over the world. Over the course of the past few years, the problem of cancer has taken on a dimension in terms of public health that is quite enormous. This relevance is not just quantitative, based on the epidemic representation of mortality rates due to this disease, but also for the ongoing search for new knowledge linked to the areas of genetics, pharmacology, R&D and production of new drugs and medications. We are increasingly convinced that it is urgently necessary to invest continuously in actions for early detection and prevention, mainly with respect to the types of cancer most common among the Brazilian population. It will thus be possible to ensure more pro-active intervention on the part of the public sector and health-care services.



Teacher Izabel Christina Machado de Oliveira
and patient Samuel Pedro Borges Pinheiro

MISSION

Collaborate by appropriate means with the National Cancer Institute (INCA) and with all persons and entities interested in developing activities oriented to fighting cancer.

TARGET PUBLIC

The main beneficiaries of the services performed by INCA are the Brazilian populace as a whole, given that the Institute is a national reference in preventing and controlling cancer. The free-of-charge services provided by INCA in the areas of direct assistance, institutional and human development, research, education and vigilance reach Brazilian people of all income brackets, particularly the neediest who are served by the Single Healthcare System – SUS. The Cancer Foundation supports INCA in all its activities, allocating specialized human resources, managing projects and obtaining funds for the Institute's research programs and for its technical and scientific development.

Eighteen years of history

THE ARY FRAUZINO FOUNDATION FOR CANCER RESEARCH & CONTROL – THE CANCER FOUNDATION – IS A PHILANTHROPIC ENTITY AND THE PRINCIPAL PRIVATE INSTITUTION SERVING AS PARTNER FOR THE NATIONAL CANCER INSTITUTE – INCA. THE CANCER FOUNDATION IS AN AUTONOMOUS ENTITY, IN TERMS OF EQUITY, ADMINISTRATIVE AND FINANCIAL AFFAIRS, AND HAS A LEAN AND MODERN STRUCTURE THAT ENSURES IT EXECUTIVE SWIFTNESS AND EXCELLENCE IN THE ACTIONS IT UNDERTAKES TO SUPPORT PREVENTION AND CONTROL OF THE DISEASE.

The Foundation was created in 1991 by Dr. Marcos Fernando de Oliveira Moraes, at the time serving as INCA's General Director, together with three other doctors: Jayme Brandão de Marsillac, Ulpio Paulo de Miranda and Magda Cortês Rodrigues Rezende. The Institute's managers sought economic-financial alternatives to expand health care for persons stricken with cancer and to intensify actions

to prevent and control the disease. To this end, the group studied the main models of philanthropic entities then existing in Brazil. Creation of the Foundation opened up a new channel to receive resources from private initiative and also from public agencies and international institutions. The managerial model adopted has contributed since that time to the continuous and stable growth of INCA.

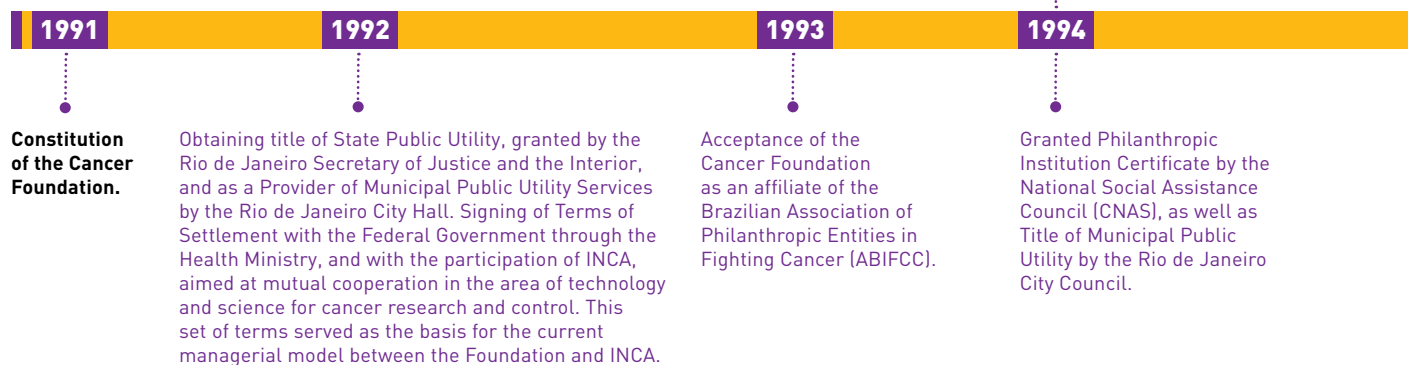
The results archived by the Cancer Foundation over the course of these 18 years reaffirm the commitment inherent in the institution's genesis: contributing to the actions of the National Policy for Prevention and Control of Cancer. The institution's governance practices – including transparency, efficiency and agility in managing resources – have assured its outstanding position in the nation.

ACHIEVEMENTS



During the nearly two decades since its establishment, the Cancer Foundation has won recognition from various public agencies in the form of titles and certificates that attest to its usefulness to the public. This has granted the Foundation tax benefits and exemptions, allowing the institution to expand its actions on behalf of the National Cancer Institute (INCA).

Granted credentials by the National Council for Scientific & Technological Development (CNPq) to carry out importations with the benefits of Law No. 8.010/90.





Board Members of the Cancer Foundation. From left to right - standing: Luiz Felipe de Queiroz Mattoso, Ivan Ferreira Garcia and Joaquim José do Amaral Castellões. Seated: Carlos Mariani Bittencourt, Luiz Antonio Santini Rodrigues da Silva, Marcos Fernando de Oliveira Moraes and Peter Byrd Rodenbeck

The Cancer Foundation has become a benchmark institution and won recognition from the medical and scientific communities.

The leading challenge of the Cancer Foundation at present is to increase its approximation to society, partners and collaborators. It was precisely for this reason that during 2008 its efforts were concentrated on studying the best forms of guaranteeing

its sustainability and also enhancing communication with its various publics. The aim is to grant greater visibility to the actions undertaken, showing how all concerned are potential pro-active agents in favor of this most worthy cause. Mobilization of society at large is increasingly important in controlling and treating cancer, a key problem in terms of public health.

Quiz

2. WHY WAS A NEW LOGO CREATED FOR THE FOUNDATION?

- A () To enhance the institution's visibility with respect to society at large and the corporate world, making it more widely known.
- B () To aid in fund-raising.
- C () To encourage people to get involved.
- D () All of the above.

Title of Federal Public Utility granted by the President of Brazil.

Exemption from employers' contribution to Social Security (INSS)

1995

Arrangement signed with INCA and the Federal Government, through the good offices of the Health Ministry, validating and expanding the provisions of the Terms of Settlement signed on July 27, 1992.

Registration of the Cancer Foundation with the Rio de Janeiro Municipal Social Assistance Council (CMAS) and the National Suppliers System (SICAFI), for providing services to the Federal Government.

1998

Registration of the Cancer Foundation with the Rio de Janeiro Chapter of the Regional Council of Medicine (Cremerj).
Signing of arrangement with the Health Ministry to conduct international bone marrow searches.

2000

Participation by representatives of the Cancer Foundation on the CMAS, a valuable role that was repeated in 2003.

2001

Received the Performance Award from the Miguel Calmon Institute. The same award was also received in the years 1996 and 2000.

2003

Extension for three years of the arrangement signed between the Cancer Foundation, INCA and the Federal Government through the good offices of the Health Ministry, in 1995.

2005

Signing of service agreement between INCA and the Cancer Foundation.

2008

The Ary Frauzino Foundation for Cancer Research & Control maintained its legal name and adopted "Cancer Foundation" as its new trademark name.

HOW THE CANCER FOUNDATION SUPPORTS INCA

THE CANCER FOUNDATION SUPPORTS INCA IN FIVE PRINCIPAL AREAS:
MEDICAL-HOSPITAL ASSISTANCE, EDUCATION, RESEARCH, PREVENTION
AND VIGILANCE, AND INSTITUTIONAL AND HUMAN DEVELOPMENT.

Quiz

3. THE CANCER FOUNDATION IS A PHILANTHROPIC INSTITUTION THAT...

- A () Supports the National Program for Prevention and Control of Cancer.
- B () Supports and develops projects for INCA.
- C () Obtains funds for investing in cancer prevention and control.
- D () All of the above.



Patient Matheus de Almeida
and teacher Gabriela Porto Guedes

Medical-hospital assistance

The Cancer Foundation supports INCA in contracting human resources and acquiring materials, equipment and services for maintenance of such assistance activities as diagnosis, treatment, rehabilitation and palliative care for cancer patients served by the four hospitals and one medical center run by the Institute: Cancer Hospital I – HC I; Cancer Hospital II – HC II; Cancer Hospital III – HC III; Cancer Hospital IV – HC IV; and the Bone Marrow Transplant Center – CEMO.

The Foundation also supports INCA in the arrangements signed for technical-scientific cooperation, agreements for rights to use software programs and also remodeling and improvements in the hospital units. Insofar as human resources are concerned, the Cancer Foundation is responsible for around 30% of INCA's workforce.

The Assistance Program is the one that absorbs the greatest volume of resources invested by the Foundation for medical-hospital procedures. The table below shows the number of persons helped by INCA with the support of the Cancer Foundation in the last four years.

NUMBER OF PERSONS HELPED	2005	2006	2007	2008
Registrations	7,984	7,200	7,557	7,812
Consultations	256,340	254,502	248,805	239,910
Processes	8,909	8,910	9,101	7,011
Hospitalizations	15,462	15,119	15,014	15,872
Surgeries	12,129	11,795	11,611	11,469
Chemotherapy applications	36,135	35,966	36,700	35,654
Radiotherapy applications	156,012	160,407	153,669	151,603
Bone marrow transplants	80	83	88	95

Persons helped by INCA with the support of the Cancer Foundation in the last four years.

Flávio Braga, supervisor of the INCA Umbilical Cord and Placenta Blood Bank





Umbilical cord and
placenta blood sample

LEARN ABOUT SOME OF THE PROJECTS SUPPORTED BY THE CANCER FOUNDATION IN THE AREA OF ASSISTANCE

EXPANSION OF THE BRASILCORD NETWORK

The project developed and managed by the Cancer Foundation is aimed at increasing the number of umbilical cord blood units that, after processing, are ready to be used in bone marrow transplants. With this goal in mind, new umbilical cord blood banks will be created in the cities of Fortaleza (CE) and Recife (PE) in the Northeast; Brasília (DF) in the Midwest; Porto Alegre (RS), Florianópolis (SC) and Curitiba (PR) in the South; Belo Horizonte (MG) in the Southeast and Belém (PA) in the North. These units will be added to those already in operation in the cities of Ribeirão Preto, Campinas and São Paulo in the Southeastern State of São Paulo and Rio de Janeiro also in the Southeast. The already existing banks will also receive resources and new equipment. Moreover, part of the funds will be used to make improvements at the INCA Immunogenetic Laboratory, considered a reference for exams at the units of the BrasilCord Network.

Expectations are that within five years the Network will have frozen approximately 50 thousand units of umbilical cord blood, with possibilities for even greater expansion. On a medium-term horizon, the growth of the BrasilCord Network will increase the chances of people finding a non-kin donor in Brazil. This will speed up the transplant process and help the nation save on foreign currency transactions, as there will be a cutback in the number of donations received from overseas. The project, which began in November 2008, is slated to last 30 months. Budgeted at R\$ 32 million, the expansion of the BrasilCord Network is backed by the sponsorship of the Brazilian Development Bank (BNDES).

Quiz

4. WHAT IS THE PERCENTAGE INCREASE IN FUNDING PROVIDED BY THE 2008 HAPPY MCDAY (MCDIA FELIZ) IN RELATOIN TO THE PREVIOUS YEAR?

- A () 30%
- B () 15%
- C () 144%
- D () 100%



Pediatric emergency

INTERNATIONAL DONOR SEARCH

This Health Ministry program, which began in 1999, is aimed at international search, collection and transportation of material for patients requiring bone marrow transplants who cannot find donors in Brazil. In 2008 the Cancer Foundation and INCA conducted such searches for 150 Brazilian patients. Out of this number, 56 non-kin donors were encountered.

REGISTER OF VOLUNTARY BONE MARROW DONORS

Backed by the sponsorship of ArcelorMittal Brasil, in 2008 the Cancer Foundation coordinated the project for implementation of three pediatric beds at INCA's Bone Marrow Transplant Center (CEMO). This past year, the Brazilian branch of the ArcelorMittal steel concern also expanded its support for the Bone Marrow Donor Program, which conducted campaigns for donation from private companies and other institutions, in partnership with the hemocenters. The initiative produced healthy results: the National Register of Voluntary Bone Marrow Donors (REDOME) upped the number of registered donors from 556 thousand in 2007 to 800 thousand in 2008. With this, Brazil rose to the rank of third among all the nations of the world with the highest number of potential bone marrow donors. Leadership in this regard is held by the United States, with Germany ranking second.



Luiz Fernando Bouzas,
Director of the
Bone Marrow Transplant
Center (CEMO/INCA)

PEDIATRIC EMERGENCY

This project is representative of the Cancer Foundation's activities. The Pediatric Emergency Ward is a differentiated space and one that is more appropriate for attending children, who had previously been treated along with adults. In 2008 the Foundation structured and managed the work for creation and implementation of INCA's pediatric emergency ward. Inauguration of the new unit in March of 2009 calls for a 50% reduction in waiting time and a 10% rise in the total number of infant hospitalizations. The ward now features a consulting room and three new beds structured for handling infants, with an appropriate environment and specialized team. The monthly demand for emergency care for infants is 250 persons undergoing onco-hematological treatment at INCA. Financed by the 2007 and 2008 Happy McDay (McDia Feliz) campaigns, the project was fortunate enough to count on the support of voluntary donors and the American School of Rio de Janeiro.

The total cost was R\$ 810 thousand, including the construction and remodeling work performed, the purchase of hospital equipment and the budget for the first 12 months of operation. The



Dr. Sima Ferman, head of INCA's Pediatric Oncology unit, in the play land ("brinquedoteca") that was also created with the support of the Cancer Foundation

salaries of the pediatric emergency team are being covered by the funds raised from the 2008 Happy McDay campaign, when the Cancer Foundation bested the national record for presale of tickets. No less than 44,613 Big Mac units were sold as part of this campaign. The funds obtained from the 2009 campaign are earmarked for payment of the employees allocated to the unit.

OTHER PROJECTS IN THE AREA OF ASSISTANCE:

- *Network of Sentinel Hospitals*
- *Hospital Accreditation*
- *Expansion of the cellular and molecular hematology laboratory*



Find out more about these projects at our website

www.fundacaodocancer.org.br





Education

The Cancer Foundation has contributed to the training of resident oncologists and for professional enhancement of doctors, nurses, physiotherapists and technicians in the healthcare area.

With a view to ongoing instruction and education, in 2008 the Cancer Foundation granted financial support to around 500 participants in courses and seminars, including national and international events.



Research

The Cancer Foundation fosters development and continuation of surveys and research at the various laboratories run by INCA, obtaining funding from private concerns, developmental institutions and society at large that permit the contracting of highly specialized human resources, modernization of laboratories and acquisition of inputs for development of research projects that stimulate the production of technical-scientific knowledge. Let us take a look at some of the projects underway in the area of Surveys and Research.

CLINICAL RESEARCH STUDIES

The year 2008 witnessed the consolidation of recognition of INCA with respect to the international scientific community, owing to the impact and quality of the clinical research studies conducted at the Institute. This affirmation was made by Carlos Gil Ferreira, head of INCA's Clinical Research Division, who highlighted the role of the Cancer Foundation in contributing to the success of the projects undertaken and the growth in this area of the Institute in the past decade.

It was in 2008 that the Institute's researchers published the results of the first study of Phase 1 with new-generation molecular drugs conducted in Brazil. The consolidation and development of clinical research and surveys have transformed INCA into an Excellence Center on a worldwide scale, that is, one capable of conducting innovative and unprecedented studies for controlling cancer, as well as educating and training specialized profes-

sionals. In conjunction with the Pharmacological Development Program, which is in the implementation phase, these technological advances grant sustenance for formation of an economic-industrial complex in the Health area that, in the long run, will allow the nation to accumulate foreign exchange earnings.

Another benefit is that, by means of such clinical research work, patients treated at the Institute have access to new therapeutic possibilities and the new generation of medications. All of these studies are backed up by INCA's ethics committee and by Brazilian clinical research legislation, considered one of the world's best in terms of respect for patients.

By the end of 2008, around 1,100 patients included in 130 clinical studies sponsored and developed at INCA began to have access to other therapeutic possibilities brought on with the advent of the new generation of medicines.

Quiz

5. HOW DOES THE CANCER FOUNDATION CONTRIBUTE TO RESEARCH PROJECTS?

- A () Contracting researchers.
- B () Purchasing equipment.
- C () Financing and managing projects.
- D () All of the above.



Dr. Carlos Gil,
INCA's Clinical Research
coordinator

RESEARCH PROTOCOLS SIGNED WITH PRIVATE INITIATIVE

Asta Médica Ltda.
AstraZeneca do Brasil Ltda.
Aventis Pharma Ltda.
Bristol Myers Squibb Brasil S/A
Cell Therapeutics Inc.
Ely Lilly do Brasil Ltda.
Fairway Políester Ltda.
Glaxosmithkline Brasil Ltda.
Icon Clinical Research
Intrials Consultoria Científica Ltda.
Jansen Cilag Farmacêutica Ltda.
Merck S/A
Novartis Biociência S/A
Pharmaceutical Research Associates
Ppd Development L.P.
Quintiles Brasil S/A
Roche Químicos Farmacêuticos Ltda.
Sanofi Synthelabo Ltda.
Schering Plough S/A
Telik Inc.
Therakos Inc.

To expand this area of INCA, the Cancer Foundation, sponsored by the Federal Government's Studies & Projects Financing Agency (Finep), administered the project for implementation of clinical research units at the Institute's hospitals. Also slated is construction of a five-storey building, near HC I, to house the entire infrastructure of this sector. The construction work should be concluded in 2010. The objective is to complement and optimize the still deficient or non-existent points in the present structure of the Clinical Research Service, also including acquisition of equipment and supplies.



João Sélis Rocha,
pharmacist-chemist and researcher
of the INCA Research Center

DRUG DEVELOPMENT PROGRAM

In 2008 the Cancer Foundation began implementation of the infrastructure of the Program for Development of New Drugs for treatment of the disease. This initiative meets a requirement of the Health Ministry, the policies of which include establishment of a Productive Health Complex aimed at transforming the nation into an exporter of pharmaceutical products and diagnostic kits. It is expected that in this manner Brazil will be able to decrease the impact that cancer treatment medicines currently have on the nation's balance of payments. Slated for conclusion in 2010, implementation calls for acquisition of equipment and support for assistance-related activities. This project too counts on the sponsorship of Finep.

ONCO-BIOLOGY PROGRAM

Understanding the mechanism for formation of tumors, revealing new cancer treatment strategies, developing new chemotherapy and other therapies, as well as contributing to prevention and control of the disease overall. These are the chief objectives of the projects undertaken by the Inter-Institutional Program for Cancer Biology Instruction, Research & Extension (Onco-biology Program) of Rio de Janeiro Federal University (UFRJ). Ever since 2005, this program has counted on financial resources from the Cancer Foundation. So far, over R\$ 675 thousand has been invested, R\$ 110 thousand in 2008.

The program brings together 100 researchers, doctors and specialists that work at the UFRJ Health Sciences Center, including Clementino Fraga Filho University Hospital, at Rio de Janeiro State University (UERJ), at Fluminense Federal University (RFF) in Niterói, and at INCA.

Since 2005 the Cancer Foundation has financed, through two public notices, a total of 30 scholarships, each one worth R\$ 20 thousand. Besides this, it has made it feasible to distribute three Vivi Nabuco and two Leopoldo De Meis post-doctorate scholarships in which the researcher receives R\$3 thousand per month for a year.

BRAZILIAN NATIONAL TUMOR AND DNA BANK

Expanding the availability of tumor samples. This is the current challenge faced by the National Tumor and DNA Bank (BNT). Created in 2006 with the sponsorship of the Swiss Bridge Foundation and Finep, it was the first public tumor bank set up in Brazil. The Cancer Foundation was responsible for financial management of the project. More than just a depository for tumors, the BNT is a non-profit biological resource center that provides researchers with annotations and qualitative information on the material, which is stored according to strict procedures.

One of the main benefits of the BNT for research is that it permits the study of the behavior of tumors based on the Brazilian genetic standard. To ensure that all the regions of the country are contemplated, the BNT has arrangements worked out with various institutions throughout the nation. The objective is that in the next few years new centers can be implemented in other regions associated to the BNT. On a global scale, the aim is creation – together with other biological re-



Dr. José Cláudio Casali, BNT coordinator

source centers – of a world bank with genetic samples for all peoples on Earth. With capacity for 88 thousand samples, the BNT presently has 8 thousand types of samples and the number of donations by patients is on the rise.

THE CANCER FOUNDATION SUPPORTS OTHER PROJECTS THAT ARE LIKEWISE IMPORTANT IN THE AREA OF RESEARCH, SUCH AS THE FOLLOWING:

- *Studies of profiles of gene expression in cancer patients*
- *Genome and proteome of leukemia*
- *Molecular heterogeneity of leukemia and lymphomas*
- *Implementation of INCA's Onco-virology Program*
- *Oncological infrastructure*
- *Molecular markers and environmental hospitalizations in the study of childhood leukemia parthenogenesis in Brazil*
- *National Pharmogenetic Network*



Learn more about these projects on our website

www.fundacaocancer.org.br





Patient Regina Angélica Pinto and nurse Andreia Roque da Silva

Quiz

6. WHAT TYPE OF CANCER IS THE GREATEST CAUSE OF DEATH AMONG WOMEN?

- A () Lung.
- B () Colon.
- C () Breast.
- D () Stomach.

Prevention and vigilance

Support for national campaigns to foster a network of educational actions in the area of prevention and vigilance with respect to cancer, and to gather data for records on the disease, is yet another of the areas in which the Cancer Foundation plays a leading role. This vital support is carried out by entering into arrangements and signing agreements with the agencies of the Ministries of Health, Agrarian Development and Science & Technology.

The Cancer Foundation also obtains funding for projects to prevent the disease and supports them by allocating human resources. Another highlight is the development of information technology systems to consolidate data on the incidence of the disease. Let us learn about some of the projects undertaken in the area of Prevention and Vigilance.

GUARANTEE OF QUALITY MAMMOGRAPHY SERVICES

The Northeastern State of Paraíba and the cities of Belo Horizonte (Southeast), Goiânia (Midwest) and Porto Alegre (South) were chosen as the regional headquarters of the pilot project for preparing a working agenda for the National Mammography Quality Program. The agenda was structured by an INCA team and will be submitted to the evaluation of the Health Ministry at the federal level.

As concluded in 2008, the major highlight of the project was establishing methodologies for evaluation of mammography exams carried out in the SUS network, which were rated as low quality by INCA and the Brazilian College of Radiology (CBR). Mammography is an important tool for early diagnosis of breast cancer, contributing to both control thereof and reduction in the rate of infant mortality caused by the disease. The pilot project, the result of a partnership among INCA, CBR and the National Sanitary Vigilance Agency (Anvisa – roughly equivalent to the US FDA), was financed by the Avon Institute and the Health Ministry.



SMOKE FREE ENVIRONMENTS

Closed environments free of tobacco fumes. This is the goal of INCA's Tobacco Control Division, which proposed new wording to improve Federal Law No. 9294 and make it even stricter. Having been signed into law in 1996, the law is currently behind the current recommendations of the World Health Organization (WHO). Furthermore, it is advisable for state and municipal laws to be created throughout the nation – presently they are absent in most parts of the land – strengthening and reaffirming the importance of altering and updating the Federal Law. The project, which was begun in 2007, also seeks to improve inspection mechanisms, raise public consciousness regarding the risks of exposure on the part of passive smokers to a tobacco environment and enforce control by society with respect to full compliance of the legislation.

In this vein, a series of actions were carried out in 2008 to mobilize society regarding the harmful effects of tobacco. Support signatures (numbering 17,028) were gathered on a petition supporting alteration in the bill presently before the Brazilian Congress and sent to the President's Chief of Staff. Another highlight was the survey conducted among owners of bars and restaurants and their workers, waiters, busboys, etc. The project also conducted a survey regarding deaths caused by passive smoking and concluded that at least seven persons die every day from indirectly inhaling the harmful substances contained in tobacco fumes released into closed environments. A bulletin entitled



Tânia Cavalcante,
head of INCA's Tobacco Control Division

“For a world without tobacco” is also published each month to disclose the latest information on the subject. This project is financed by the International Union Against Tuberculosis and Lung Disease (Bloomberg Global Initiative).

THE CANCER FOUNDATION ALSO SUPPORTS OTHER PROJECTS:

- *Vigilance on tobacco use among school children*
- *Creation of a communication plan about breast cancer for Avon representatives in the cities of Ribeirão Preto (São Paulo - SP) and João Pessoa (Paraíba - PB)*



To learn more about these projects,
check out our website
www.fundacaodocancer.org.br

SPECIAL EVENTSS

Learn about and remember the principal dates in terms of cancer control and prevention and participate in the actions being carried out:

- *World Day Against Cancer – February 4*
- *World Day Without Tobacco – May 31 (created by the World Health Organization – WHO)*
- *Brazilian National Day to Fight Smoking – August 29*
- *National Day to Fight Cancer – November 27*

Institutional and Human Development

The Cancer Foundation carries out and promotes various activities for development of INCA's human resources, such as training and travel opportunities. This updating program guarantees high-quality assistance to the Brazilian populace. Aligned to the Institute's demands, the Foundations guarantees the contracting of the finest consultants and specialists for projects considered strategic in cancer prevention and control.

To care for the health of the employees that make INCA a center of excellence, the Cancer Foundation offers the healthcare

plan known as Qualivida, which features broad coverage. In order to support control of the incidence of cancer in our nation and enhance the information systems already in place, the Foundation further invests heavily in IT.

Among other activities and services undertaken with a view to institutional development, the Cancer Foundation is also involved in rental of properties that guarantee expansion of INCA's activities, such as the facilities presently allocated to the Technology, Human Resources Coordination and Prevention and Vigilance Coordination sectors.



Team of the Workers' Health Division
(from left to right): Tatiana Massari, analyst, Dinorá Nepomuceno, administrative assistant, Roberta Nascimento, administrative aide, Marcelo Varela, analyst, and Liliana Lugarinho, manager



Plano de Assistência Médica e Hospitalar

The management of the Cancer Foundation is also marked by its concern for the employees of both INCA and the institution itself. One of the highlights in this area is the Qualivida program, which ever since 1997 has offered medical and hospital assistance for collaborators and their dependents. No less than an estimated seven thousand people are covered by this program. There is also a dental assistance program that in 2008 was expanded by offering a wider range of procedures. Inclusion of orthodontia and complete prostheses services is aimed at meeting the requests of these em-

ployees. The plans are personalized, that is, each employee chooses the model that best suits their needs.

Another outstanding characteristic is the self-management whereby the Foundation is the provider of the resources required for financial maintenance of the plan and the employees are co-responsible, paying variable portions according to the number of consultations and simple exams carried out. Hospitalizations and more specialized exams, such as tomography and resonance, are not charged for. In 2008, the figures were as follows: 30,315 consultations, 91,194 exams and 24,059 emergency treatments. Maintenance of the health care and dental coverage plans indicates the degree of concern with the well-being of its employees that is one of the hallmarks of the Cancer Foundation.

Another initiative: Oncology Attention Network

The Oncology Attention Network, which was conceived of in 2004, is a macro-strategic project developed by the Health Ministry and INCA with the support of the Cancer Foundation. Also participating in this initiative are the Federal Government, State and Municipal Health Secretariats, public and private universities, health services and NGO's. It is aimed at fostering cooperative work in controlling the disease, cutting down on regional inequality in terms of treating cancer.

The sharing of knowledge and resources has contributed to decentralization of prevention actions, with a view to reducing the incidence of cancer and deaths and guaranteeing quality of life for patients. Based on the network concept, which presumes linear articulation and cooperative work among the integral parts, the initiative also seeks to train different partners regarding the understanding and management of the problem of cancer in our country. Moreover, it strengthens the planning and evaluation of the actions aimed at oncological attention, besides fostering technological development in the area of health.

IN 2008 VARIOUS ACTIVITIES UNDERTAKEN WITHIN THE CONTEXT OF THIS PROJECT COUNTED ON THE FOUNDATION'S SUPPORT. AMONG THE HIGHLIGHTS ARE ACTIONS FOR EARLY DETECTION OF CANCER, CAMPAIGNS AND STUDIES FOR CONTROLLING TOBACCO USAGE AND REGARDING THE IMPORTANCE OF WHOLESOME FOOD FOR PREVENTION OF THE DISEASE. FURTHER, THERE WAS THE STRUCTURING OF IT SYSTEMS FOR SYSTEMATIZATION OF DATA.



patient at the INCA art workshop

Those who support the Foundation

OVER THE COURSE OF ITS 18-YEAR TRAJECTORY, THE CANCER FOUNDATION HAS BEEN FORTUNATE TO COUNT ON THE SUPPORT OF PRIVATE INITIATIVE, GOVERNMENTAL AGENCIES AND PEOPLE FROM ALL WALKS OF LIFE. THIS SUPPORT COMES IN THE FORM OF INJECTION OF FINANCIAL RESOURCES OR THROUGH TECHNICAL-SCIENTIFIC ARRANGEMENTS UNDERTAKEN WITH NATIONAL AND INTERNATIONAL INSTITUTIONS. ALL OF THIS HAS HELPED THE CANCER FOUNDATION IN ITS WORK WITH SOCIETY, MAKING VARIOUS INITIATIVES VIABLE IN THE AREAS OF ASSISTANCE, INSTRUCTION AND RESEARCH CARRIED OUT BY INCA. AMONG OUR PARTNERS AND SUPPORTS IN THE PAST TWO YEARS ARE:

Brazilian National Sanitary Vigilance Agency (ANVISA – similar to the US FDA)
 Brazilian Association of Philanthropic Institutions for Fighting Cancer (ABIFCC)
 Pro-Vita Association for Bone Marrow Transplant
 Associação Vencer (Win Association)
 AstraZeneca do Brasil Ltda.
 Aventis Farma Ltda.
 Banco do Brasil S/A
 Banco Modal S/A
 Brazilian Development Bank (BNDES - Banco Nacional de Desenvolvimento Econômico e Social)
 Bristol-Myers Squibb Brasil S/A
 Casa Ronald McDonald
 Cell Therapeutics Inc.
 National Epidemiology Center (CENEPI)
 Companhia Brasileira de Petróleo Ipiranga
 Companhia Distribuidora de Gás do Rio de Janeiro – CEG
 CEG RIO
 National Council for Scientific & Technological Development (CNPq)
 Eletrobrás
 Eli Lilly do Brasil Ltda.
 American School of Rio de Janeiro
 Fairway Poliéster Ltda.

Rosane Martins dos Santos, INCA
 Elementary School teacher, with
 patient Fábio Rodrigues Oliveira

Quiz

7. WHAT DOES THE FOUNDATION INVEST CONTRIBUTIONS IN?

- A () Research, instruction and technological development in health care.
- B () Projects linked to early diagnosis.
- C () Treatment, rehabilitation and palliative care.
- D () All of the above.





Teacher and patient
Gabriel de Souza Vieira

Federal Government Studies & Projects Financing
Agency (Financiadora de Estudos e Projetos - FINEP)
National Health Fund (MS)
Glaxo Smithkline Brasil Ltda.
Grupo ArcelorMittal do Brasil
Albert Einstein Israelite Hospital
Icatu Holding
Icon Clinical Research
Indústria Química Farmacêutica Schering-Plough S/A
Instituto AVON
Instituto Ronald McDonald
International Atomic Energy Agency (IAEA)
International Centre for Genetic Engineering and
Biotechnology (ICGEB)
Intrials Consultoria Científica Ltda.
Itavema Rio Veículos Peças (RJ and SP)
Janssen-Cilag Farmacêutica Ltda.
Johns Hopkins University
Laboratórios Pfizer
Merck Sharp & Dohme
Brazilian Health Ministry
National Jewish Medical and Research Center (USA)
Novartis Biociências S/A

UNESCO
Pan-American Health Organization (PAHO)
Petrobras
Pharmaceutical Research Associates
PPD Development
Produtos Roche Químicos e Farmacêuticos Ltda.
Quintiles Brasil Ltda.
Research for International Tobacco Control (RITC)
Sanofi-Synthelabo Ltda.
Rio de Janeiro Municipal Health Secretariat – Local
manager for Single Healthcare System (SUS)
Smithkline Beecham Brasil Ltda.
Swiss Bridge Foundation
Tecnosolo Engenharia S/A
Telik Inc.
International Union Against Tuberculosis and Lung Disease
(Bloomberg Global Initiative)
Therakos Inc.
University of Miami
Rio de Janeiro Federal University – UFRJ

and all the other entities, companies and individuals that in
some manner collaborated with the Foundation.



Patients and volunteer at the art workshop



Jorge Carlos Matri contributes monthly to the Cancer Foundation

PARTICIPATE IN THIS CAUSE

The Cancer Foundation counts on the support of hundreds of individuals who have become fundamental collaborators in the fight to prevent and control cancer. They are donors like 70-year-old retiree Jorge Carlos Matri, who has been making monthly contributions to the Foundation for 10 years now.

After waging his own battle against cancer, he wanted to help other people undergoing the same problem. “I was greatly impressed with the treatment I got at INCA and even today I am still under a doctor’s care. I owe a debt of gratitude to the Institute. The

work performed by INCA and the Cancer Foundation is priceless for our country”, the retiree stated.

It was during the time he was being treated at the Institute that Jorge learned about the work undertaken by the Cancer Foundation. Today solidarity is practiced in his family. His mother Dona Dulce and his brother Paulo have likewise become monthly donors. Still not satisfied, Jorge continues to seek out even more people among his relatives and friends to join the chain of goodwill. It is thanks to initiatives like this that the Cancer Foundation can do more for life.



Renata Guerra,
INCA partner

Quiz

8. HOW CAN YOU AID THE CANCER FOUNDATION?

- A () Making financial donations yourself.
- B () Encouraging your friends and next-of-kin to join in the cause to prevent and control cancer.
- C () Mobilizing people to develop healthier habits.
- D () All of the above.

HOW TO PARTICIPATE AND COLLABORATE

The Cancer Foundation has been strengthening its ties with society to make it more sensitive to the active means whereby people can participate in the relentless battle against cancer. There are various possibilities for contributing: donations, sponsorships, events (auctions, beneficiary teas, weddings, anniversaries, etc.), inheritances, partnerships with private initiative, among others.

You too can be a Cancer Foundation donor. Participate and invite your friends and family members to join in the action to prevent and control cancer. Spread the word.

We count on the collaboration of all people of good will so we can do more for life. To become a donor, you can:



Get in touch with the Cancer Foundation on the phone
(55-21) 3385-9922



Print out a bank deposit slip on our website
www.fundacaodocancer.org.br



Make a bank deposit in any one of the accounts listed here:

Banco do Brasil

Branch No. (Agência) 2234-9

Current Account No. c/c 204.783-7

Banco Itaú

Branch No. (Agência) 0541

Current Account No. c/c 25.450-4

Banco Bradesco

Branch No. (Agência) 1791-4

Current Account No. c/c 24.134-2

Unibanco

Branch No. (Agência) 0300

Current Account No. c/c 105.182-4



Volunteers, from left to right: Abigail Fernandes de Carvalho Pinto, Carlos de Carvalho Silva, Maria João Proença Pereira and Anete Lopes

INCA volunteer

The National Cancer Institute also counts on the area of Voluntary Actions, in the form of *INCAvoluntário* (INCA volunteer), which plans and coordinates the activities of the Institute's volunteers. Today there are around 650 people who engage in educational, recreational, social integration and leisure-time activities, with a view to the well-being of patients and their kinfolk.

Among the actions of *INCAvoluntário* we should highlight the distribution of food baskets and transportation coupons for low-income patients. The Voluntary Actions area also lends out wheelchairs and nose spray devices (nebulizers), donates throw-away infant and geriatric diapers and

fosters humanization of hospital units. The objective of all these actions is to guarantee the quality of life of INCA users.

The Cancer Foundation supports the activities developed by *INCAvoluntário* by means of allocating human resources and financially managing the resources donated. Likewise, *INCAvoluntário* is a major partner of the Cancer Foundation in that it actively collaborates in the fundraising campaigns undertaken on behalf of INCA. Both institutions contribute to strengthen the bonds between the Institute and society that, through the volunteer work and donations, directly benefit patients and their family members.



Dr. Emília Rebelo, supervisor of INCAVoluntários (center) and employees



INCA food basket volunteer



TRANSPARENCY AND SUSTAINABILITY

Experience in managing projects is one of the principal characteristics of the Cancer Foundation regularly highlighted by its partners. This experience and reputation has been made possible because the institution manages to fuse transparency and honesty in allocating resources to the speed with which it carries out the proposed actions. The responsible management developed by the entity's administrators ensures its success.

In 2008 the Cancer Foundation consolidated the process of modernizing its administration, initiated the previous year, in order to guarantee sustainability. Based on a thorough-going appraisal, the managers of the entity perceived that it was necessary to make the Foundation better known among society at large, heightening the visibility of the projects managed by the Foundation. With this, it is expected to expand the number of partners and donors.

One of the challenges solved by the managers of the Cancer Foundation was overcoming the financial imbalance caused by the cut in the onlending of funds by the Single Healthcare System (SUS) and expenditures on personnel.

To preserve its financial capacity to continue supporting the National Cancer Institute (INCA), the Cancer Foundation entered into a service agreement with INCA, covering the areas of research, institutional, scientific and technological instruction and development, all with defined actions and set targets.

Quiz

9. THE CANCER FOUNDATION TODAY IS...

- A () the largest support foundation in the public-oriented health area in Brazil.
- B () the INCA research institute.
- C () the principal health-linked foundation in the entire world.
- D () none of the above.



Jorge Alexandre Cruz, Cancer Foundation superintendent



RESULTS-ORIENTED TECHNOLOGY

Swift access to quality information is essential to decision making in this day and age. This premise serves as the basis for the IT projects undertaken by the Foundation for the National Cancer Institute (INCA). We have put into place systems that consolidate the existing data on the disease and provide support for drawing up the National Cancer Prevention and Control Policy. There are also initiatives that aim at improving assistance so as to enhance the speed with which patient needs are met.

Among the main investments carried out are purchase of the Business Intelligence (BI) software program and acquisition of rights to Absolute, a hospital administration system used by INCA since 2000. This is of strategic importance for improving consolidation of Brazilian national information about cancer. With the expansion of the Oncology Attention Network, this software can be installed

in hospitals that are not automated, contributing to making data on incidence of the disease more uniform. This investment will make it possible to bring the INCA automation model to other Highly Complex Oncology Centers (CACONs).

On the other hand, the BI software program features high processing capacity, which permits organization, cross-checking and dynamic presentation of data, facilitating extraction and analysis. The Center for Coordination of Prevention and Vigilance (CONPREV), for example, has benefited from this tool by formatting the information according to the view of epidemiologists, showing the incidence of cancer in the nation based on patient profiles. The software program is also used in other INCA areas, such as Administration and Assistance, and these analyses permit rationalization of management.

SYSTEMS FOR CONSOLIDATION OF INFORMATION

In 2008 the Technology area began development of three projects aimed at helping managers in the building up of public policies. One of them is Basepop-Web, scheduled for readiness in July 2009. It permits real-time updating of information about cancer throughout Brazil and will improve the analysis of the incidence of cancer, increasing control and making more precise evaluations possible.

Another project being developed is management of quality in mammography exams. The program is aimed at joining together three systems used presently by INCA. With this integration, it will be possible to identify how many mammography scans are carried out in Brazil, where they are performed and who the professionals are that are issuing breast cancer

reports, as well as to measure the quality of the diagnoses. At present, in Brazil, breast cancer is the type that is the greatest cause of death among women. By having more information available on this deadly disease, it will be possible for health managers to better develop specific policies to control the problem.

In terms of studying bone marrow transplants, the highlight is the system for auto-

mation to monitor the clinical evolution of treatment and the survival of patients who undergo this type of surgery. The program will be integrated into the International Center for Blood & Marrow Transplant Research and the Register of Bone Marrow Receivers (Rereme). This will help to the extent that procedures adopted and succeeding with one patient in a determined profile can contribute to save more lives.



MOBILE TECHNOLOGY

The use of mobile technology to improve the services provided to cancer patients already is a reality at INCA. In 2008 the Cancer Foundation developed software that allows direct access to the INCA system via cell phone calls to the teams that provide home care for patients beyond normal therapeutic possibilities. The Mobile Project, as it is termed, facilitates the decision-making process for doctors and nurses who have access to all the information, in chronological order, in the patient's record book. This pioneering initiative is already being studied by other international entities.



REPORT OF INDEPENDENT ACCOUNTANTS

To the Board of Trustees, Governing Council and Audit Committee

Fundação Ary Frauzino para Pesquisa e Controle do Câncer – the Cancer Foundation

Rio de Janeiro – RJ

1. We have audited the accompanying balance sheet of *Fundação Ary Frauzino para Pesquisa e Controle do Câncer* – the Cancer Foundation as of December 31, 2008 and the related statements of deficit, changes in equity and cash flows for the year then ended. These financial statements are the responsibility of the Foundation's Management. Our responsibility is to express an opinion on the financial statements based on our audit.
2. Our audit was conducted in accordance with auditing standards generally accepted in Brazil, thus including: a) planning our work considering the materiality of balances, volume of transactions and the accounting and internal control systems of the Foundation; (b) determining on a test basis the evidence and records supporting the amounts and accounting information disclosed; and (c) evaluating the accounting policies and significant estimates made by Management, as well as appraising the presentation of the financial statements taken as a whole.
3. In our opinion, the financial statements referred to in paragraph 1 above present fairly, in all material respects, the financial position of *Fundação Ary Frauzino para Pesquisa e Controle do Câncer* – the Cancer Foundation as of December 31, 2008 and the results of its operations, the changes in its equity and its cash flows for the year then ended, in conformity with accounting principles generally accepted in Brazil.
4. Previously, we audited the financial statements of *Fundação Ary Frauzino para Pesquisa e Controle do Câncer* – the Cancer Foundation for the year ended December 31, 2007, encompassing

the balance sheet and statements of income, changes in equity and changes in financial position for that year, on which we issued an unqualified opinion dated April 8, 2008. As mentioned in Note 2 to the accompanying financial statements, accounting principles generally accepted in Brazil were altered as from January 1, 2008. The financial statements for the year ended December 31, 2007, presented together with the 2008 financial statements, were drawn up in accordance with accounting principles generally accepted in Brazil through December 31, 2007 and, as permitted by Technical Pronouncement No. CPC 13 – Initial Adoption of Law No. 11.638/2007 and Provisory Measure No. 449/2008, which was issued by the Brazilian Accounting Pronouncements Council, are not be represented with the adjustments that would be required for purposes of comparison between the years in question.

Rio de Janeiro, March 20, 2009

(Portuguese Original)

(Free English Version October 20, 2009)

Luiz Carlos de Carvalho

(Accountant registered with the São Paulo and Rio de Janeiro Chapters of the Brazilian Regional Accounting Council under No. CRC 1SP197193/0-6 "S" RJ)

BDO Trevisan Auditores Independentes

(Independent Accounting firm registered with the São Paulo and Rio de Janeiro Chapters of the Brazilian Regional Accounting Council under No. CRC 2SP013439/0-5 "S" RJ)

Marcelo Nogueira de Andrade

Director

(Registered with the Rio de Janeiro Chapter of the Brazilian Regional Accounting Council under No. CRC RJ-086312/0-6)

TABLE 1

BALANCE SHEETS AS OF DECEMBER 31 (Expressed in thousands of Reais)

ASSETS	2008	2007
CURRENT ASSETS		(Reclassified)
Cash and banks	47	21
Equity fund investments	91,965	112,655
Funds earmarked for programs	13,136	12,880
Accounts receivable	5,926	4,848
Advances	1,189	754
Prepaid expenses	126	25
Government arrangements	4,841	3,954
Other credits receivable	109	274
Total Current Assets	117,339	135,411
NONCURRENT ASSETS		
Long-term assets	27	27
Other credits	27	27
Permanent assets	11,887	9,035
Property and equipment	8,726	9,023
Intangible assets	3,161	12
Total noncurrent assets	11,914	9,062
TOTAL ASSETS	129,253	144,473
LIABILITIES AND EQUITY	2008	2007
CURRENT LIABILITIES		(Reclassified)
Suppliers	3,584	2,130
Taxes and obligations payable	1,644	1,524
Payroll accruals	5,682	5,585
Government arrangements	4,841	3,954
Projects to be executed	3,025	5,299
Other accounts payable	207	119
Other credits	3	104
Total current liabilities	18,986	18,715
NONCURRENT LIABILITIES		
Suppliers	640	
Projects to be executed	3,565	3,349
Provision for contingencies	298	151
Other obligations	46	67
Total noncurrent liabilities	4,549	3,567
EQUITY		
Equity	57,167	69,588
Statutory reserve fund	65,867	65,867
Retained earnings (deficit)	[17,316]	[13,264]
Total equity	105,718	122,191
TOTAL LIABILITIES AND EQUITY	129,253	144,473

TABLE 2

STATEMENT OF DEFICITS FOR THE YEARS ENDED DECEMBER 31 (Expressed in thousands of Reais)

	2008	2007 (Reclassified)
MAINTENANCE OPERATING REVENUES		
Outpatient services	13,264	18,380
Hospitalizations	13,482	14,704
Highly complex procedures	24,936	33,738
Cuts by the Municipal Health Secretariat	(12,462)	(21,117)
	39,220	45,705
Services rendered	18,021	
Private arrangements	82	110
Research contracts	2,400	4,478
Courses and seminars	401	375
Donations	984	960
Other revenues	84	47
	21,972	5,970
	61,192	51,675
MAINTENANCE OPERATING EXPENSES		
Education	(1,650)	(1,682)
Assistance	(55,252)	(53,297)
Research	(3,710)	(3,587)
Prevention and vigilance	(3,993)	(3,646)
Institutional and human development	(16,318)	(13,920)
Administration	(6,041)	(3,553)
	(86,964)	(79,685)
OTHER OPERATING EXPENSES AND REVENUES	(414)	60
OPERATING DEFICIT	(26,186)	(27,950)
NET FINANCIAL INCOME	8,870	14,207
DEFICIT FOR THE YEAR	(17,316)	(13,743)

TABLE 3

STATEMENT OF CHANGES IN EQUITY (Expressed in thousands of Reais)

	EQUITY	STATUTORY RESERVE FUND	RETAINED EARNINGS (DEFICIT)	TOTAL
AS OF DECEMBER 31, 2006	76,544	65,867	(7,720)	134,691
Absorption of 2006 deficit	(6,889)		6,889	
Absorption of prior years' justments	(831)		831	
Prior years' adjustments			479	479
Donations of property	764			764
Deficit for the year			(13,743)	(13,743)
AS OF DECEMBER 31, 2007	69,588	65,867	(13,264)	122,191
AS OF DECEMBER 31, 2007	69,588	65,867	(13,264)	122,191
Absorption of deficit	(13,264)		13,264	
Donations of property	843			843
Deficit for the year			(17,316)	(17,316)
AS OF DECEMBER 31, 2008	57,167	65,867	(17,316)	105,718



TABLE 4

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED DECEMBER 31 (Expressed in thousands of Reais)

	2008
CASH FLOW FROM OPERATIONS:	
Deficit for the year	(17,316)
Adjustments to reconcile results for the year with funds provided by operating activities:	
Depreciation and amortization	1,738
Write-off of fixed assets	414
Decrease (increase) in assets:	
Trade accounts receivable	(1,078)
Advances	(435)
Reduction in fixed assets - Swiss Bridge Foundation	449
Prepaid expenses	(101)
Other credits receivable	165
Increase (decrease) in liabilities:	
Suppliers	2,094
Taxes and obligations payable	120
Payroll accruals	97
Projects to be executed	(2,058)
Provision (reversal) for losses and contingencies	147
Other liabilities	(34)
NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES	(15,798)
CASH FLOWS FROM INVESTING ACTIVITIES	
Acquisition of fixed assets	(1,480)
Acquisition of intangible assets	(3,130)
NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES	(4,610)
DECREASE IN CASH AND CASH EQUIVALENTS	(20,408)
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR	125,556
CASH AND CASH EQUIVALENTS AT END OF YEAR	105,148
DECREASE IN CASH AND CASH EQUIVALENTS	(20,408)

QUADRO 5**STATEMENT OF CHANGES IN FINANCIAL POSITION FOR THE YEAR ENDED DECEMBER 31**
(Expressed in thousands of Reais)

	2007
	(Reclassified)
SOURCES OF FUNDS	
Deposit in court	33
Reduction in fixed assets - Swiss Bridge Foundation	206
Write-offs of permanent assets	15
Increase in long-term liabilities	705
Donations of property	764
Total sources of funds	1,723
USES OF FUNDS	
Provided by operations:	
Deficit for the year	13,743
Prior years' adjustment	(479)
Expenses not affecting net working capital:	
Depreciation and amortization	(1,690)
	11,574
Addition to permanent assets	2,389
Total uses of funds	13,963
DECREASE IN NET WORKING CAPITAL	(12,240)
SUMMARY OF CHANGES IN NET WORKING CAPITAL	
At beginning of year	128,936
At end of year	116,696
DECREASE IN NET WORKING CAPITAL	(12,240)

Adriana Cascareja Soares

Accountant registered with the Rio de Janeiro Chapter of the Brazilian Regional Accounting Council under N° CRC-RJ 0787 97/O-0

The accompanying notes (not presented herein) are an integral part of the financial statements and are available to interested parties at our website www.fundacaodocancer.org.br



Brian Melo dos Santos, patient

THE CANCER FOUNDATION

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