

Support Constituents Battling Lung Cancer

Sign the FY22 Lung Cancer Research Appropriations Letter

Deadline: April 23

Dear Colleague,

Please join me in support of \$26M in federal funding for lung cancer research and preventive services to help improve the lives of those battling this disease, by signing the FY 2022 Lung Cancer Appropriations Letter. The Lung Cancer Research Program (LCRP) within the Defense Appropriation's Congressionally Directed Medical Research Program (CDMRP) has been funded below its original \$20M allocation since FY 2010, until the restoration level of \$20M in last year's budget. The 11 years of underfunding severely limited investments in research for our nation's leading cause of cancer-related deaths, and this increase in funding will make up for years of shortfalls.

Lung cancer is the leading cause of cancer deaths nationwide, claiming nearly 150,000 lives each year. The vast majority of those diagnosed have never smoked or have quit smoking for over a decade prior to being diagnosed. Although lung cancer often has no symptoms until it has progressed, research indicates it responds well to treatment options if detected early. Numerous studies show that veterans and young women are particularly impacted with little understanding as to why, making investments in research that much more needed. Currently, lung cancer's five-year survival rate is just above 20 percent and stands as the least funded in terms of research dollars per death of all major cancers.

The FY 2022 request seeks to address this problem by advocating for continued increased funding to the LCRP. Further, we respectfully request the L-HHS Appropriations Subcommittee to include Report Language that encourages the NIH and its Office of Disease Prevention (ODP) to continue to fund important research across the areas of prevention, early detection, and treatment including: molecular underpinnings of lung cancer, uptake of comprehensive biomarker testing, and development of new targeted and immune-based therapies to broaden the base of lung cancer survivors across different disease types, including Small Cell Lung Cancer (SCLC).

To add your name to this letter or if you have any questions, please contact Ted Steinberg (Ted.Steinberg@mail.house.gov) with Congressman Boyle by **COB Friday, April 23rd**.

Sincerely,



Brendan F. Boyle
Member of Congress

April 28, 2021

The Honorable Rosa DeLauro
Chair
Committee on Appropriations
H-307 Capitol Building
Washington, DC 20515

The Honorable Kay Granger
Ranking Member
Committee on Appropriations
1016 Longworth HOB
Washington, DC 20515

The Honorable Betty McCollum
Chair
Subcommittee on Defense
Committee on Appropriations
H-405 Capitol Building
Washington, DC 20515

The Honorable Ken Calvert
Ranking Member
Subcommittee on Defense
Committee on Appropriations
1016 Longworth HOB
Washington, DC 20515

The Honorable Rosa DeLauro
Chair
House Appropriations Subcommittee
on Labor, Health and Human Services,
Education, and Related Agencies
2358 Rayburn HOB
Washington, DC 20515

The Honorable Tom Cole
Ranking Member
House Appropriations Subcommittee
on Labor, Health and Human Services,
Education, and Related Agencies
1016 Longworth HOB
Washington, DC 20515

Dear Chairs and Ranking Members:

As you consider Fiscal Year (FY) 2022 appropriations bills, we write to thank you for your long-standing support of funding for medical research programs, specifically research that pertains to lung cancer initiatives. We respectfully request your continued support for the critical and highly successful defense health research programs, funded through the Congressionally Directed Medical Research Programs (CDMRP). Specifically, we urge you to provide \$26 million in funding in the FY 2022 Defense Appropriations bill for the Lung Cancer Research Program (LCRP). LCRP has been funded below its original \$20 million allocation since FY 2010, until the restoration level of \$20M in last year's budget, which has hindered progress in treatment, care, and research of this deadly form of cancer. This increase in funding will make up for years of shortfalls. We also urge you to include important language in the L-HHS Appropriations bill to increase survivorship and to broaden the base of lung cancer survivors across different disease types.

Lung Cancer Research Program (LCRP)

As you may know, lung cancer is the leading cause of death among men and women nationwide. Lung cancer has a 5-year survival rate just above 20% despite advancements in current lung cancer treatments. Furthermore, in 2021 an estimated 235,760 new cases of lung cancer are expected, and an estimated 131,880 lives will be lost due to lung cancer. Additionally, as numerous studies over the years published by the Institute of Medicine, Cancer, Military

Medicine, Chest and others have shown that lung cancer incidence and mortality rates; due to much higher smoking rates and exposures to known carcinogens during active duty are an estimated 25% – 30% higher in the military than in civilian populations.

With a vision to eradicate deaths and better the health and welfare of service members, veterans, and the American public, we are proud to report new research highlights for the Lung Cancer Research Program (LCRP). Several LCRP-funded projects have led to active clinical trials testing new therapies for lung cancer, including new immunotherapies and novel types of precision medicines for patients with specific genetic changes in their lung cancer. The LCRP is an important part of the federal research portfolio and the only one of its kind that looks at the pathology of how lung cancer develops, how to treat it, and how to prevent its recurrence. To date, lung cancer research remains severely underfunded and we ask you to consider allocating \$26 million to help address the high rates of lung cancer prevalence, morbidity, and mortality.

While we recognize this is a challenging fiscal environment, we ask that you continue to consider lung cancer research an urgent priority within CDMRP as the disease continues to uniquely and significantly affect the military population at rates higher than their civilian counterparts.

Language Request: Lung Cancer Screening & Early Detection Awareness

The recent decline in cancer mortality that has been fueled by progress in lung cancer is directly attributable to NIH-funded research. Ongoing understanding of the molecular underpinnings of lung cancer and identification of additional oncogene driver subsets has led to rapid development of new targeted therapies, which together with efforts to broaden uptake of comprehensive biomarker testing, has the potential to deliver the promise of precision medicine to more patients than ever before. **We encourage the NIH and its Office of Disease Prevention (ODP) to continue to fund important research across each of these areas, to broaden the base of lung cancer survivors across different disease types, including Small Cell Lung Cancer (SCLC).**

Again, we thank you for your continued support for lung cancer research within your respective subcommittees. If you have any additional questions about the Lung Cancer Research Program, please contact Ted Steinberg (Ted.Steinberg@mail.house.gov) in Rep Boyle's Office at 5-6111.

Sincerely,

A handwritten signature in black ink, reading "Brendan F. Boyle". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Brendan F. Boyle
Member of Congress