April 1, 2022

Dear Member of Congress,

As organizations representing lung cancer patients, veterans, caregivers, doctors and researchers, **we urge you to support $60 million for the Lung Cancer Research Program** within the Congressionally Directed Medical Research Program (CDMRP) in the Fiscal Year 2023 Defense appropriations bill.

We were deeply frustrated to learn that **in FY21, because of a lack of funding, the Lung Cancer Research Program was forced to reject 82 out of 119 research proposals rated excellent or outstanding by reviewers (70%)**. This represents 82 missed opportunities to advance novel, desperately needed technologies and treatments to fight America's top cancer killer. A $60 million appropriation could have funded all of these high-quality proposals. We ask you to support lung cancer patients by making this critical funding commitment now.

The past two decades of medical research have brought new hope to the approximately 235,000 Americans diagnosed with lung cancer each year.[1] Diagnostic, surgical and therapeutic innovations have increased the five-year lung cancer survival rate by 14% to 23.7% over the past five years. However, 23.7% lags significantly behind almost every other major cancer.[2] Without a cure, lung cancer patients, most of whom are diagnosed at advanced stages, confront the terrible reality that their current cancer therapies will inevitably fail. Lung cancer patients' survival depends on significantly more research into everything from early detection to treatments that combat resistance to existing therapeutics.

Despite many scientific advances, lung cancer remains the country's leading cause of cancer deaths among women (21%) and men (21%). Each day, more than 350 people die of lung cancer, which is more than those who die of breast, prostate and pancreatic cancers combined. It is 2.5 times more than those who die of colorectal cancer, the second leading cause of cancer deaths.[i]

Veterans are at significantly greater risk for lung cancer and are diagnosed at higher rates than the general population.[3] The Veterans Health Administration (VHA) estimates that 900,000 veterans are at risk for lung cancer due to age, significantly higher rates of smoking—particularly among those deployed—and toxic exposures during military service and after.[4]

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[1] American Cancer Statistics 2022, Journal of the American Cancer Society, Volume 72, Number 1, January/February 2022.
[2] State of Lung Cancer 2021, American Lung Association, https://www.lung.org/research/state-of-lung-cancer/key-findings
[3] Based on Lullig, Sims et al. Cancer Incidence Among Patients of the U.S. Veterans Affairs Health Care System: 2010. Updated July 2017.
[4]Department of Veterans Affairs, https://www.va.gov/HEALTHPARTNERSHIPS/docs/Go2_FactSheet.pdf

Even though lung cancer has the highest mortality rate of all cancers, is the second most prevalent cancer among VHA patients (18%), and has by far the most VHA patients (58%) who are diagnosed at stages three or four,[iii] it received only 3.46% ($20 million) of the $577.5 million in CDMRP cancer funds in FY22, less than every named CDMRP cancer except one.

CDMRP's Lung Cancer Research Program accelerates high impact, translational research, making it essential to lung cancer patients who are in a race against the clock to find novel, life-saving treatments. While we ask for a major increase for the Lung Cancer Research Program, we strongly support raising the overall federal funding level for all cancer programs. We don't want new funding of any individual cancer to come at the expense of any other cancer.

With its history of bipartisan support for NCI, CURES, CURES 2.0, ARPA-H and the Cancer Moonshot, we urge Congress to appropriate sixty million dollars for LCRP to better reflect and respect lung cancer's real and devastating impact on service members, veterans, and all Americans. Sixty million dollars is a critical, overdue step toward addressing the unmatched burden lung cancer has inflicted upon too many Americans, their families and their communities. We have been at the back of the line for too long.

Thank you for your thoughtful consideration,

A Breath of Hope Lung Foundation
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ALK Fusion
ALK Positive
American Association of Radon Scientists and Technologists Foundation (AARST Foundation)
American College of Radiology (ACR)
American Society for Radiation Oncology (ASTRO)
Association of Community Cancer Centers (ACCC)
Biomarker Collaborative
BRAF Bombers
Breath of Hope Kentucky
Breath of Hope Ohio
Burn Pits 360 Veterans
Cancer Survivors Against Radon (CanSAR)
Caring Ambassadors
Cease Fire Campaign
Chris Draft Family Foundation
Citizens for Radioactive Radon Reduction
Clifton F. Mountain Foundation for Education & Research in Lung Cancer
EGFR Resisters
Eon
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Georgia Center for Oncology Research and Education (GeorgiaCORE)
Georgia Lung Cancer Round Table
Georgia Society of Clinical Oncology (GASCO)
GO2 Foundation for Lung Cancer
International Association for the Study of Lung Cancer (IASLC)
International Cancer Advocacy Network (ICAN)
Kentucky Academy of Family Physicians
Kentucky Cancer Foundation
Kentucky Cancer Link
Kentucky Cancer Program
Kentucky Health Collaborative
Kentucky LEADS Collaborative
Kentucky Medical Association
Kentucky Society of Clinical Oncology
KRAS Kickers
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Lung Cancer Connection
Lung Cancer Foundation of America
Lung Cancer Initiative
Lung Cancer Research Foundation
LUNGevity Foundation
LungLife
MET Crusaders
Prevent Cancer Foundation
Rescue Lung Society
Respiratory Health Association
RET Renegades
Rexanna's Foundation
Ride Hard Breathe Easy
Society of Thoracic Surgeons
St. Elizabeth Healthcare
Tennessee Academy of Family Physicians
The Patient Story
The ROS1ders
The White Ribbon Project
University of Hawaii Cancer Center
Upstage Lung Cancer


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ACCC
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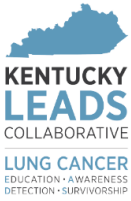
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