



## **Fiscal Year 2021 Funding Request**

**Make funding for cancer research and prevention a top priority at NIH, NCI and CDC!**

Much progress is being made in the fight against cancer. The U.S. cancer death rate declined by 29 percent from 1991 to 2017, including a 2.2 percent drop from 2016 to 2017, the largest single-year drop in cancer mortality ever reported. Yet, cancer is still the nation's second-leading cause of death. This year, over 1.8 million Americans will be diagnosed with cancer, and more than 600,000 people – 1,650 a day – will die from it.

One Voice Against Cancer (OVAC) is grateful to Congress for providing five consecutive years of major funding increases for the National Institutes of Health (NIH) and the National Cancer Institute (NCI). Thanks to bipartisan, bicameral support, medical research at NIH and cancer research at NCI are back on the path of promise and discovery. We are especially grateful that Congress dedicated new funding in FY 2020 to address a precipitous decline in the success rate for research project grant (RPG) applications at NCI.

The NCI is experiencing a demand for research funding that is far beyond that of any other Institute or Center (IC). Between FY 2013 and FY 2018, the number of R01 (investigator-initiated) grant applications to NCI rose by 45.9 percent. For all other ICs during that time, the number of R01 applications rose by just 4.9 percent.

As a result of this extraordinary demand from the scientific community, the RPG success rate at NCI dropped from 13.7 percent in FY 2013 to 11.3 percent in FY 2018. This is a situation unique to NCI, at a time when cancer researchers are making historic advances in new treatments and therapies. The success rate for NIH overall during that same period rose from 16.8 percent to 20.2 percent.

We thank Congress for addressing this issue in FY 2020 Labor, Health and Human Services, and Education (Labor-HHS) Appropriations bill, but sustained investments will be required to improve the success rate at NCI and maintain the current pace of progress in cancer research. OVAC recommends at least \$44.7 billion for NIH in FY 2021, a \$3 billion increase over the FY 2020 level. For NCI, we recommend \$6.9 billion, which is both the amount proposed by NCI in its FY 2021 professional judgment budget and the level needed to provide an increase for NCI which is proportional to that of NIH overall.

Preventing cancer is also critically important. About half of the 600,000 cancer deaths that will occur this year could be averted through the application of existing cancer control interventions. The Centers for Disease Control and Prevention's (CDC's) Division of Cancer Prevention and Control (DCPC) provides key resources to states and communities to prevent cancer. Although we have seen declines in the cancer death rate overall, progress is slowing for cancers that are amenable to early detection through screening (e.g., breast cancer, prostate cancer, and colorectal cancer), and substantial racial and geographic disparities persist for highly preventable cancers, such as those of the cervix and lung. Increased investment in the equitable application of existing cancer control interventions as spearheaded by CDC's DCPC will accelerate progress in the fight against cancer.

Cancer registries are vital in identifying emerging trends, investigating disparities, understanding patterns of care, and evaluating the impact of early detection and treatment advances on cancer incidence and outcomes.

We are grateful that Congress prioritized cancer registries in CDC's new data initiative, created in the FY 2020 Labor-HHS appropriations bill. However, there is currently a data lag of 24 months within the system. With new resources, the CDC could create a cloud-based system that would record data in real time, greatly enhancing the ability of states to develop targeted approaches to preventing and treating cancer.

Therefore, OVAC urges Congress to prioritize cancer in FY 2021 by:

1. Increasing funding for NIH by at least \$3 billion, for a total of \$44.7 billion;
2. Providing at least \$6.9 billion for NCI;
3. Providing at least \$559 million for CDC's cancer control and prevention programs, including \$70 million for the National Cancer Registry Program.