



## Virtual Lobby Day Requests March 10, 2021

### Summary:

For over 20 years, One Voice Against Cancer (OVAC) has united the nation's cancer community to advocate for long-term, sustained funding increases for cancer research and prevention. We channel the passions of millions of Americans who have been affected by cancer.

2021 is the 50<sup>th</sup> Anniversary of the National Cancer Act and it provides a unique opportunity to renew the country's commitment and bring a new urgency to the fight against cancer. Although the nation has made much progress against cancer in the past half-century, more funding is desperately needed to meet the overwhelming demand for research grants at the National Cancer Institute (NCI), address cancer health disparities, and mitigate the impacts of COVID-19 on cancer clinical trials and patient screenings and treatment.

### One Voice Against Cancer (OVAC) is urging Congress to:

1. Support **\$10 billion** for the National Institutes of Health (NIH) to jumpstart COVID-19 impacted research in the next COVID-19 recovery package.
2. Support at least **\$46.111 billion** (a **\$3.177 billion** increase) for NIH in FY2022 including **\$7.609 billion** for cancer research at the National Cancer Institute (NCI).
3. Support **\$559 million** for the Centers of Disease Control and Prevention's (CDC) cancer programs in the FY2022 funding bill.

### ASK #1: COVID-19's impact on cancer & clinical trials

The impact of COVID-19 on the cancer research ecosystem is severe, and relief is needed to address both short- and long-term impacts on labs, researchers, and clinical trials. Cancer clinical trials play a pivotal role in advancing cancer care and treatment. The results of clinical trials and the broader drug development process can take years to realize, meaning that, without aggressive measures to mitigate the impact, the full effect of these disruptions on therapeutic innovation in cancer care is likely to be felt for years to come.

During the first several months of the pandemic, accrual to cancer clinical trials plummeted across the country, and while adaptations to allow telemedicine visits and other adjustments have allowed sites to begin to recover, over-all harm remains. The unforeseen costs associated with the pandemic have

been a substantial burden to an already overburdened medical system. NCI-designated cancer centers across the country report that cancer clinical trial accrual—the number of individuals enrolling in cancer clinical trials—is down by about half from a year ago.

**Substantial costs have been incurred during the shut-down, and there will be significant costs for the ramp-up of research activities and clinical trials. We urge Congress to include at least \$10 billion to help research and clinical trials to get back on track.**

### **ASK #2: Increase Funding for NIH in FY2022 including an increase for NCI**

Congressional support and commitment to cancer research and prevention is more crucial now than ever before. For the last 50 years, every major medical breakthrough in cancer can be traced back to the NIH and the NCI. We know that investment in research at the NIH and NCI leads to lives saved.

Our nation's fast-growing cancer burden demands sustained increases in federal investment, even in moments of crisis. Even before COVID-19, a historic number of possible cancer breakthroughs were being left on the shelf. Cancer research is one of science's most dynamic areas-yet NCI is unable to fund hundreds of high-quality research applications every year. Between FY 2013 and FY 2019, the number of R01 grant applications to NCI rose by **50.6 percent**. For all other ICs during that time, the number of R01 applications rose by just **5.6 percent**.

Without continued increases in funding, we risk losing a generation of young investigators, slowing progress and threatening American competitiveness. To maintain the pace of progress and discovery, Congress must provide long-term, sustained, funding increases.

**We urge Congress to include at least \$46.111 billion for NIH in FY 2022, a \$3.177 billion increase, which reflects a meaningful growth of 5 percent plus 2.4 percent to keep pace with the biomedical research and development price index (BRDPI). For NCI, we recommend \$7.609 billion, the amount proposed by NCI in its FY 2022 professional judgment budget.**

### **ASK #3: Increase Funding for CDC's cancer programs**

Preventing cancer is also critically important. About half of the over 600,000 cancer deaths that will occur this year could be averted through the application of existing cancer control interventions. Access to potentially lifesaving screenings is not always equitable, creating significant disparities in cancer outcomes. The consequence of such disparities is that cancer is more often diagnosed at later stages when options for treatment may be limited and the odds for survival are lower.

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 by ensuring that at-risk, low-income communities have access to vital cancer prevention programs.

COVID-19's impact on screening and the early-detection of cancer will only exacerbate current disparities. Additionally, job losses resulting from the pandemic have left many Americans without health insurance, increasing the need for robust cancer screening programs at the CDC.

Addressing the backlog of cancer screenings for those without adequate health coverage will place a new burden on existing cancer screening programs, which have long been underfunded. CDC's programs help ensure that Americans have options for cancer screening regardless of income or insurance status. 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.

**We urge Congress to include \$559 million for the Centers of Disease Control and Prevention cancer programs in FY 2022.**