Support Robust Funding for Cancer Research

OVERVIEW
Research funded by the National Cancer Institute (NCI) has played a role in every major advance related to cancer prevention, detection and treatment, and has contributed to breakthroughs for many other diseases. ASCO thanks Congress for making the National Institutes of Health (NIH) a priority in the face of difficult budget decisions, by providing them with a $2 billion increase in FY 2016. However, stagnant funding over the last decade has still left the NIH with a significant decrease in purchasing power. Bipartisan recognition of this funding dearth, including the House passed 21st Century Cures Act (H.R. 6), has created opportunity for funding levels to match with the opportunity of today’s precision medicine.

BACKGROUND
Fiscal Year (FY) 2017 Appropriations
Congress has the opportunity to continue its work to improve federal funding levels for cancer research through its annual Fiscal Year (FY) 2017 appropriations process. This is critical because:

- **Erosion of the cancer research infrastructure will have serious long-term consequences.** Once gone, it will take years to rebuild and critical opportunities to advance patient care will be lost.

- **Funding must keep pace with opportunity and need.** We are in a time of unprecedented opportunity because of our growing understanding of cancer biology. It is important that we leverage our knowledge to increase treatment opportunities for patients. Congress must protect the investment in NIH and NCI by ensuring that clinical research is adequately supported.

- **Funding cancer research ensures breakthroughs in cancer care.** Breakthroughs in cancer treatment cannot emerge without consistent and predictable investment at the federal level over the course of several years. Major advances in cancer treatment will not occur if funding remains flat, or if funding is reduced.

- **Sustained growth in the national investment in cancer research is needed.** Finding a cure for cancer is a marathon not a sprint. Critical research is leading to promising therapies.

- **Biomedical research is an economic stimulus.** NIH and NCI should be given the highest priority possible in funding. Many researchers, lab technicians, assistants, and other medical professionals enjoy careers in the biomedical field, thanks to funds from NIH. Local communities also benefit from having research institutions affecting their economies.

- **Cancer research leads to advances in combating other diseases.** Patients with heart disease, diabetes, osteoporosis, autism, HIV, and other illnesses have benefited from cancer research.
Cancer Moonshot Initiative
Current funding levels are not enough to meet the promise of today’s research. A significant boost in funding at the NCI is needed to meet the goals of the Cancer Moonshot. This injection of funding should be used to invest in pragmatic trials, which would be designed to evaluate the efficacy of an intervention in real-world conditions and to produce results that are generalizable to routine clinical care. Industry funded only nine pragmatic clinical trials between 1996 and 2010 – but funded thousands of traditional efficacy trials during that same time period. Increasing public investment in pragmatic, multi-stakeholder clinical trials that are more integrated with existing clinical practice standards would bring immediate gains. This investment would enable more clinicians to be familiar with the research process and expand patients’ participation in clinical research.

21st Century Cures
ASCO applauds the House passage of H.R. 6, the 21st Century Cures Act. Many provisions within the legislation will help spur research at the NIH. We thank the House for including $10 billion in mandatory funding over the next five years through the NIH Innovation Fund. As compromise legislation moves forward, it should also include monies to support the agencies’ new authorities.

RECOMMENDATION
ASCO calls on Congress to continue to build on critical investments at the NIH and the NCI with predictable and sustainable future funding increases through the budget process and urges research funding to be focused on:

- **Funding the federal clinical trial system to translate basic discoveries into benefits for patients.** Federally funded research helps us understand how to use new cancer treatments to improve care and answer comparative effectiveness questions by comparing one treatment to another and combining treatment approaches, e.g., surgery, radiation, and chemotherapy.

- **Enhancing investigator support and training.** NIH provides funding to ensure development of the next generation of investigators, which ensures the best minds of clinical and translational research are in the United States.

- **Supporting infrastructure linking registries, biorepositories, and electronic health records.** Private institutions and community-based networks are investing in electronic infrastructure to enable data sharing, linking clinical and research information. ASCO and NCI are creating the standards to enable information sharing across all settings in which oncology care is delivered – academic centers, community hospitals, and private practices.

REQUEST

**ASCO’s FY17 Budget Request:** $34.1 billion for the NIH including a commensurate level increase for the NCI.

**Cancer Research Funding Boost in Cures:** Congress should retain the $10 billion in mandatory funding over the next five years passed by the House for the NIH Innovation Fund in H.R. 6, the 21st Century Cures Act. Congress should include a boost of funding for the NCI specifically targeted at accomplishing the goals of the Cancer Moonshot Initiative.