## Congress of the United States House of Representatives

Washington, DC 20515

April 1, 2019

The Honorable Peter J. Visclosky Chairman, Subcommittee on Defense Committee on Appropriations U.S. House of Representatives Washington, DC 20515 The Honorable Ken Calvert Ranking Member, Subcommittee on Defense Committee on Appropriations U.S. House of Representatives Washington, DC 20515

Dear Chairman Visclosky and Ranking Member Calvert:

On behalf of the thousands of Americans touched each year by ovarian cancer, we are writing to express our strong support for maintaining and increasing the funding for the Department of Defense Ovarian Cancer Research Program (OCRP). We respectfully request that the House Appropriations Subcommittee on Defense provide \$35 million for the OCRP in Fiscal Year 2020.

One in 75 women will develop ovarian cancer, and fewer than half will survive for five years. A full quarter will die within the first year of diagnosis. It is expected that 22,200 women will be diagnosed with this lethal disease this year. More than 14,000 women die annually from ovarian cancer and unfortunately this statistic has not improved.

Of the 850,000 female service members, wives of active duty military and adult daughters of active duty military, approximately 11,800 will be diagnosed with ovarian cancer over the course of their lifetimes. With no reliable early detection methods or screening tests for ovarian cancer, surgery is the only method for diagnosis, which can be very disruptive in terms of military readiness. From the standpoint of individual service members confronted with a diagnosis of this dreaded and often deadly disease in themselves or family members, the personal, emotional and financial effects can be devastating.

The cost of ovarian cancer to our military is great, not only in terms of troop readiness, but also in terms of ongoing healthcare costs. Treating these patients for ovarian cancer over their lifetime could cost TRICARE an estimated \$971.2 million.<sup>3</sup> The greatest cost of all is the emotional impact of this devastating disease on military personnel and their families/loved ones.

http://www.militaryonesource.mil/12038/MOS/Reports/2012\_Demographics\_Report.pdf.

<sup>&</sup>lt;sup>1</sup> Military Demographics for 2012. Available here:

<sup>&</sup>lt;sup>2</sup> The lifetime risk of a women developing ovarian cancer is 1.4% according to the SEER Fact Sheet available here: http://seer.cancer.gov/statfacts/html/ovary.html.

<sup>&</sup>lt;sup>3</sup> The average cost of frontline ovarian cancer therapy is \$82,000, per the National Institutes of Health. http://costprojections.cancer.gov/annual.costs.html

The OCRP supports high-impact innovative research that promotes readiness for military members and their families and benefits the overall health of citizens of the United States and others around the world. The benefits of this research are expansive.

The OCRP continues to discover significant breakthroughs in our understanding of the precursor lesion/stem cell, microenvironment (including the role of the immune system in the development and treatment opportunities for ovarian cancer), pathogenesis, and progression of all types of ovarian cancer, including rare subtypes. The program is currently developing and/or improving performance and reliability of screening, diagnostic approaches, and treatments. In doing so, the program is investigating tumor response to therapy including tumor survival, dormancy, cell death, clonal evolution, resistance, and tumor heterogeneity.

While the information generated by OCRP research will impact the screening, detection, and treatment of ovarian cancer, it also has generalizable applications to other essential areas of scientific research such as the identification of substances in a person's blood, the development of better vaccines, and a clearer understanding as to why cells mutate when exposed to certain conditions. This knowledge can be used by all scientists, including those looking to develop and protect our military from various biomedical threats. The strategic partnerships fostered by the OCRP and our military, patients, clinicians, and scientists are accelerating discovery.

While we recognize that your Subcommittee has the difficult job of setting priorities among the many needs of our nation, the OCRP has a record of success in recruiting and supporting young investigators who work to improve prevention, early diagnosis, and survival rates from ovarian cancer. The OCRP is making a difference in the lives of millions of Americans, including our military and their families and will continue to do so with your ongoing support.

Thank you again for your attention to this request.

Sincerely,

Rosa L. DeLauro

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Member of Congress

Gwen Moore

Member of Congress

Sean P. Duffy

Julia Brownley

Member of Congress

Donald M. Payne, Jr.

Member of Congress

David Cicilline

Member of Congress

Eric Swalwell

Member of Congress

Brian Fitzpatric

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