



SAVE THE MEDICAL RESEARCH FUNDING THAT SAVES LIVES

Congress stood up for the tens of thousands of Americans who are diagnosed with pancreatic and other deadly cancers each year by passing the *Recalcitrant Cancer Research Act* in 2012. We can make real progress against these deadly diseases with effective research strategies, but only if we protect funding for the National Cancer Institute and National Institutes of Health.

**THEIR LIVES DEPEND ON MEDICAL RESEARCH.
DON'T LESSEN THEIR HOPE FOR SURVIVAL.**



PANCREATIC CANCER ACTION NETWORK®
KNOW IT. FIGHT IT. END IT.

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CONGRESS: YOU HAVE THE POWER TO SAVE LIVES BUT YOU MUST ACT NOW

LAST YEAR, YOU TOOK A STAND AGAINST THE NATION'S DEADLIEST CANCERS BY PASSING THE *RECALCITRANT CANCER RESEARCH ACT*.

This bill, which was enacted on January 2, 2013, calls on the National Cancer Institute (NCI) to develop scientific frameworks for pancreatic and lung cancer—frameworks that will help provide the strategic direction and guidance needed to make true progress against these deadly cancers. Under the bill, the NCI Director may also develop scientific frameworks for other deadly or recalcitrant cancers, defined as those with a five-year relative survival rate below 50 percent.

WHILE WE COMMEND CONGRESS FOR PASSING THIS LEGISLATION, YOUR WORK IS FAR FROM COMPLETE.

Pancreatic cancer is still the deadliest major cancer, with a five-year relative survival rate of just 6 percent and no early detection tools or effective treatments. Furthermore, pancreatic cancer is expected to move from the fourth- to the second-leading cause of cancer-related death in the U.S. by 2020.

PANCREATIC CANCER STATISTICS CALL FOR AGGRESSIVE MEASURES

NOW. We must invest in the research necessary to develop early detection and treatment tools before even more Americans fall victim to this deadly cancer. But NCI funding is falling dangerously behind. In fact, over the last decade, the National Institutes of Health (NIH), which includes the NCI, has lost approximately 20 percent of its purchasing power because funding has not kept pace with the rate of biomedical inflation. In fiscal year 2013, the NCI's budget has been cut by 5.8 percent, largely due to sequestration. If current funding trends continue much longer, we cannot hope to see success against diseases like pancreatic cancer. Furthermore, it will be very difficult to leverage the opportunities that come out of the scientific frameworks developed as a result of the *Recalcitrant Cancer Research Act* unless adequate funding is provided by Congress.

We ask you to keep the following points in mind as you consider funding for fiscal year 2014:

- **NIH-FUNDED RESEARCH SUPPORTS JOBS.** It is estimated that a \$1.5 billion cut to the NIH will lead to approximately 20,000 fewer jobs across the country and a reduction of \$3 billion in economic activity. Scientists are already struggling to carry out lifesaving research with diminished grant support.¹
- **NIH-FUNDED RESEARCH SAVES LIVES.** We know that funding makes a difference. While we do not yet have the necessary answers for pancreatic cancer, NIH research has led to critical advances in treating HIV/AIDS, breast cancer, heart disease, and many other diseases. According to the American Cancer Society, the overall cancer death rate has fallen between 1991 and 2009 by 20%—an impressive mark of progress. Pancreatic cancer patients deserve a chance at this same hope.²
- **NIH-FUNDED RESEARCH PROTECTS OUR STANDING AS A WORLD LEADER IN MEDICAL RESEARCH.** Other countries, like China and India, are increasing their research budgets, not decreasing them. It is particularly important to remember that new investigators who want to work in the U.S. may be forced to find work overseas.³

WE CAN'T AFFORD TO STOP NOW

Save the medical research funding that saves lives by supporting a permanent fix to sequestration and providing sustained adequate funding for the NIH and the NCI. Thousands of lives depend on medical research. Don't lessen their hope for survival.

¹ *The Impact of a Sequester on the National Institutes of Health and Implications for Jobs and the U.S. Economy* (United for Medical Research), February 2013. ² Siegel, R., Naishadham, D., Jemal, A. *Cancer Statistics*, 2013. CA: *A Cancer Journal for Clinicians*. 2013;63:11–30. ³ *Leadership in Decline: Assessing U.S. International Competitiveness in Biomedical Research* (United for Medical Research), May 2012.