## March XX, 2016

The Honorable Thad Cochran Chairman Appropriations Committee Subcommittee on Defense Washington, DC 20510 The Honorable Richard Durbin Ranking Member Appropriations Committee Subcommittee on Defense Washington, DC 20510

Dear Chairman Cochran & Ranking Member Durbin:

We respectfully request your support to provide \$15 million within the Congressionally Directed Medical Research Program (CDMRP) in the Fiscal Year 2017 Department of Defense (DOD) Appropriations bill to fund kidney cancer research.

We are grateful for the past support of kidney cancer research in the DOD Peer Review Medical Research Program since 2006 and then to the DOD Peer Review Cancer Research Program in 2009 resulting in more than \$9.1 million in kidney cancer research grants total.

A streamlined investment in kidney cancer from CDMRP would make a tremendous difference to millions of Americans including military personnel their dependents and veterans. A 2012 study identified kidney cancer as the 6th leading cancer in incidence among patients of the United States Veterans Affairs Healthcare System. According to a CDMRP study, the incidence of kidney cancer specifically for military members after the 4<sup>th</sup>decade of life dramatically increases from an average of 1.5 to 8.5 cases per 100,000 person-years. In addition, renal cancer occurs almost twofold more frequently in males than in females and approximately 80% of military personnel are males. Given this disease burden in the U.S. veteran population, we believe it is appropriate to have the Department of Defense provide research funding necessary to develop innovative treatment options.

Kidney cancer is the ninth leading cancer overall but ranks fourth in incidence among both African American and Latino males. The rate of people developing kidney cancer has been climbing for the last 65 years. While there is only one FDA-approved drug for metastatic kidney cancer that has shown any durable response, several targeted therapies have been developed in recent years. After showing some efficacy in kidney cancer patients, these drugs have gone on to be tested on other cancers. Unfortunately, no therapy currently exists to prevent the recurrence of kidney cancer after a patient goes into remission.

The National Cancer Institute (NCI) estimates that \$4.4 billion is spent in the United States each year on treatment of kidney cancer. For patients, research for treatment and someday a cure is critical. In addition, the NCI estimates that kidney cancer causes \$3.4 billion in lost productivity and deaths among adults aged 20 years and older.

We respectfully request your support to provide \$15 million within the Congressionally Directed Medical Research Program (CDMRP) in the Fiscal Year 2017 Department of Defense Appropriations bill to fund kidney cancer research.

Thank you for your consideration, and we look forward to work with you on this important matter.

Sincerely, Charles E. Schumer

**United States Senator**