

# United States Senate

WASHINGTON, DC 20510

April 12, 2019

The Honorable Richard Shelby  
Chairman  
Defense Appropriations Subcommittee  
S-128 Capitol  
Washington, DC 20510

The Honorable Richard Durbin  
Ranking Member  
Defense Appropriations Subcommittee  
S-146A Capitol  
Washington, DC 20510

Dear Chairman Shelby and Ranking Member Durbin:

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

One in 75 women will develop ovarian cancer in their lifetime, and less than half will survive for five years. A full quarter of women will die within the first year of their diagnosis an estimated 22,000 women will be diagnosed with ovarian cancer and over 14,000 women will die from the disease.

Of the 850,000 female service members, wives of active duty military and adult daughters of active duty military<sup>[1]</sup>, approximately 11,800 will be diagnosed with ovarian cancer over the course of their lifetimes<sup>[2]</sup>. There is no method of early detection for ovarian cancer; surgery is the only method for diagnosis. Surgical procedures to address the possibility of ovarian cancer can be disruptive and costly to the readiness of our military.

The cost of ovarian cancer to our military is great, not only in terms of troop readiness, but also in terms of health care costs: treating these cases of ovarian cancer over these patients' lifetimes 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 loved ones.

The OCRP supports high-impact innovative research that promotes readiness for military members and their families as well as the overall health of citizens of all Americans. The OCRP

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<sup>[1]</sup> Military Demographics for 2012:

[http://www.militaryonesource.mil/12038/MOS/Reports/2012\\_Demographics\\_Report.pdf](http://www.militaryonesource.mil/12038/MOS/Reports/2012_Demographics_Report.pdf).

<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>[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>.

continues to produce significant breakthroughs in understanding the precursor lesion/stem cell, microenvironment, and pathogenesis/ progression of all types of ovarian cancer, including rare subtypes. The program develops and improves the performance and reliability of screening, diagnostic approaches, and treatment and investigating tumor response to therapy, including tumor survival, dormancy, cell death, clonal evolution, resistance, and tumor heterogeneity.

While the knowledge generated by OCRP research will impact the screening, detection, and treatment of ovarian cancer, it also has generalizable applications such as identifying substances in a person's blood, developing better vaccines, and understanding 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 between our military, patients, clinicians, and scientists are accelerating discovery and knowledge for all diseases.

We recognize that your Subcommittee has the difficult job of setting priorities among the many needs of our nation. We strongly believe the OCRP has a proven 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 the millions of Americans, including our military and their families, and investing \$35 million in FY2020 will allow OCRP to build on its success.

Thank you again for your attention to this request.


Sincerely,

  
ROBERT MENENDEZ  
United States Senator

  
DAN SULLIVAN  
United States Senator

  
JEANNE SHAHEEN  
United States Senator

  
SUSAN M. COLLINS  
United States Senator

  
TAMMY BALDWIN  
United States Senator

  
MARTHA MCSALLY  
United States Senator





RICHARD BLUMENTHAL  
United States Senator




BILL CASSIDY, M.D.  
United States Senator



EDWARD J. MARKEY  
United States Senator



SHERROD BROWN  
United States Senator



KAMALA D. HARRIS  
United States Senator



SHELDON WHITEHOUSE  
United States Senator



JACK REED  
United States Senator



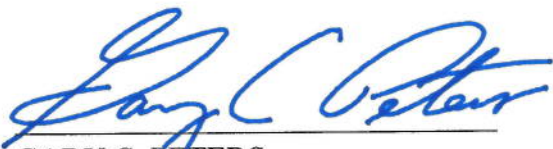
ELIZABETH WARREN  
United States Senator



DEBBIE STABENOW  
United States Senator



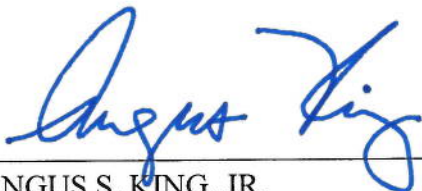
CHRIS VAN HOLLEN  
United States Senator



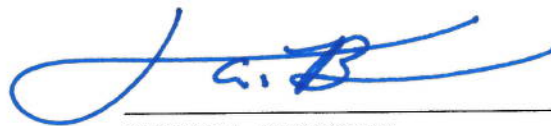
GARY C. PETERS  
United States Senator



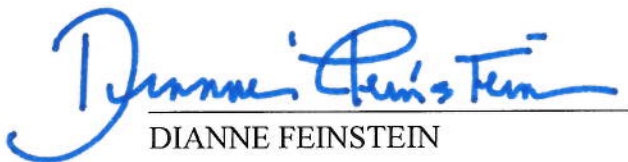
DOUG JONES  
United States Senator

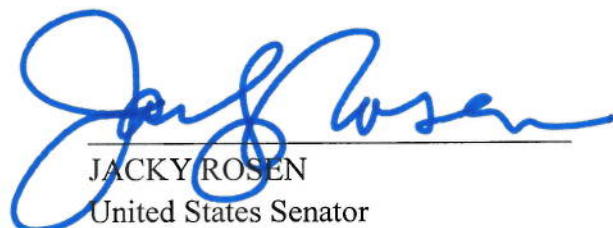


ANGUS S. KING, JR.  
United States Senator



CORY A. BOOKER  
United States Senator

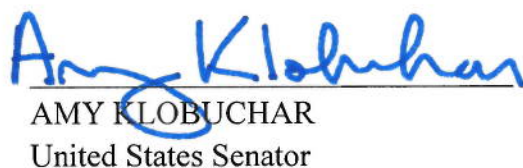
  
DIANNE FEINSTEIN  
United States Senator

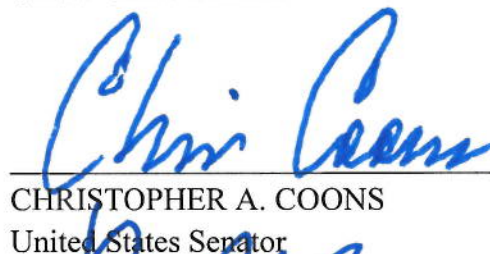
  
JACKY ROSEN  
United States Senator

  
JEFFREY A. MERKLEY  
United States Senator

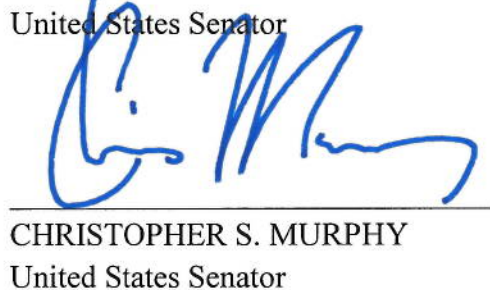
  
MAZIE K. HIRONO  
United States Senator

  
KIRSTEN GILLIBRAND  
United States Senator

  
AMY KLOBUCHAR  
United States Senator

  
CHRISTOPHER A. COONS  
United States Senator

  
RON WYDEN  
United States Senator

  
CHRISTOPHER S. MURPHY  
United States Senator

A handwritten signature in blue ink, reading "Tammy Duckworth". The signature is fluid and cursive, with a horizontal line extending from the end of the name.

Tammy Duckworth  
United States Senator