

May 3, 2023

The Honorable Jon Tester
Chair, Subcommittee on Defense
Senate Appropriations Committee
U.S. Senate
Washington, DC 20510

The Honorable Ken Calvert
Chair, Subcommittee on Defense
House Appropriations Committee
U.S. House of Representatives
Washington, DC 20515

The Honorable Susan Collins
Ranking Member, Subcommittee on Defense
Senate Appropriations Committee
U.S. Senate
Washington, DC 20510

The Honorable Betty McCollum
Ranking Member, Subcommittee on Defense
House Appropriations Committee
U.S. House of Representatives
Washington, DC 20515

Dear Chairman Tester, Chairman Calvert, Ranking Member Collins, and Ranking Member McCollum:

On behalf of the Society of Gynecologic Oncology (SGO), thank you for your leadership and steadfast support for the Department of Defense's (DoD) Congressionally Directed Medical Research Program (CDMRP).

The SGO is the premier medical specialty society for health care professionals trained in the comprehensive management of gynecologic cancers. Our more than 2,800 members include physicians, advanced practice providers, nurses and patient advocates who collaborate with the Foundation for Women's Cancer to increase public awareness of gynecologic cancers and improve the care of those diagnosed with gynecologic cancers. Our primary mission focuses on supporting research, disseminating knowledge, raising the standards of practice in the prevention and treatment of gynecologic malignancies, and collaborating with other organizations dedicated to gynecologic cancers and related fields, all with the ultimate vision of eradicating gynecologic cancers.

As you work on the fiscal year (FY) 2024 DoD appropriations bill, we respectfully request that you include a new line item for endometrial cancer in the CDMRP funded at \$10 million and \$50 million for the Ovarian Cancer Research Program (OCRCP) to preserve current and support future investments in ovarian cancer research.

Support DoD Research on Endometrial Cancer

Endometrial cancer research is currently included in the DoD's Peer Reviewed Cancer Research Program; however, it does not have a predictable and regular funding source, which a separate CDMRP funding line will provide this.

Endometrial cancer is the most common gynecologic cancer, and the fourth most common malignancy among women in the United States trailing only breast, lung, and colorectal. In fact, in 2023, it is

estimated that 66,200 new cases of uterine cancer will be diagnosed, and about 13,030 women will die from the disease.¹

The growing prevalence and mortality of endometrial cancer not only affects the health and well-being of U.S. military service members and their families, but also troop readiness. There are now almost 230,000 women who are U.S. military active-duty personnel, accounting for over 17 percent of the total force.² Black women now constitute nearly one third of all women in the U.S. armed forces, and the burden of endometrial cancer is significantly higher in Black women. Currently, the incidence of endometrial cancer in Black women (30.5 per 100,000) has surpassed that of White women (28.2 per 100,000).³ Data show that not only is endometrial cancer more common in Black women than White women, Black women have a two-fold higher likelihood of dying from endometrial cancer⁴ with indications that factors other than access to care are responsible for this racial disparity in survival.⁵

Evidence also shows a significant relationship between obesity and endometrial cancer.⁶ The link to obesity and increasing incidence and mortality associated with this cancer are startling. According to a study published in JAMA Oncology, the endometrial cancer mortality rate has been increasing by almost two percent each year with even sharper increases among Asian, Hispanic, and Black women.⁷ Additionally, the incidence of endometrial cancer among young women has been rising.⁸

Endometrial cancer typically develops in post-menopausal women, with an average age of diagnosis of 60, and will have a significant impact on the Veterans Health Administration (VHA) that provides care to those who served our country and their spouses. Women are now the fastest growing patient population using VHA services and make up 30 percent of all new VHA patients.⁹ The Journal of Women's Health reported that a 2010 study examining cancer among women treated in the VHA system found gynecologic cancers comprised 12 percent of all cancers identified in women. As in the general population, endometrial cancer was the most commonly diagnosed gynecologic cancer, followed by ovarian, cervical, and other gynecologic malignancies.¹⁰ SGO anticipates that without more research and

¹ <https://www.cancer.org/cancer/endometrial-cancer/about/key-statistics.html>

² https://diversity.defense.gov/Portals/51/Women%202021_ACC.pdf

³ https://seer.cancer.gov/statistics-network/explorer/application.html?site=58&data_type=1&graph_type=2&compareBy=race&chk_race_3=3&chk_race_2=2&rate_type=2&hdn_sex=3&age_range=1&stage=101&advopt_precision=1&advopt_show_ci=on&hdn_view=0&advopt_show_apc=on&advopt_display=2#resultsRegion0

⁴ <https://pubmed.ncbi.nlm.nih.gov/35143040/>

⁵ Park AB, Darcy KM, Tian C, Casablanca Y, Schinkel JK, Enewold L, McGlynn KA, Shriver CD, Zhu K. Racial disparities in survival among women with endometrial cancer in an equal access system. *Gynecol Oncol*. 2021 Oct;163(1):125-129. doi: 10.1016/j.ygyno.2021.07.022. Epub 2021 Jul 27. PMID: 34325938; PMCID: PMC8562590.

⁶ <https://www.cancer.org/cancer/endometrial-cancer/causes-risks-prevention/risk-factors.html>

⁷ Clarke MA, Devesa SS, Hammer A, Wentzensen N. Racial and Ethnic Differences in Hysterectomy-Corrected Uterine Corpus Cancer Mortality by Stage and Histologic Subtype. *JAMA Oncol*. 2022 Jun 1;8(6):895-903. doi: 10.1001/jamaoncol.2022.0009. PMID: 35511145; PMCID: PMC9073658

⁸ https://ascopubs.org/doi/abs/10.1200/JCO.2021.39.15_suppl.5578

⁹ <https://www.womenshealth.va.gov/about-us.asp>

¹⁰ Leah L. Zullig, PhD, MPH, Karen M. Goldstein, MD, MSPH, Kellie J. Sims, PhD, MS, Christina D. Williams, PhD, Michael Chang, MD, Dawn Provenzale, MD, MHS, and Michael J. Kelley, MD5, *J Womens Health (Larchmt)*. 2019 Feb 1; 28(2): 268-275.

improved therapeutic interventions, the number of women being treated and dying from endometrial cancer in the VHA will increase.

For these reasons, the SGO urges you to include the following language in the DoD FY 2024 appropriations bill:

The Committee recommends \$10,000,000 for an endometrial cancer research program among the Congressionally directed medical research programs (CDMRP).

This language will provide a predictable funding source for endometrial cancer researchers, potentially attracting new investigators to the field. In addition, this funding would improve our understanding of (1) the worsening endometrial cancer disparities for people of color; (2) how molecular classification of endometrial cancers inform survival outcomes, racial disparities, treatment options, and development of biomarker-directed clinical trials; and (3) the development of molecular targeted therapies to improve response and survival in all patients with endometrial cancer.

Support DoD Research on Ovarian Cancer

The DoD OCRP was created in 1997 to address critical gaps in ovarian cancer research by supporting high-impact, innovative research. It funds research from bench to bedside—basic, translational, and clinical—to advance the field of ovarian cancer care towards elimination of the disease.

The OCRP continues to support high impact, innovative research that promotes readiness for military members and their families, as well as the overall health of all Americans. Not only does the OCRP support research to address health disparities and improve access to quality care and treatment for those diagnosed with ovarian cancer, it also aims to develop and improve screening and diagnostic methods. The program has funded key studies that have led to new discoveries and advancements in the treatment and understanding of ovarian cancer, including the Food and Drug Administration (FDA) approval of Rucaparib, an oral therapy for the treatment of advanced ovarian cancer, and OVA1, a blood test combined with imaging to identify patients at risk for malignant ovarian cancer. To date, the OCRP has resulted in over 1,583 peer-reviewed publications and 103 patent applications.

Ovarian cancer is the fifth leading cause of cancer-related death in women and the deadliest of gynecologic cancers. More than 85 percent of women are diagnosed in later stages because there is currently no early detection test for ovarian cancer. Consequently, nearly 25 percent of women diagnosed with ovarian cancer will die within a year, and less than 50 percent will survive five years. In the military, gynecologic cancers represent 12 percent of all cancer identified in women, and ovarian cancer is one of the most common diagnoses.¹¹

According to the recent Military Health System (MHS) data, over 300 active Service Members encountered ovarian cancer and over 20,000 DoD beneficiaries were diagnosed with ovarian cancer over the past ten years.¹² With approximately 230,000 women serving in our nation's military, and thousands

¹¹ Leah L. Zullig, PhD, MPH, Karen M. Goldstein, MD, MSPH, Kellie J. Sims, PhD, MS, Christina D. Williams, PhD, Michael Chang, MD, Dawn Provenzale, MD, MHS, and Michael J. Kelley, MD5, J Womens Health (Larchmt). 2019 Feb 1; 28(2): 268–275.

¹² <https://cdmrp.health.mil/ocrp/default>

of active-duty military with wives and adult daughters, there is an urgent need to pursue the scientific discoveries that help readiness and take care of the health needs of those who serve our country.

For these reasons, the SGO urges you to fund the OCRP at \$50 million, an increase of \$5 million in the DoD FY 2024 appropriations bill. Congress appropriated \$45 million for the DoD OCRP in FYs 2022 and 2023. The requested increase in funding will preserve current and support future investments in ovarian cancer research and allow for the pursuit of new research to improve the early diagnosis, treatment, and survival rates from ovarian cancer.

Thank you for your consideration of this request. We look forward to continuing to work together to protect the health and well-being of U.S. military service members and their families. Should you have any questions or would like to discuss this request further, please contact Erika Miller, JD, at emiller@dc-crd.com.

Sincerely,



Angeles Alvarez Secord, MD, MHSc
SGO President, 2023-2024