AACR

## Commonly Heard Arguments \& Suggested Responses

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ARGUMENT: We have provided significant increases for NIH for the last six years. At some point we need to focus on other priorities.

## RESPONSE:

1. We greatly appreciate Congress' continued support for NIH and understand that there are other important issues that Congress must fund. However, healthcare is arguably America's most important domestic issue and cancer is the $2^{\text {nd }}$ leading cause of death in the United States. In 2022, an estimated 1.9 million new cancer cases will be diagnosed in the United States alone, and approximately 609,000 Americans are expected to die of cancer.

Before the last six years of increases, our medical research institutions saw years of flat funding, which made it more difficult for early-stage investigators like me to have a promising career in medical research. We lost brilliant minds to foreign labs and to other industries rather than investing in developing cures and treatments here at home. This hurt our ability to address our health needs and weakened our standing in a global economy. We cannot afford to let that happen again, that's why this additional funding is so vital.
2. In addition to saving lives, NIH funding leads to job growth. In FY 2020, NIH research funding supported over 536,000 jobs.

ARGUMENT: We can't afford to provide another $\$ 3.5$ billion for NIH.

## RESPONSE:

1. We completely understand the enormity of setting federal spending priorities. We don't envy the difficult position that you and other Members of Congress are placed in. But continued funding of NIH has led to tangible results. Between 1991-2019, the cancer mortality rate dropped $32 \%$, in large part due to advancements in early detection and treatment thanks to new discoveries in cancer research. In order for the mortality rate to decrease even more, continued investment in cancer research is imperative.
2. Expenditures associated with cancer have steadily increased and will continue to rise with an aging population. Investing in medical research can yield long-term healthcare savings by improving prevention and treatment so more Americans can live healthier, more productive lives.

AACR
American Association for Cancer Research
\#AACRontheHill

ARGUMENT: The federal government has already provided a lot of support for NIH. It's time for the private sector to step up and fill in the gaps, particularly since they make a profit.

## RESPONSE:

1. NIH funding focuses on the basic research that comes long before there is an actual drug that can be tested in or marketed to humans.
2. Drug companies are not equipped to do this type of basic research, which is extremely costly, risky and the majority of which offers little to no return on investment. The private sector needs NIH to do this work.
3. If we reduce NIH funding, we effectively cut off possible innovation for patients.

ARGUMENT: I have always supported NIH funding.

## RESPONSE:

1. GREAT!!! We sincerely appreciate your support. We humbly ask that you continue to prioritize medical research by supporting an increase of $\$ 3.5$ billion for NIH in FY22 and another significant increase in FY23. This is not a Democrat/Liberal or a Republican/Conservative issue...this is an American issue.

ARGUMENT: OK, then tell me what to cut.

## RESPONSE:

1. There are so many important priorities within the Labor, Health and Human Services, and Education bill. One of the best ways to assure we can reduce suffering and increase health outcomes is to request a robust allocation for this subcommittee. We are here to ask you to support a $\$ 3.5$ billion increase for the NIH in FY22 and continued, significant funding increases in FY23 and beyond. We are indeed grateful for the increases over the last several years, but as the nature of cancer evolves, cancer researchers need to keep up with the scientific opportunities that exist today.
