PETER J. ROSKAM

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CHIEF DEPUTY WHIP

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TRADE

HEALTH



Congress of the United States

House of Representatives Washington, DC 20515—1306

July 22, 2013

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Harold Varmus, M.D.
Director
National Cancer Institute
National Institutes of Health
BG 9609 MSC 9760
9609 Medical Center Drive
Bethesda, MD 20892-9760

Dear Dr. Varmus:

We are concerned about the state of gastric cancer research in the United States and respectfully request your commitment to improve gastric cancer's profile at the National Cancer Institute (NCI).

Deadly gastric cancer is on the rise in young people. In May of 2010, the NCI reported that the likelihood of being diagnosed with gastric cancer at age 25-39 years has increased by almost 70 percent since 1977. The consequences of such a diagnosis are catastrophic for a young person. Because there are minimal symptoms of gastric cancer, it is most often diagnosed at late stage when curative treatment is impossible.

The NCI's incidence study sends an early warning signal, and it therefore presents an opportunity to stem this concerning trend by dedicating more research resources to understanding this deadly cancer - making molecular screening, early diagnosis, treatments and cures a possibility for the future. According to the NCI's FY 2012 funding data, when compared to the most common cancers, stomach cancer receives the least funding per cancer death (\$1,102).

The American Cancer Society (ACS) estimates 21,600 new cases of gastric cancer will be diagnosed in 2013, and 10,990 men and women will die from the disease within the year. According to the NCI, about 80 percent of people with stomach cancer are diagnosed with advanced metastatic cancer. At stage IV, the 5 year survival rate for gastric cancer is four percent. Even those few who beat the odds face a lifetime of cancer treatments to prevent the return of cancer.

We are pleased that gastric cancer has been selected for study under The Cancer Genome Atlas (TCGA). However, without efforts by the NCI to assist researchers in utilizing the genomic data from TCGA, the impact of TCGA on gastric cancer will be minimal. Very little foundational research data exists for gastric cancer; thus, gastric cancer researchers are greatly in need of federal assistance to ensure that promising gene candidates identified in TCGA research are able to be investigated to make progress in this field. We ask you to

make the utilization of TCGA data for gastric cancer research a priority and to carry this emphasis throughout the NCI's cancer genomic efforts.

We appreciate your consideration of our request and look forward to hearing about the NCI's plans for furthering gastric cancer research. Please direct questions and correspondence to Luke Hatzis in the office of Congressman Roskam at 202-225-4561 and Dani Gilbert in Rep. Wasserman Shultz's office at 202-225-7931.

Sincerely,

VETER ROSKAM

Member of Congress

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VERN BUCHANAN Member of Congress

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