

# Congress of the United States

Washington, DC 20515

May 22, 2025

The Honorable Ken Calvert  
Chair  
Subcommittee on Defense  
H-405 The Capitol  
Washington, D.C. 20515

The Honorable Betty McCollum  
Ranking Member  
Subcommittee on Defense  
1036 Longworth House Office Building  
Washington, D.C. 20515

Dear Chair Aderholt and Ranking Member DeLauro:

We greatly appreciate the inclusion of colorectal cancer as eligible for funding through the Peer Reviewed Cancer Research Program within the Department of Defense Congressionally Directed Medical Research Program in the Fiscal Year (FY) 2024 Defense appropriations bill. As you consider the House Department of Defense Appropriations bill for FY 2026, ***we respectfully request \$20 million to create a Colorectal Cancer Research Program within the Department of Defense (DoD) Congressionally Directed Medical Research Program (CDMRP).***

Colorectal cancer is the second leading cause of cancer death for men and women combined. While colorectal cancer incidence rates in individuals over 50 have largely stabilized or declined, due to significant advancements in preventive screening, incidence rates have been increasing among individuals under 50 years of age - a key demographic for our active and reserve duty military personnel whose average age is 29.9 years.<sup>1</sup>

According to data recently published by the American Cancer Society, colorectal cancer is now the number one cause of death for men under the age of 50 and the number two cause of cancer-related deaths overall.<sup>2</sup> We don't know why this increase in colorectal cancer diagnoses in young people is happening. More research is critical to determine the cause, which can help address these concerning trends.

Individuals born in the 1990s have double the risk of colon cancer and quadruple the risk of rectal cancer as those born in the 1950s.<sup>3</sup> Additionally, three of four colorectal cancer patients under the age of 50 have no family history of the disease and over 60 percent are diagnosed at a

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<sup>1</sup> Total DoD Military Force. 2023 Demographics Dashboards. (n.d.) Retrieved from <https://demographics.militaryonesource.mil/chapter-1-total-force-characteristics>

<sup>2</sup> American Cancer Society. Cancer Facts & Figures 2024. Atlanta: American Cancer Society, 2024. Retrieved from <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures-2023.pdf>

<sup>3</sup> Siegel, Rebecca L. et al. "Colorectal Cancer Incidence Patterns In The United States, 1974–2013". JNCI: Journal Of The National Cancer Institute, vol 109, no. 8, 2017. Oxford University Press (OUP), doi:10.1093/jnci/djw322.

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late stage when the disease is far more difficult to treat. And at those later stages, treatment can quickly become an overwhelming financial burden on patients and their families.<sup>4</sup>

Federal research dollars are disproportionately low for colorectal cancer despite its significant prevalence. In 2020, the United States spent an estimated \$24.3 billion on colorectal cancer care, representing over 11 percent of all cancer treatment costs.<sup>5</sup> Yet in FY22, CDMRP allocated less than two percent of its cancer research budget to colorectal cancer research.<sup>6</sup>

Since FY10, the Peer Reviewed Cancer Research Program (PRCRP), has supported research exploring issues important to both the warfighter and the civilian population, including whether environmental chemicals are associated with an increased risk of colorectal cancer and whether drugs for other conditions can be used to treat colorectal cancer.

Without a dedicated colorectal cancer research program, we are leaving good science on the table. In FY22, the DoD received 66 colorectal cancer applications. Of those, 25 were deemed “meritorious,” but only nine applications were funded. In FY2023, the DoD received 26 colorectal cancer applications that were deemed “meritorious,” but only 11 applications were funded.

While this is important progress, with more and more young people being diagnosed with and dying from colorectal cancer, greater investment is urgently needed. Colorectal cancer remains among the top five deadliest cancers, yet it stands the only cancer in the top five without its own research program within the CDMRP, all while it remains the number two cancer cause of death. It is time we apply the model that has been successful in other cancers such as breast and lung to colorectal cancer. We need a dedicated funding stream and strategic approach to innovate and deliver meaningful advancements in the fight against colorectal cancer. Thank you for considering this request.

Sincerely,

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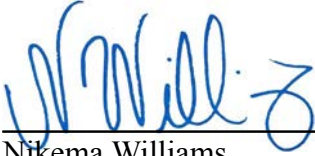
<sup>4</sup> K Robin Yabroff, PhD, Angela Mariotto, PhD, Florence Tangka, PhD, Jingxuan Zhao, MPH, Farhad Islami, MD, PhD, Hyuna Sung, PhD, Recinda L Sherman, PhD, S Jane Henley, MSPH, Ahmedin Jemal, DVM, PhD, Elizabeth M Ward, PhD, Annual Report to the Nation on the Status of Cancer, Part 2: Patient Economic Burden Associated With Cancer Care, JNCI: Journal of the National Cancer Institute, Volume 113, Issue 12, December 2021, Pages 1670–1682, <https://doi.org/10.1093/jnci/djab192>

<sup>5</sup> National Cancer Institute. Financial burden of cancer care. Cancer Trends Progress Report. Accessed February 2025. Retrieved from [https://progressreport.cancer.gov/after/economic\\_burden](https://progressreport.cancer.gov/after/economic_burden)

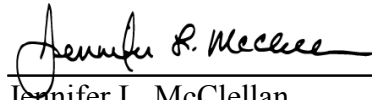
<sup>6</sup> Department of Defense. U.S. Army Medical Research and Development Command. Congressionally Directed Medical Research Programs 2023 Annual Report. September 30, 2023. Retrieved from <https://cdmrp.health.mil/pubs/annreports/2023annrep/2023annreport.pdf>

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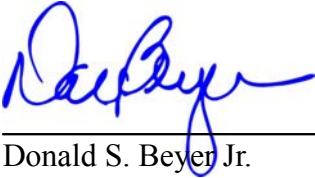
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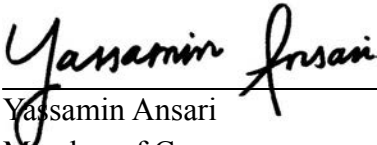
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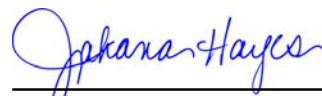
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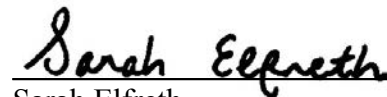
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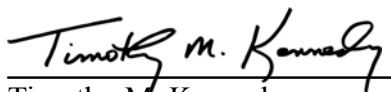
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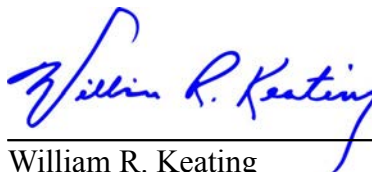
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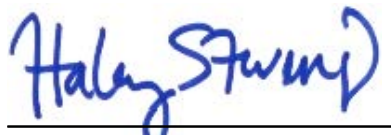
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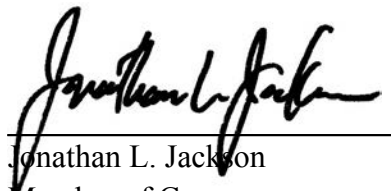
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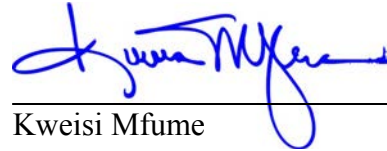
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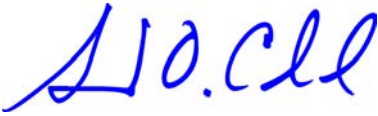
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