



PANCREATIC CANCER ACTION NETWORK®
ADVANCE RESEARCH. SUPPORT PATIENTS. CREATE HOPE.

August 15, 2012

Dear Representatives Eshoo and Lance:

This letter is in response to the letter you received from Dr. Yamamoto, chair of the Coalition for the Life Sciences regarding the Pancreatic Cancer Research & Education Act (H.R. 733/S. 362). The bill now has 280 co-sponsors in the House and 59 co-sponsors in the Senate. As you know, pancreatic cancer is the fourth leading cause of cancer death in the United States with a five-year survival rate of only six percent.

First and foremost, it is important to note that research supported by the National Institutes of Health and the National Cancer Institute (NCI) has propelled a remarkable transformation in our understanding of cancer, out of which has flowed a bounty of new ways to screen, diagnose and treat a variety of cancers. As a result, the five-year survival rate for cancer in general has risen to 67 percent. Unfortunately, the same cannot be said for those who have been diagnosed with pancreatic cancer, where the five-year relative survival rate lags far behind, at only six percent. In this regard, pancreatic cancer stands apart from most other major cancers.

We believe that the lack of improvement in the survival rate from this exceptionally difficult disease points to the need to try a different, more focused approach. We recognize that research dollars are precious, and it is important that any resources spent are optimized to generate the most benefit. We also recognize that tough challenges often require bold new approaches. To those ends, the Pancreatic Cancer Research & Education Act calls for the creation of a long-term comprehensive strategic plan for pancreatic cancer so the NCI and its expert advisors can determine the best way to advance this field of study, including developing earlier intervention strategies and more effective treatments for patients. Having a plan in place better ensures a prudent allocation of scarce resources in a focused way.

The Coalition and others in the broad cancer research community have voiced two major concerns with the legislation, both of which we propose to address through revisions to the bill as originally introduced. One of those concerns is that the bill would bypass or otherwise disrupt the NIH peer review system. To address those concerns, we propose eliminating those sections of the bill that reference the peer review process and clarifying the language to reflect the intended *advisory* role of the Pancreatic Cancer Coordinating Committee.

Along the same lines, we would revise the coordinating committee's make up and placement within NCI's current organizational structure. We propose that this advisory panel take the form of a Subcommittee of NCI's existing Clinical Trials and Translational Research Advisory Committee (CTAC). As is typical of a subcommittee, the advisory panel would be comprised of outside experts, but would include three individuals from NCI.

The second major concern expressed about the bill is that the Pancreatic Cancer Initiative would create a separation of pancreatic cancer research from other cancer research. We agree that findings in one area of research have and should continue to inform other areas of research. The long-term plan developed by the Pancreatic Cancer Coordinating Committee would provide the opportunity to identify emerging scientific areas and promising scientific advances in basic, translational, and clinical science that are relevant to pancreatic cancer. This plan would be a living, flexible document that would identify the most promising avenues of

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research, and have the ability to change with the latest scientific discoveries. We believe that this structure would, in fact, accelerate the application of promising discoveries from other fields to pancreatic cancer.

As an organization, we represent a disease that doesn't have many survivors. Like my father, who died at the age of 52 from pancreatic cancer, they are not here to speak for themselves. We believe, as does the Coalition, that advances will come from biomedical research. However, we believe that we can get to the end goal faster with a long-term comprehensive strategic plan that will help pave the way for ground breaking discoveries and provide opportunities for the NCI to build on their tremendous portfolio of advances.

Sincerely,

Julie Freshman
President and CEO
Pancreatic Cancer Action Network

cc: Leader Cantor
Chairman Upton
Representative Waxman
Senator Whitehouse

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