

May 6, 2025

The Honorable Shelley Moore Capito Chair Appropriations Subcommittee on Labor, Health & Human Services United States Senate Washington, DC 20510 The Honorable Tammy Baldwin Ranking Member Appropriations Subcommittee on Labor, Health & Human Services United States Senate Washington, DC 20510

Dear Chair Capito and Ranking Member Baldwin:

The undersigned childhood cancer organizations, consisting of patient advocacy groups, healthcare professionals and scientific organizations, represent millions of Americans who care deeply about childhood cancer. As such, we appreciate your tremendous ongoing leadership in Congress to make childhood cancer a national child health priority.

As Congress considers the Fiscal Year 2026 (FY26) Labor, Health & Human Services, Education and Related Agencies Appropriations bill, we ask you to consider our funding priorities related to childhood cancer.

NIH and NCI Funding

For children with cancer, federally funded intramural and extramural research is the doorway to new, less toxic treatments. Due to the smaller patient populations, drug companies do not have as strong an incentive to invest in new childhood cancer research and development as they do for their adult counterparts. The status quo often favors existing childhood cancer treatments, despite their long-term health impacts. As a result, the onus is on the federal government to fill the gap. Research institutions around the country rely on grants from the National Institutes of Health (NIH) and the National Cancer Institute (NCI) to find discoveries, treatments, and cures. The critical and innovative intramural research being done on campus at NIH and NCI has saved countless lives and must continue to be fully funded and unimpeded in its mission to improve the lives of childhood cancer patients, survivors, and families. We join with the leading national cancer organizations in requesting at least \$51.3 billion for National Institutes of Health (NIH) in FY26, including \$7.93 billion for cancer research at the National Cancer Institute (NCI). Further, we strongly oppose any changes to NIH or NCI that threaten their long history of stable, uninterrupted, and robust support. Children cannot afford to wait.

Childhood Cancer Funding: Each year in the U.S. approximately 16,000 children are diagnosed with cancer. Approximately 1 in 263 children in the U.S. are diagnosed with cancer before their 20th birthday. Annually there are more than 413,000 cases of childhood cancer



worldwide. Unfortunately, cancer remains the most common cause of death by disease for children in America.

We have made significant advances to develop better treatments for the most common forms of childhood cancer. However, for many other types, progress is limited, and for too many children there is no available cure. By the age of 50, more than 99% of survivors have had a chronic health problem, and 96% have experienced a severe or life-threatening condition caused by the toxicity of the treatment that initially saved their life, including brain damage, loss of hearing and sight, heart disease, secondary cancers, learning disabilities, infertility and more. By the time a child in treatment for cancer today reaches the age of 50, we want these statistics to be far less grim.

Therefore, we ask for the following funding that is specific to Childhood Cancer in the FY26 Labor, Health & Human Services, Education and Related Agencies Appropriations bill:

- Childhood Cancer STAR Act \$30 million, the same funding level as last year, including \$4 million in funding for childhood cancer surveillance at the Centers for Disease Control and Prevention (CDC) to better identify and track incidences of child, adolescent, and young adult cancer in more states.
- Childhood Cancer Data Initiative \$50 million, the same funding level as last year.

Thank you for your consideration and continued support in the fight against childhood cancer. Should you have any questions or need additional information, please contact Rosalie Abbott, Co-Chair of the Alliance for Childhood Cancer, at Rosalie.Abbott@stbaldricks.org, or Dr. Michael Link, Co-Chair of the Alliance for Childhood Cancer, at mlink@stanford.edu.

Sincerely,

The Alliance for Childhood Cancer

American Cancer Society Cancer Action Network
American Childhood Cancer Organization
American Society of Pediatric Hematology/Oncology
The Andrew McDonough B+ Foundation
Association for Clinical Oncology
Association of Pediatric Hematology-Oncology Nurses
Association of Pediatric Oncology Social Workers
Children's Brain Tumor Foundation
Children's Cancer Cause



Dana-Farber Cancer Institute
The Leukemia & Lymphoma Society
MIB Agents Osteosarcoma
National Brain Tumor Society
Pediatric Brain Tumor Foundation
Rally Foundation for Childhood Cancer Research
St. Baldrick's Foundation