



**AMERICAN CANCER SOCIETY
AMERICAN CANCER SOCIETY CANCER ACTION NETWORK**

TESTIMONY OF
DR. CHRISTINA M. ANNUNZIATA, MD, PHD, FASCO
SENIOR VICE PRESIDENT, EXTRAMURAL DISCOVERY SCIENCE

BEFORE THE
**UNITED STATES HOUSE OF REPRESENTATIVES
COMMITTEE ON ENERGY AND COMMERCE,
SUBCOMMITTEE ON HEALTH**

HEARING ON
**"LEGISLATIVE PROPOSALS TO SUPPORT
PATIENTS AND CAREGIVERS"**

FEBRUARY 14, 2024

Summary:

- ACS CAN supports the Screening for Communities to Receive Early and Equitable Needed Services for Cancer Act (SCREENS for Cancer Act) to reauthorize the National Breast and Cervical Cancer Early Detection Program to provide the program greater flexibility in providing access to lifesaving screening, diagnostic, and treatment services and continue its innovative work aimed to reduce disparities and advance health equity in breast and cervical cancer.
- ACS CAN supports the Women and Lung Cancer Research and Preventive Services Act of 2023 by to accelerate progress in reducing mortality from lung cancer, including among women.

Good morning, Chairman Guthrie, Ranking Member Eshoo, and members of the Subcommittee, I am Dr. Christina Annunziata, Senior Vice President of Extramural Discovery Science for the American Cancer Society. I am pleased to be here today to express the strong support of the American Cancer Society (ACS) - and our advocacy affiliate the American Cancer Society Cancer Action Network (ACS CAN) - for the Screening for Communities to Receive Early and Equitable Needed Services for Cancer Act, also called the SCREENS for Cancer Act and the Women and Lung Cancer Research and Preventive Services Act. Passages of these two bills could have a critical impact on reducing the burden of cancer for women.

Breast and lung cancer are the leading causes of cancer incidence and mortality in women.

- In 2024, 972,060 women will hear the words “you have cancer” – including 310,720 new cases of breast cancer, 118, 270 new cases of lung cancer and 13,820 new cases of cervical cancer among women.
- Also in 2024, 288,920 women will lose their life to this terrible disease – including 42,250 deaths from breast cancer, 59, 280 deaths from lung cancer and 4,360 deaths from cervical cancer among women.

We also know that cancer does not affect everyone equally, including differences compared to men and among women. For example:

- Despite historically lower smoking rates than men, women make up half of all lung cancer cases and deaths.
- Women have a slightly higher proportion of lung cancer not attributed to risk factors like smoking compared to men.

- While lung cancer incidence is higher for men overall, it is higher for younger women aged 35-54 than for their male counterparts – a fact not fully explained by smoking status.
- The death rate for breast cancer for Black women is 40 percent higher than for White women, despite lower breast cancer incidence rates in Black women.
- The death rate for cervical cancer for Black women and Native American women is 65 percent higher than for White women.
- According to the recently released American Cancer Society Facts & Figures Report, cervical cancer is increasing in incidence in women ages 30 to 44.
- Women who are uninsured or underinsured have lower breast and cervical cancer screening rates, resulting in greater risk of being diagnosed at a later, more advanced stage of disease than women who are insured.

These two pieces of legislation can change those facts and reduce the number of women who suffer and die from cancer. The SCREENS for Cancer Act reauthorizes the National Breast and Cervical Cancer Early Detection Program, also called the NBCCEDP, through 2028 and gives greater flexibility to grantees to implement innovative, evidence-based early detection and screening interventions to reach women eligible for the program. ACS CAN has long advocated for this screening program because it is the gold standard for providing breast and cervical cancer screening, diagnostic tests, and treatment referral services to women who have limited incomes and are un- or under insured. Funding for the program helps address inequities in breast and cervical cancer screening and diagnosis, putting an extra focus on reaching people

who are geographically isolated and/or belong to a racial or ethnic group disproportionately impacted by these cancers.

The program has a high success rate, having provided over 15.6 million screening exams to more than 6 million eligible people detecting more than 75,000 breast cancers, 24,000 premalignant breast lesions, 5,000 cervical cancers and 235,000 premalignant cervical lesions since the program's inception in 1991.

Simply put – without the NBCCEDP, more women would be diagnosed with breast and cervical cancer at later stages leading to unnecessary suffering and premature death. Passage of the SCREENS for Cancer Act is necessary to ensure continued timely access to vital breast and cervical cancer screening, which help reduce the unequal cancer burden.

In my role at ACS, I lead an interdisciplinary team of scientists to identify and fund the most innovative and promising research to end cancer as we know, it for everyone. The Women and Lung Cancer Research and Preventive Services Act calls for the same scientific process, through an interagency collaboration, to review and identify opportunities for research on women and lung cancer, including evaluating environmental and genomic factors contributing to lung cancer in women, and advancing new technologies for prevention, risk assessment, diagnosis and treatment. This type of cutting-edge research tied with evidence-based public education campaigns can truly turn the tide on lung cancer in women.

Thank you for the opportunity to testify today and to express our strong support for the SCREENS for Cancer Act and the Women and Lung Cancer Research and Preventive Services Act. We urge you to pass both bills as quickly as possible to end cancer as we know it for everyone.