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April 22, 2014

The Honorable Barbara Mikulski Chairwoman Committee on Appropriations United States Senate Washington, DC 20510

The Honorable Tom Harkin
Chairman
Subcommittee on Labor, Health and
Human Services, Education &
Related Agencies
Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Richard Shelby Ranking Member Committee on Appropriations United States Senate Washington, DC 20510

The Honorable Jerry Moran
Ranking Member
Subcommittee on Labor, Health and
Human Services, Education &
Related Agencies
Committee on Appropriations
United States Senate
Washington, DC 20510

Dear Chairwoman Mikulski, Ranking Member Shelby, Chairman Harkin and Ranking Member Moran:

The American Lung Association appreciates the opportunity to provide comment to the U.S. Senate's Committee on Appropriations' hearing, *Driving Innovation through Federal Investments*. The American Lung Association is the leading organization working to save lives by improving lung health and preventing lung disease through education, advocacy and research. The Lung Association champions both continued investments in both medical research and public health in order to reduce the burden of lung disease in the U.S.

Each year, close to 400,000 Americans die of lung disease. It is America's number three killer, responsible for one in every six deaths. More than 33 million Americans suffer from a chronic lung disease and it costs the economy an estimated \$129 billion each year. Some lung diseases include: lung cancer, asthma, chronic obstructive pulmonary disease (COPD), pulmonary fibrosis, tuberculosis, pneumonia, influenza, sleep disordered breathing, pediatric lung disorders, occupational lung disease and sarcoidosis.

There have been tremendous strides made in preventing, managing and curing people with lung disease as the result of federal investments in biomedical research.

• Reducing Lung Cancer Deaths Among High Risk Groups. In June of 2011, the National Cancer Institute (NCI) released its preliminary findings from the National Lung Screening Trial (NLST), which began in August of 2002. This decade-

plus study, which was the result of millions of dollars of investment by NCI, led to breakthrough findings: High risk individuals who received annual low-dose CT scans saw a 20 percent reduction in dying from lung cancer.

As the result of the NLST study, in December, the U.S. Preventive Services Task Force (USPSTF) gave annual low-dose CT screening for high risk populations a "B" grade. Preventive services that receive an "A" or "B" grade are covered by health insurance without cost sharing. The Centers for Medicare and Medicaid Services has convened a National Coverage Determination process to consider screening for people enrolled in Medicare at high risk for developing lung cancer. The American Lung Association is actively engaged with CMS to support coverage of this lifesaving test.

Currently NCI is planning to create a lung cancer screening registry to track the implementation of the USPSTF screening guidelines. NCI continues to be committed to the translation of the findings from the NLST into a public health benefit. As the number of people undergoing low-dose CT scans for lung cancer screening increases, NCI's registry will be critical in understanding how the guidelines are being implemented in clinical settings and communities nationwide. The registry will help ensure the greatest number of people benefit from the NLST findings to reduce the mortality rate from lung cancer

Over 370,000 Americans are living with lung cancer. During 2014, it is estimated that more than 224,000 new cases of lung cancer were diagnosed – roughly 14 percent of all cancer diagnoses. It is the leading cause of cancer deaths, with a five year survival rate of only 16.3 percent. In 2010, there were 87,740 lung cancer deaths in men and 70,578 in women. African Americans are more likely to develop and die from lung cancer than persons of any other racial group.

• Saving Lives with a Universal Flu Vaccine. The National Institute of Allergy and Infectious Disease (NIAID) have made significant investments in the development of a universal flu vaccine. According to NIAID, this vaccine could protect individuals for decades from most or all of the different seasonal flu strains. Presently, researchers, public health officials and medical experts work to predict upcoming influenza viruses that are expected to be most common, and at present, vaccinations only last one year and during the 2013-2014 flu season, the vaccine was only 61 percent effective in preventing the flu.

Influenza is a highly contagious illness caused by the influenza virus. Anyone can get the flu as it is spread easily from person to person, usually when an infected person coughs or sneezes. The virus may belong to one of three different influenza virus families: A, B or C. Each year, influenza and its related complications result in an estimated 226,000 hospitalizations and from 3,000 to 49,000 deaths.

• Personalized Treatments for People with Asthma. The National Institutes of Health (NIH) estimates it will invest \$213 million in asthma research in FY2015. According to the National Heart, Lung and Blood Institute, research conducted by NIH is leading to the identification of genes that help determine which asthma medications will work for certain patients, ultimately leading to the possibility of providing personalized treatments for the millions of Americans living with asthma. These innovations have the potential to one day reduce the significant health and economic burden caused by asthma.

Asthma continues to plague the public health – and the economy – of the United States. It is estimated that 25 million Americans have asthma, of whom 7 million are children, representing 10 percent of our nation's youth. Asthma is the third leading cause of hospitalizations for children under the age of 15 and is a leading cause of school absences due to a chronic disease. Asthma is responsible for \$50.1 billion annually in healthcare costs, 10.5 million missed school days; and 14.2 million missed days of work and costs \$5.9 billion in lost productivity. Asthma still claims the lives of 3,400 Americans each year.

The American Lung Association respectfully urges the Committee on Appropriations to continue its historic investments in NIH to ensure these significant hopes for new treatments, cures and preventive measures are realized. The American Lung Association has requested \$32 billion for Fiscal Year 2015 for NIH – which would significantly support these and other key lung health initiatives.

Sincerely,

Harold Wimmer

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National President and CEO