



## **AACR-AACI Hill Day 2025**

### **Securing the Future of Cancer Research – Key Messages for Engaging Lawmakers**

#### **FY2026 Appropriations Requests**

- **Provide at least \$51.3 billion for the National Institutes of Health (NIH)**

This funding is essential not only to keep pace with biomedical inflation, but to sustain lifesaving research across all diseases. Without it, promising science will stall, clinical trials will be halted, and patients will lose access to breakthroughs that could extend or save their lives.

- **Provide at least \$7.934 billion for the National Cancer Institute (NCI)**

This investment is critical to protect the progress made against cancer and to ensure continued momentum in prevention, early detection, and treatment. Without it, research will slow, trials will be delayed, and the promise of new therapies will be pushed further out of reach for patients who cannot afford to wait.

#### **Making the Case to Congress: Protecting a Bipartisan Legacy of Progress**

- **Bipartisan investment in cancer research has saved lives.**

Congress's longstanding bipartisan support for NIH and NCI has led to a 34 percent drop in the U.S. cancer death rate since 1991. More than 18 million Americans are alive today after a cancer diagnosis. That progress is thanks to research made possible by federal funding.

- **Cancer research benefits every district and state.**

NIH supports research in nearly every congressional district, and NCI's national network of cancer centers provides care and clinical trial access to patients in communities large and small.

- **NIH is one of the most effective economic drivers in the federal budget.**

Every \$1 invested in NIH generates \$2.56 in economic activity. In FY2024 alone, NIH-supported research contributed over 400,000 jobs and \$95 billion in economic output across the country.

- **That progress is now at risk.**

The President's FY2026 budget proposes cutting NIH by nearly 40 percent. This move would devastate the cancer research ecosystem. These cuts would cancel clinical trials, terminate lifesaving research, eliminate training programs, and destabilize cancer centers in every state. They threaten progress at one of the most promising moments in the history of medical science.

**We Are Closer Than Ever to Ending Cancer**

- **Political and administrative instability is already slowing clinical research, weakening the systems cancer centers depend on to conduct research and deliver care, and making it harder for people to access lifesaving trials.**
  - Over 770 NIH grants totaling nearly \$1.9 billion have already been canceled, halting critical research and creating widespread uncertainty across the cancer research community.
  - NCI has been ordered to significantly cut its contracts budget, which supports clinical trials, laboratory scientists, the cancer registry, scientific databases, and repairs for critical lab equipment. These cuts are already having ripple effects on patient care and research at cancer centers across the country.
  - NCI's communications office and patient hotline were eliminated, cutting off access to vital, science-based information about clinical trials, screening, and treatment options for patients and providers.
  - The NCI Outstanding Investigator Award program was terminated, ending a source of long-term, stable funding for leading researchers pursuing high-risk, high-reward science.
  - The NCI Board of Scientific Advisors was disbanded, removing an expert, external voice that helped shape research priorities and ensured scientific and patient needs guided decision-making.
  - The review process for Cancer Center Support Grants (CCSGs) is being centralized under NIH's Center for Scientific Review, raising concerns about the loss of site visits and the ability of centers to demonstrate their multidisciplinary impact and deep community partnerships. These changes could weaken the Cancer Centers Program, a cornerstone of the national cancer research system that connects cutting-edge science to patient care in every region of the country. Patients treated at NCI-designated cancer centers have a 25 percent higher chance of survival compared to those treated elsewhere.
- **Federal funding sustains the research and infrastructure that private industry cannot support, and states cannot replicate, securing progress in public health, innovation, and American competitiveness.**

NIH fills critical gaps in basic, translational, and rare disease research that industry often avoids. Without federal coordination, progress slows, particularly in under-resourced areas. NIH costs about \$138 per American per year and delivers returns in the form of longer lives, stronger communities, and global competitiveness.

**From scientific breakthroughs to millions of lives saved, Congress has made this possible. Now it must act to protect that progress and the people who are holding on for what comes next. We urge lawmakers to fully fund NIH and NCI, defend the research enterprise that drives discovery and hope, and ensure that the momentum in the fight against cancer is not lost when lives are still on the line.**