

**Testimony Prepared by the Society of Gynecologic Oncology  
Submitted for the record to the House Committee on Appropriations  
Subcommittee on Labor, Health and Human Services, Education, and Related Agencies  
May 3, 2024**

The Society of Gynecologic Oncology (SGO) appreciates the opportunity to provide outside witness testimony to the House Committee on Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies (Labor-HHS) for the Fiscal Year (FY) 2025 Labor-HHS appropriations bill.

The SGO is the premier medical specialty society for healthcare professionals trained in the comprehensive management of gynecologic cancers. Our more than 3,000 members include physicians, advanced practice providers, nurses, and patient advocates who collaborate with the SGO's foundation, the Foundation for Women's Cancer, to increase awareness of gynecologic cancers and improve the care of those diagnosed with gynecologic cancers. Our mission focuses on supporting research, disseminating knowledge, raising the standards of practice in the prevention and treatment of gynecologic malignancies, and collaborating with other organizations dedicated to gynecologic cancers and related fields, all with the ultimate vision of eradicating gynecologic cancers.

Funding for the NIH

Significant advances have been made in gynecologic oncology through ground-breaking research, the development of novel therapeutics, and collaboration with patients, community advocates, and cooperative clinical trial groups. However, there remain concerning increases in incidence and mortality trends for several women's cancers, and cancer care disparities persist. Specifically, while the incidence and mortality of most solid tumors is plateauing or decreasing across the globe, the incidence and death rates associated with endometrial cancer—the 4<sup>th</sup> most common cancer diagnosed in U.S. women—continue to rise. Further, the gap in racial disparities in endometrial cancer survival outcomes is widening at an alarming rate. Though research efforts are ongoing, there is still no screening test for this cancer. Robust, sustained, and predictable funding is necessary for all biomedical research, particularly research on gynecologic cancers. Therefore, as Congress considers funding for FY 2025, the SGO requests that you provide at least \$51.303 billion, an increase of \$4.2 billion, to the NIH to allow for meaningful growth above inflation of nearly 5% and \$7.934 billion for the National Cancer Institute (NCI). This funding is crucial to expand the NIH's and NCI's capacity to support promising science in all disciplines, including gynecologic oncology.

Additionally, the SGO urges you to make initial investments to support the White House Initiative on Women's Health Research, which has proposed to create a trans-NIH fund and establish a national network of centers of excellence and innovation in women's health. This initiative aims to increase investment, collaboration, and interdisciplinary research on conditions unique to or occurring disproportionately or differently in women. We are confident that, if properly funded, this initiative will advance research on gynecologic cancers.

Funding for Gynecologic Cancer Programs at the CDC

In 2024, it is estimated that approximately 117,000 U.S. women will be diagnosed with gynecologic cancer, and 34,000 will die of their disease. The incidence of gynecologic cancers is increasing, and we are seeing stark healthcare disparities and disproportionate impacts on our most vulnerable citizens and minority populations. In the last fifty years, despite declines in cervical cancer incidence due to screening and the introduction of a safe and effective high-risk human papillomavirus (HPV) vaccine, we continue to see a persistently low nationwide uptake of the HPV vaccine. Additionally, there is a concerning overlap between the population segment that misses their screening Pap test and those who do not receive vaccination. As a result, efforts should be made to both screen and vaccinate, particularly targeting this at-risk population, to prevent late-stage cervical cancer cases. Despite progress, each year, there are still nearly 14,000 women who are diagnosed with cervical cancer due to challenges with access to care and education.

Additionally, in the United States alone, the rate of new endometrial cancer cases has increased by about 1% each year, and the mortality rate has risen by almost 2% annually, with even sharper increases among Asian, Hispanic, and Black women. By 2030, endometrial cancer is projected to surpass colon cancer and become the third most common malignancy diagnosed in women. For these reasons, support for gynecologic cancer programs at the CDC is crucial.

As Congress appropriates funding for FY 2025, the SGO requests that you provide at least \$20 million for the Ovarian Cancer Control Initiative and \$15 million for Johanna's Law at the CDC. Johanna's Law supports programs, research projects, and activities at the CDC aimed at promoting education and awareness of gynecologic cancers, and the Ovarian Cancer Control Initiative is a program designed to monitor demographic data and other factors at the population level around ovarian cancer diagnosis, treatment, and survival.

#### Screening for Cervical Cancer with HPV Self-Sampling

HPV causes cervical cancer, the only vaccine-preventable gynecologic cancer. It is easy to reduce the risk of cervical cancer by screening with a Pap test and/or HPV testing. However, cervical cancer continues to disproportionately affect vulnerable populations despite the availability of a screening test and vaccine. Specifically, Hispanic women have the highest incidence of cervical cancer, followed by non-Hispanic Black women, and Black women have the highest mortality rate for cervical cancer.

We are on the verge of being able to screen for cervical cancer using self-sampling. This alternative method empowers individuals to self-collect their own samples in their homes, offering a convenient and non-invasive alternative to traditional screening methods. This approach has the potential to expand cervical cancer screening access to individuals who are never screened or under-screened. While the self-sampling method has been adopted in other countries, the Food and Drug Administration (FDA) is currently reviewing the evidence to consider approval of self-sampling for use in the United States. Once this review is complete, appropriate coverage will be imperative to ensure this new screening method reaches those most in need.

Given the promise of HPV self-sampling, the Centers for Medicare & Medicaid Services (CMS) should prioritize the reconsideration of the National Coverage Determination for Screening for

Cervical Cancer with HPV Testing to ensure that there is appropriate coverage for this screening methodology upon FDA approval. Therefore, SGO respectfully requests that you include the following report language in the report accompanying the FY 2025 Labor-HHS appropriations bill under CMS.

Screening for cervical cancer with HPV self-sampling. - The Committee is pleased that CMS has included its National Coverage Determination (NCD) for Screening for Cervical Cancer with Human Papillomavirus (HPV) Testing on its wait list for reconsideration. Similar to the approval for self-sampling in other countries with organized screening programs, the National Cancer Institute's "Last Mile" initiative will also determine the clinical effectiveness of self-collection-based HPV testing for screening to be considered for additional labeling by the Food and Drug Administration (FDA) after review. The Committee recognizes that self-sampling has the potential to reach individuals who are never screened or under-screened for HPV, which makes up about half of women who get cervical cancer in the US. Given the promise of HPV self-sampling, the Committee urges CMS to move this NCD up the waitlist to ensure appropriate coverage for this screening methodology upon FDA approval.

Again, the SGO appreciates the opportunity to submit testimony to the Subcommittee as you begin your work on the FY 2025 appropriations bills. We look forward to working with you to ensure the prevention and treatment of all gynecologic cancers, improving health outcomes for all women.