

MELANOMA ACTION COALITION

May 17, 2021

Chairman Jon Tester
Defense Appropriations Subcommittee
122 Dirksen Senate Office Building
Washington, DC 20510

Ranking Member Richard Shelby
Defense Appropriations Subcommittee
115 Dirksen Senate Office Building
Washington, DC 20510

Dear Chairman Tester and Ranking Member Shelby:

The Melanoma Action Coalition thanks you for supporting the Defense-funded melanoma research in the Fiscal Year 2021 Defense Appropriations bill and requests that the Senate Defense Appropriations Subcommittee provide \$40 million for melanoma research in the Fiscal 2022 Department of Defense Appropriations bill. This program is funded within the Defense Health account.

The Melanoma Action Coalition represents more than 40 community-based foundations and advocates nationwide focused on increasing awareness about melanoma, providing education about sun safety, and raising funds for melanoma research. Each of us has been touched personally by melanoma. Some of us are survivors; others have lost spouses or children to this disease. We are united by our dedication to working towards a time when no other individuals or families suffer the pain and loss that we have experienced.

Melanoma is a unique and major threat to our military community, who carry out their missions in environments of extreme solar radiation. Decades of studies from WWII to the current generation of war fighters confirm the linkage of this exposure to the development of deadly melanoma. Continued innovation in melanoma prevention, detection, and treatment is only possible with continued investment in high quality research.

A 2000 "Annals of Epidemiology" study comparing mortality among WWII veterans of the Pacific and European Theaters found that Pacific Theater Prisoner of War veterans had an estimated 3 times greater risk of dying from melanoma than veterans of the European Theater.^[1] The article concluded that these data are "consistent with the hypothesis that exposure to high levels of solar radiation in young adulthood is associated with a higher risk of melanoma mortality."^[2]

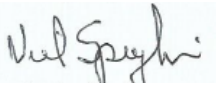
According to *The Pulse*, the online source for the Uniformed Services University, “melanoma is the most significant cancer to affect the active duty military population.” [3] A Vanderbilt School of Medicine study cites that only 22 percent of military personnel were made aware of the risks of sun exposure, 77 percent reported being exposed to bright sunlight for more than 4 hours a day, and only 27 percent had regular access to sunscreen.[4] The study concluded that “the past decade of United States’ combat missions, including operations in Iraq and Afghanistan, have occurred at a more equatorial latitude than the mean center of the United States population, increasing the potential for ultraviolet irradiance and the development of skin cancer.” [5]

Recent studies have borne out these conclusions. A study published in the Military Service Monthly Report found that in a 10-year surveillance period from 2005 to 2014, malignant melanoma was one of the most frequent cancer diagnoses among male service members, and the second most frequent cancer diagnosis among female service members.[6] Another 2014 Military Medicine Study found that the overall incidence rate of melanoma in active duty military personnel between 2000 and 2007 was 62 percent greater than among the general population during the same period.[7]

Given the clear threat melanoma poses to our service members, and the volume of high-quality research proposals, the Melanoma Action Coalition respectfully requests that the committee provide \$40 million for melanoma research in the Fiscal Year 2022 Defense Appropriations bill.

Thank you for considering this important request. Should you have any questions, please contact me at (609) 230-5698, nspiegler@aol.com.

Sincerely,



Neil Spiegler
President
Melanoma Action Coalition

[1] Page, William F., David Whiteman, and Michael Murphy. "A comparison of melanoma mortality among WWII veterans of the Pacific and European theaters." *Annals of epidemiology* 10, no. 3 (2000): 192-195.

[2] Ibid.

[3] Mason, V. (2018). Improving the Detection of Melanoma in Active Duty Military. [online] *The Pulse*. Available at: <https://usupulse.blogspot.com/2018/02/improving-detection-of-melanoma-in.html> [Accessed 26 Feb. 2020].

[4] Powers JG, Patel NA, Powers EM, Mayer JE, Stricklin GP, Geller AC. Skin cancer risk factors and preventative behaviors among United States military veterans deployed to Iraq and Afghanistan [published online ahead of print June 25, 2015]. *J Invest Dermatol*. doi: 10.1038/jid.2015.238.

[5] Ibid.

[6] Lee, T., V. F. Williams, and L. L. Clark. "Incident diagnoses of cancers in the active component and cancer-related deaths in the active and reserve components, US Armed Forces, 2005-2014." *MSMR* 23, no. 7 (2016): 23-31.

[7] Lea, C. Suzanne, Jimmy T. Efrid, Amanda E. Toland, Denise R. Lewis, and Christopher J. Phillips. "Melanoma incidence rates in active duty military personnel compared with a population-based registry in the United States, 2000-2007." (2014): 247-253.