

Congress of the United States
Washington, DC 20515

January 25, 2007

The Honorable Michael O. Leavitt
Secretary
U.S. Department of Health and Human Services
Hubert H. Humphrey Building
200 Independence Avenue, SW, Room 615F
Washington, DC 20201

Elias A. Zerhouni, M.D.
Director
National Institutes of Health
Building 1
One Center Drive, Room 126
Bethesda, MD 20892

Dear Secretary Leavitt and Director Zerhouni:

As the Fiscal Year 2009 budgets are prepared for your respective agencies, we urge you to increase funding for research involving the development of imaging technologies for prostate cancer detection and treatment. Currently, men do not have the kind of prostate imaging technologies comparable to state-of-the-art mammography that help saves women from breast cancer every day through early detection.

As you know, life-saving breakthroughs in screening, diagnosis, and treatment of breast cancer resulted from the development of advanced imaging technologies led by the Federal Government. It is now time for our Government to lead the way so that men will have accurate and affordable prostate cancer screening exams and similar minimally-invasive treatment tools.

We know that you are aware that prostate cancer has reached epidemic proportions and now strikes at least one in six American men, with African-American men having a 60 percent higher incidence rate than Caucasian men and a mortality rate twice as high. Each year more than 230,000 American men are newly diagnosed with prostate cancer, more than 1,500,000 men have biopsies, and around 30,000 men fall prey to this potential killer.

While men should use current prostate cancer screening techniques, a recent National Cancer Institute-funded study demonstrated that the most common available methods of detecting prostate cancer (PSA blood test and physical exams) are not foolproof, causing numerous false alarms and false reassurances. With prostate imaging tools, many men and their families would face less physical, psychological, financial and emotional trauma and such tools could generate billions of dollars in savings for private and public health care systems. Finally, this funding would make strides toward resolving health disparities by improving the quality of care for African-American men and others with histories of prostate cancer in their families.

