THE AD HOC GROUP FOR MEDICAL RESEARCH

Statement by the Ad Hoc Group for Medical Research on
FY 2012 Appropriations for the Department of Health and Human Services
submitted for the record to the
Subcommittee on Labor, Health and Human Services, Education and Related Agencies
Committee on Appropriations
United States House of Representatives
April 15, 2011

The Ad Hoc Group for Medical Research is a coalition of more than 300 patient and voluntary health groups, medical and scientific societies, academic and research organizations, and industry. The Ad Hoc Group appreciates the opportunity to submit this statement in support of enhancing the federal investment in biomedical, behavioral, and population-based research supported by the National Institutes of Health (NIH).

We are deeply grateful to the Subcommittee for its long-standing, bipartisan leadership in support of NIH. These are difficult times for our nation and for people all around the globe, but the affirmation of science is the key to a better future. To improve Americans' health and strengthen America's innovation economy, the Ad Hoc Group for Medical Research recommends $35 billion for NIH in fiscal year (FY) 2012.

The partnership between NIH and America's scientists, medical schools, teaching hospitals, universities, and research institutions continues to serve as the driving force in this nation's search for ever-greater understanding of the mechanisms of human health and disease. More than 83 percent of NIH research funding is awarded to more than 3,000 research institutions located in every state. These are funded through almost 50,000 competitive, peer-reviewed grants and contracts to more than 350,000 researchers.

The foundation of scientific knowledge built through NIH-funded research drives medical innovation that improves health and quality of life through new and better diagnostics, improved prevention strategies, and more effective treatments. NIH research has contributed to dramatically increased and improved life expectancy over the past century. A baby born today can look forward to an average life span of nearly 78 years – almost three decades longer than a baby born in 1900, and life expectancy continues to increase. People are staying active longer, too: the proportion of older people with chronic disabilities dropped by nearly a third between 1982 and 2005. Thanks to insights from NIH-funded studies, the death rate for coronary heart disease is more than 60 percent lower – and the death rate for stroke, 70 percent lower – than in the World War II era.

NIH research continues to create dramatic new research opportunities, offering hope to the millions of patients awaiting the possibility of a healthier tomorrow. For example, a new ability to comprehend the genetic mechanisms responsible for disease already is providing insights into diagnostics and identifying a new array of drug targets. We are entering an era of personalized medicine, where prevention, diagnosis, and treatment of disease can be individualized, instead of using the standardized approach that all too often wastes health care resources and potentially subjects patients to unnecessary and ineffective medical treatments and diagnostic procedures.

Peer-reviewed, investigator-initiated basic research is the heart of NIH research. These inquiries into the fundamental cellular, molecular, and genetic events of life are essential if we are to make real progress toward understanding and conquering disease. The application of the results of basic research to the detection, diagnosis, treatment, and prevention of disease is the ultimate goal of medical research. Clinical research not only is the pathway for applying basic research findings, but it also often provides important insights and leads to further basic research opportunities. Additional funding is needed to sustain and enhance basic and clinical research activities, including increasing support for current researchers and promoting opportunities for new investigators and in those areas of science that historically have been underfunded.

Ongoing efforts to reinvigorate research training, including developing expanded medical research opportunities for minority and disadvantaged students, continue to gain importance. For example, the volume of data being generated by genomics research, as well as the increasing power and sophistication of computing assets on the researcher's lab bench, have created an urgent need, both in academic and industrial settings, for talented individuals well-trained in biology, computational technologies, bioinformatics, and mathematics to realize the promise offered by modern interdisciplinary research.

To move forward, it will be essential to maintain the talent base and infrastructure that has been created to date. Large fluctuations in funding will be disruptive to training, to careers, long range projects and ultimately to progress. The research engine needs a predictable, sustained investment in science to maximize our return.

Further, NIH-supported research contributes to the nation's economic strength by catalyzing private sector growth and creating skilled, high-paying jobs; new products and industries; and improved technologies. Industries and sectors that benefit include the high-technology and high value-added pharmaceutical and biotechnology industries, among others. In particular, the NIH funds "enabling science" that explores and identifies discoveries at a point earlier than businesses often invest, stoking and sustaining the discovery pipeline.

The investment in NIH not only is an essential element in restoring and sustaining both national and local economic growth and vitality, but also is essential to maintaining this nation's prominence as the world leader in medical research. As Raymond Orbach, former Under Secretary for Science at the Department of Energy for President George W. Bush, noted in a recent editorial in *Science*, "Other countries, such as China and India, are increasing their funding of scientific research because they understand its critical role in spurring technological advances and other innovations. If the United States is to compete in the global economy, it too

must continue to invest in research programs." To succeed in the information-based, innovation driven world-wide economy of the 21st century, we must recommit to long-term sustained growth in medical research funding.

The ravages of disease are many, and the opportunities for progress across all fields of medical science to address these needs are profound. In this challenging budget environment, we recognize the painful decisions Congress must make. The community appreciates that this subcommittee always has recognized that discoveries gained through basic research yield the medical advances that improve the fiscal and physical health of the country. Strengthening the nation's commitment to medical research is the key to ensuring the future of America's medical research enterprise and the health of her citizens.

The Ad Hoc Group for Medical Research respectfully requests that NIH be recognized as an urgent national priority as the subcommittee prepares the FY 2012 appropriations bills.