NIDDK Response to the COVID-19 Pandemic

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Chronic
Common
Consequential
Costly
NIDDK’s Integrated Research Programs

**Obesity**
- Approx. 2/3 of U.S. adults overweight or obese
- More than 40% of U.S. adults obese
- Increasing in the young
- Annual medical cost: $147B

**Type 2 Diabetes**
- Approx. 34.2 million U.S. cases (10.5% of population)—90-95% T2D
- Projected to ~50 million by 2050
- Increasing in the young
- Annual total cost: $327B

**Chronic Kidney Diseases**
- Nearly 15% of the U.S. population have CKD
- Major causes: diabetes, hypertension
- Annual Medicare cost of CKD and kidney failure: $98B

**Obesity Disparities:**
- 49.6% of NH Blacks and 44.8% of Hispanics (compared to 42.2% of Whites)

**Age-adjusted Diagnosed Diabetes:**
- 14.7% of AIAN
- 11.7% of NH Black
- 12.5% of Hispanic
- 7.5% of White

**ESRD prevalence, compared to U.S. white population:**
- 3 times higher in NH Black
- 1.3 times higher in Hispanic
COVID-19 Touches Everything

Vulnerable populations
- Preexisting conditions
- Health disparities

Workforce—grantees, applicants, junior investigators, women, underrepresented scientists

NIDDK research programs—including clinical trials--on hold/delayed for safety reasons

Costs of research increased--restart, PPE, modified strategies and protocols, etc

New research opportunities lost
Need to Keep Eye on the Ball(s)...

From “Biomedical Research Goes Viral: Dangers and Opportunities.” Zeggini E et al.

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NIDDK’s Multifaceted Response

- COVID-19-related research
- Reducing burden on the research workforce
- Building long-term trust that will be critical for vaccine implementation
  - E.g: Kidney Precision Medicine Project (KPMP) Community Engagement: Patient Participant Voices

- All while still keeping an “eye on the ball” of the NIDDK mission