

Ad Hoc Group Weekly Round Up – Dec. 11, 2017

Each week, the Ad Hoc Group Weekly Round Up will feature hashtags and/or tweets (follow us at [@fundNIH](#)) suggested by members of the National Institutes of Health (NIH) advocacy community. We encourage all readers who are active on social media to use these messages, and welcome suggestions from the community for future issues of the Weekly Round Up. Here's this week's featured tweet:

Tannaz Rasouli (@tannaz)

.@SenateMajLdr @SpeakerRyan @GOPLeader @SenSchumer @NancyPelosi: Don't cap cures! #RaisetheCaps for NDD to #fundNIH bit.ly/2nEQaIQ

1. President Signs Dec. 22 Government Funding Extension

On Dec. 7, House and Senate lawmakers approved [H.J. Res 123](#), a continuing resolution (CR) to fund the government through Dec. 22. The president [signed](#) the CR on Dec. 8. The CR modifies the expiration date of the previous CR (P.L. 115-56) from Dec. 8 to Dec. 22, so all provisions in the previous CR, including the prohibition on modifying NIH support for facilities and administrative expenses (F&A), carry forward. The two week extension is meant to provide additional time for congressional leadership to negotiate.

2. The Hill Op-Ed: Congress should massively ramp up funding for the NIH

On Dec. 5, The Hill [published](#) an op-ed by Kenneth Davis, MD, president and CEO of Mount Sinai Health System, that says, "Given today's scientific, medical, and economic facts, Congress should massively ramp up funding for the NIH over the next several years." Dr. Davis frames his piece by highlighting that we are "at a time when science is on the cusp of achieving breakthroughs that can vastly improve health and change our world for the better." Underscoring the need for parity between defense and nondefense spending, he writes, "Guarding against the threat of terrorism is essential to national security, but disease poses a far larger statistical threat, one which Washington's budgetary priorities must also recognize. However, choosing between preventing terrorism and disease is a false dichotomy – we can and must do both."

3. Distinguished Scientists, Nobel Laureates, Sign Budget Deal Letter to Congress

On Dec. 6, the American Association for Cancer Research (AACR) sent a [letter](#) to congressional leadership signed by 96 distinguished scientists, including 18 Nobel Laureates, urging lawmakers to "move quickly to finalize a multi-year, bipartisan budget agreement that raises the caps on non-defense discretionary spending in FY 2018 imposed by the Budget Control Act." The letter says, "Doing so will allow for a \$36.1 billion investment in NIH in FY 2018 as approved by the Senate Appropriations Committee, and remove the threat of sequester that is so concerning to researchers, advocates, and the public at large."

4. New Forecast Highlights Potential Impact of Alzheimer's Disease on Americans

On Dec. 7, the NIH shared a [media advisory](#) discussing a new Alzheimer’s disease forecast. The advisory states, “Using new methodology, scientists calculate that approximately 6 million American adults have Alzheimer’s disease or mild cognitive impairment, which can sometimes be a precursor to the disease. The estimate, funded by the National Institutes of Health, also forecasts that these numbers will more than double to 15 million by 2060, as the population ages.”

5. NIH Director Updates Senate HELP Committee on 21st Century Cures Act

On Dec. 7, the Senate Health, Education, Labor, and Pensions Committee held a full committee [hearing](#) entitled, “Implementation of the 21st Century Cures Act: Progress and the Path Forward for Medical Innovation.” The two witnesses testifying included NIH Director Francis Collins, MD, PhD, and Food and Drug Administration Commissioner Scott Gottlieb, MD. Among the items in his written [testimony](#), Dr. Collins discussed how the NIH and biomedical research community has “been concerned about the long-term stability of the biomedical research enterprise.” He also describes that “As a consequence of NIH’s loss of more than 20 percent of its purchasing power from 2003 to 2015, researchers were forced to vie for limited resources, leading to a hypercompetitive environment,” pointing out that the current environment is “particularly challenging for many new- and mid-career investigators.”

6. NIH Director Testifies at Senate Appropriations Committee Hearing on Opioids

On Dec. 5, the Senate Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies [held](#) a hearing to discuss federal efforts to address the opioid epidemic. Among the witnesses for the hearing was NIH Director Francis Collins, MD, PhD. Written testimony provided by the Department of Health and Human Services [highlighted](#) NIH’s support for “cutting-edge research on pain and opioid misuse, addiction, and overdose.” The testimony points out that “Continued research will be key to understanding the crisis and informing future efforts,” saying that “NIH supports a range of activities to advance research on pain and addiction.”

7. NIH’s Advisory Committee to the Director Scheduled to Meet Dec. 14-15

Through a Federal Register [notice](#), the NIH announced that the Advisory Committee to the Director (ACD) will meet on Dec. 14 from 9am to 5:30pm and Dec. 15 from 9am to 1pm to discuss the NIH Director’s report, ACD working group reports, and other business of the committee. The meeting will be held at National Institutes of Health, Building 31, 6th Floor Conference Room 6C, 31 Center Drive, Bethesda, MD. The contact person for the meeting is Gretchen Wood, who can be reached by email at Woodgs@od.nih.gov.

Please Note: If you have information of interest to the NIH advocacy community that you would like to share with the Ad Hoc Group, please forward it to Joe Bañez at jbanez@aamc.org or Tannaz Rasouli at trasouli@aamc.org.