President’s Message

NAEVR Seeks Every Possible Federal Dollar for Vision Research, Facilitates NEI/FDA Discussions about Product Approval

As the first story inside this edition summarizes, the National Eye Institute (NEI) and most National Institutes of Health (NIH) Institutes/Centers (I/Cs) were flat funded in the Fiscal Year (FY) 2008 appropriations process despite efforts by NAEVR and its networks, coalition partners, and Congressional supporters to increase funding.

I had the opportunity to join NAEVR Executive Director Jim Jorkasky and Legislative Counsel John Porter (Hogan & Hartson) in a January 9 meeting with NEI Director Dr. Paul Sieving. Despite NEI’s funding limitations, Dr. Sieving remains committed to pursuing promising vision research through all appropriate funding mechanisms, including trans-Institute research and public-private partnerships. Regarding the former, NEI has a sterling reputation among the I/Cs for its level of collaboration, as documented in meetings that Jim has held with numerous I/C Directors as he works closely with coalition partners. Regarding the latter, we all anxiously await the results of the human gene therapy trials for Leber’s congenital amaurosis (LCA), emerging from past joint funding by the Foundation Fighting Blindness (FFB) and NEI.

Having been briefed by Jim and John on NAEVR’s FY2009 strategy, I can assure you that no other advocacy group has already worked as hard this year to seek FY2009 federal funding for vision research, whether at the NIH/NEI, the Department of Defense (DOD), or the Department of Veterans Affairs (VA).

Through ARVO’s January 25 Advocacy Day, NAEVR’s FY2009 NIH/NEI and DOD funding requests were made in 50 offices, with additional requests being made to more than 100 offices through the March 6 American Glaucoma Society Advocacy Day, being held on the first-ever World Glaucoma Day. NAEVR has not only already secured key bipartisan champions from the House and Senate Defense Appropriations Subcommittees for the FY2009 DOD vision research eligibility listing, the Alliance has also worked with the key Veterans’ Service Organizations (VSOs) to recommend this listing in The Independent Budget that they develop and submit to Congress—which also urges Congress to authorize more VA-DOD research funding on eye trauma.

Unfortunately, we are never assured of any legislative victory, especially with respect to the budget and appropriations process, especially in this uncertain election year. That is why NAEVR has been working since 2005 to ensure that NEI’s research findings are appropriately considered within the context of the Food and Drug Administration’s (FDA) product approval process. With the November 2006 Ophthalmic Clinical Trial Design and Endpoints meeting, organized by NEI/FDA in conjunction with NAEVR and managed by ARVO, participants addressed the increased acceptance of Optical Coherence Tomography (OCT), for example, as an outcomes measure in clinical trials for age-related macular degeneration (AMD) and diabetic retinopathy.

With the upcoming March 13-14 Glaucoma Endpoints meeting, glaucoma researchers will be able to consider new outcomes measures for glaucoma therapy clinical trials. NAEVR’s leadership in facilitating these discussions have very real deliverables for all network members—whether researchers, practitioners, or patients—including reduced costs of clinical trials and the expeditious approval of new products. This also provides an opportunity for NIH Director Dr. Elias Zerhouni to highlight cost savings and benefits to vision patients through this NEI/FDA collaboration. We understand that the March 5 House Labor, Health and Human Services, and Education (LHHS) Appropriations Subcommittee hearing will focus on just that—how Department of Health and Human Services (DHHS) agencies are working together to save and improve lives reducing costs while in the healthcare system.

As always, thank you for your support.

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Contributor Report

Winter 2008

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