In late March, I joined Dr. Karla Zadnik (Ohio State University) in testifying before the House Labor, Health and Human Services, and Education (LHHS) Appropriations Subcommittee, urging an increase in Fiscal Year (FY) 2008 National Institutes of Health (NIH) and National Eye Institute (NEI) funding of $31 billion and $711 million, respectively (see story inside). I also had the chance to join NAEVR Executive Director Jim Jorkasky and Advocacy Manager David Epstein in Capitol Hill visits with both existing and new champions for increased NIH/NEI funding and defense-related vision research. As you can see from stories featured herein, NAEVR has been a constant presence on Capitol Hill this first quarter with the 110th Congress, sharing a consistent message about the need for increased and timely NIH/NEI appropriations.

This tenacity has paid off, as our community will net an additional $12 million for vision research in FY2007—$8.5 million more “programmable” dollars at NEI, and $3.5 million of FY2006 Department of Defense (DOD) Peer-Reviewed Medical Research Program (PRMRP) awards distributed in FY2007 to five vision researchers. The latter amount is notable since the FY2006 funding cycle was the first in which eye and vision research was eligible for PRMRP funding—thanks to the advocacy efforts of NAEVR Legislative Counsel John Porter—and it represents ten percent of all awards granted. Although advocacy for NEI funding will always be NAEVR’s first priority as the “Friends of the NEI”, defense and veterans-related vision research is increasingly important. These funding sources are not mutually exclusive, as several Members asked witnesses at the recent House and Senate NIH appropriations hearings about the applicability of NIH-funded research to injuries suffered by soldiers returning from Iraq and Afghanistan. In that regard, the vision community has a compelling story to tell.

This community’s investment in NAEVR and AEVR, at about $550,000 this year, has netted a $12 million increase in vision research funding—a greater than 20-fold return.

Beyond those dramatic numbers, NAEVR’s leadership on the NIH reauthorization issue last year has not only resulted in maintenance of the NEI budget line item, but has yielded a greater Congressional awareness of the value of vision research. I can assure you from my own Congressional visits that NAEVR’s endorsement of the NIH reauthorization legislation last year has given us standing in requesting increased NEI funding in the offices of Members from both parties, from moderate to conservative.

I sense a momentum from Congressional leaders for an NIH increase in “real” dollars this funding cycle, driven primarily by the excellent job NIH Director Dr. Elias Zerhouni has done in characterizing the value of NIH research. NAEVR will continue to emphasize NEI’s accomplishments in terms of Dr. Zerhouni’s priorities in its direct advocacy and in its engagement of all NAEVR network members throughout this budget and appropriations cycle. As always, thank you for your support and commitment.

— Stephen J. Ryan, M.D.
Doheny Eye Institute
NAEVR/AEVR Boards President
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At House Hearing, Vision Community Testifies, Requests FY2008 NIH and NEI Funding Increase of 6.7 Percent to $31 Billion and $711 Million, Respectively

On March 6, NIH Director Dr. Elias Zerhouni testified before the LHHS Appropriations Subcommittee, chaired by Cong. David Obey (D-WI), with Cong. James Walsh (R-NY see related story inside) serving as Ranking Member. Responding to Chairman Obey’s request that he describe challenges the country will face ten years out, Dr. Zerhouni identified NIH’s priority challenges: the shift from acute to chronic disease; the aging population; health disparities; emerging/re-emerging infectious diseases; emerging non-communicable diseases (e.g., obesity); and biodefense. He explained in “plain English” that NIH’s goal is to determine the complex, interrelated cellular mechanisms that drive both health and disease. In that regard, he reiterated how NIH’s shift of the paradigm for research/clinical practice to that which is preemptive, predictive, preventive, and personalized will lead to an “era of precision medicine,” with the intent of reducing the burden and cost of disease. He concluded by stressing the importance of investigator-initiated research and the scientific peer review process.

On March 27, the vision community was represented by NAEVR Board President Dr. Stephen Ryan (Doheny Eye Institute) and Dr. Karla Zadnik (Ohio State University School of Optometry, representing the American Optometric Association) in Public Witness hearings before Chairman Obey and the Subcommittee.

On March 23, the Senate-passed resolution included an amendment introduced by Senator Arlen Specter (R-PA) and Senator Tom Harkin (D-IA) to increase health programs by $2.2 billion. On March 29, the House-passed resolution recommended an increase of $1.3 billion above the President’s request for the NIH. Although the resolutions reflect a larger framework for spending, it is the allocations to the specific budget categories (in NIH’s case, Budget Function 550) that determine the extent to which increases in funding can be made. Those are expected by late April, just prior to markup hearings.

Both chambers passed resolutions that included specific language regarding the importance of NIH funding. On March 23, the Senate-passed resolution included an amendment introduced by Senator Arlen Specter (R-PA) and Senator Tom Harkin (D-IA) to increase health programs by $2.2 billion. On March 29, the House-passed resolution recommended an increase of $1.3 billion above the President’s request for the NIH. Although the resolutions reflect a larger framework for spending, it is the allocations to the specific budget categories (in NIH’s case, Budget Function 550) that determine the extent to which increases in funding can be made. Those are expected by late April, just prior to markup hearings.

Senate and House Pass FY2008 Budget Resolutions

Full details of hearings appear in the NAEVR Web site Advocacy Center’s section on NIH/NEI Appropriations
Congress Approves FY2007 Joint Funding Resolution Increasing NEI Program Dollars by $8.5 Million over FY2006

On February 14, just before a Continuing Resolution was to expire, the Senate passed the full-year FY2007 funding Joint Resolution (JR), passed by the House on January 31. NIH’s budget was increased by $620 million, or 2 percent, over FY2006 to a level of $28.9 billion. The new funding consisted primarily of $483 million appropriated directly to the newly established common fund (including NIH Roadmap initiatives) for trans-Institute research, per the NIH Reform Act of 2006 passed in December 2006 and endorsed by NAEVR. The common fund appropriation includes a $91 million increase in the Office of the Director to support new investigators. NAEVR will work closely with the NEI to determine how the community can access the common fund and new investigator funding.

Congressional leaders described the President’s budget request as a “backwards step” in ensuring the health of the nation and vowed to champion for “real dollar” increases at NIH.

Although the resolution did not specifically increase most Institute/Center budgets above the FY2006 appropriation, the NEI will net an additional $8.5 million more “programmable” dollars in FY2007, or a 1.2 percent increase, since it will not have to contribute to the Roadmap/common fund, which was appropriated directly. As the President’s initial FY2007 budget proposed to cut the NEI by $5.8 million, the final FY2007 funding level represents a dramatic $13.8 million more for programs—and demonstrates how effective NAEVR’s advocacy has been in ensuring that additional research dollars are available to NIH/NEI.

As the President’s FY2008 budget issued on February 5, its proposed NIH funding level of $28.7 billion falls short of the actual FY2007 NIH funding level of $28.9 billion—a net decrease of $511 million or 1.7 percent below FY2007 when transfers to other accounts are included. Congressional leaders described the President’s budget request as a “backwards step” in ensuring the health of the nation and vowed to champion for “real dollar” increases at NIH.

Although Defense-related Vision Research is Not Funded in FY2007, Researchers Awarded $3.5 million from FY2006

Primarily due to jurisdictional issues, the year-long FY2007 funding Joint Resolution did not include the $50 million Department of Defense (DOD) Peer-Reviewed Medical Research Program (PRMRP) funding that was included in FY2006, the first year in which eye and vision research was eligible. As NAEVR makes its request for continued eligibility in FY2008, the actual FY2006 awards have been announced. In its first year, the vision community submitted 52 of the 651 total grant requests, or eight percent, and received five grants out of 48, or ten percent, for a funding total of $3.5 million. “This level of funding in the first year is unprecedented, and reflects the applicability of defense-related vision research,” said NAEVR Legislative Counsel John Porter. He added that, for FY2008, Congress has resolved the jurisdictional issue, as this program is now subject to review by the respective House and Senate Defense Appropriations Subcommittees.
Vision Community Welcomes 110th Congress, Urges Increased and Timely FY2008 Appropriations

On January 31, NAEVR hosted more than 150 Members of Congress and their staffs in a welcome reception for the 110th Congress. Cong. James Walsh (R-NY), a co-host for the event (along with Cong. Anna G. Eshoo, D-CA), provided a formal welcome, followed by brief comments from Dr. Neil Bressler (Wilmer Eye Institute/Johns Hopkins University School of Medicine).

Cong. Walsh, who currently serves as the Ranking Member of the House LHHS Appropriations Subcommittee, with funding jurisdiction over the NIH/NEI, spoke passionately about vision research. As the former Chair of the House Military Quality of Life and Veterans Affairs Subcommittee in the 109th Congress, he championed eye and vision research’s eligibility for peer-reviewed research funding within the DOD’s Peer-Reviewed Medical Research Program (see previous story).

“I was fortunate to be familiar with the significant technological breakthroughs in eye and vision research at the State University of New York (SUNY) Upstate Medical University/Syracuse College of Medicine, under the direction of Ophthalmology Department Chair Dr. John Hoepner. After getting to know a constituent who suffered serious eye injury in Iraq, I wanted to ensure the very best eye care that medical research can provide to those who are asked to put themselves in harm’s way.”

Dr. Bressler spoke about the value of vision research, reporting that 200,000 Americans each year are diagnosed with age-related macular degeneration (AMD), the leading cause of vision loss that primarily affects seniors. Due to NEI-funded research into factors that inhibit the new blood vessel growth that destroys the central vision of individuals with AMD, Food and Drug Administration (FDA)-approved drugs are now available that could prevent significant vision loss in 95 percent of all people affected with this condition. He added that researchers within the NEI-funded Diabetic Retinopathy Clinical Research Network are hopeful that these same drugs will also stop vision loss associated with diabetic retinopathy, another potentially blinding disorder that affects individuals who have diabetes.

Dr. Bressler concluded by urging Members and their staffs to not only increase FY2008 NIH/NEI funding, but to ensure the timeliness of the appropriations process such that the continuity of vision research is not jeopardized by delays in funding awards from the NEI. NAEVR’s James Jorkasky reminded attendees that the vision research community endorsed the NIH Reform Act of 2006 and anticipated that the NEI could compete effectively for dollars in the newly established common fund for trans-Institute research, since it has a strong history of collaborations with other Institutes.

NAEVR was pleased to add the following new contributors to the list of Alliance members featured at the Welcome Reception:

- Association of Vision Science Librarians
- Blinded Veterans Association
- Vision Council of America

Cong. Walsh’s dialogue with the medical research advocacy community continued with a March 1 breakfast attended by NAEVR and its Legislative Counsel John Porter.

Right Cong. Walsh and John Porter
AEVR Briefing Addresses the Interplay between Genes and Lifestyle in Vision Health

On February 20, AEVR sponsored a Congressional briefing featuring Dr. Debra Schaumberg (Harvard Medical School), who described her NEI-funded research into the interplay of genes and lifestyle in AMD. The briefing was held in conjunction with the Women’s Eye Health Task Force and the Society for Women’s Health Research.

Dr. Schaumberg’s cutting-edge research uses statistical and epidemiological methods to study AMD, a complex disease where multiple genetic and lifestyle variables play a role. Through uncovering the genetic secrets of AMD, as well as studying the potential impact of lifestyle factors such as obesity and cigarette smoking that appear to influence the expression of these genes, Dr. Schaumberg can more fully quantify the risk for incidence of the disease, thereby enabling disease prevention or more rapid diagnosis and treatment.

Dr. Schaumberg’s work arises from findings from the NIH’s Human Genome Project, announced in 2005, in which two genes (Complement Factor H, or CHF, and LOC387715) were found to contain variants that account for the majority of cases of AMD. However, after studying large populations of individuals with these gene variants—representing studies conducted by various Institutes within NIH—Dr. Schaumberg observed that many people with these variants do not develop AMD. “The high prevalence of the CFH and LOC gene variants in the population suggested to us that lifestyle factors could strongly influence the effect of the genetic variants on risk of AMD,” noted Schaumberg.

For example, in people with the CFH gene variant, cigarette smoking increases the risk of AMD by 8-fold, and obesity increases the risk by 12-fold. In people with the LOC gene variant, cigarette smoking increases the risk of AMD by 20-fold, and obesity increases the risk by 9-fold. “Obviously, knowing what a single gene variant is doesn’t reveal the whole story, which likely includes multiple genetic variants, possibly some with a protective influence, and their interplay with other factors about which we are still learning, including some modifiable risk factors,” said Schaumberg, who added that this research into AMD will also help to establish a paradigm for the study of other serious eye disorders—such as glaucoma, cataract, diabetic retinopathy, and dry eye syndrome—where genetics and lifestyle also play a role. She concluded by stating that, “Right now, it’s important to pay attention to one mystery we have solved, which is that development of AMD can be influenced by smoking and obesity, particularly among those with certain common genetic variants.”

Vision Research Community Discusses Pivotal Role of Ocular Epidemiology in the Translation of Basic Research

The Fourth U.S. Symposium on Ocular Epidemiology, held January 29-31 by Johns Hopkins University through an NEI grant, drew vision researchers throughout the country. In keynote comments, Dr. Harvey Fineberg, President of the Institute of Medicine of the National Academy of Sciences, described the challenges that ocular epidemiology faces, which parallel the new paradigm for healthcare research and delivery envisioned by NIH Director Dr. Zerhouni.
NAEVR Participates in Vision Community Events

Association of University Professors of Ophthalmology (AUPO) Annual Meeting

NAEVR participated in this meeting of one of its founding organizations and was pleased to capture an image of Ophthalmology Department Chairs who have recently represented the Alliance.

Left to Right Dr. Peter McDonnell (Wilmer Eye Institute/Johns Hopkins), who testified at the FY2007 Senate LHHS Appropriations hearing; NAEVR Board President Dr. Stephen Ryan; Dr. Ron Smith (Doheny Eye Institute/University of Southern California), a NAEVR Board Director; Dr. Dan Jones (Baylor College of Medicine), who advocated for defense-related vision research with Sen. Kay Bailey Hutchison (R-TX); and Dr. C. Pat Wilkinson (Greater Baltimore Medical Center), who chaired a vision community meeting with the Food and Drug Administration. Dr. Wilkinson currently serves as the President of the American Academy of Ophthalmology.

NIH Workshop: Center for Scientific Review (CSR) Neuroscience Review Groups

On March 3, NIH Director Dr. Zerhouni provided keynote comments at this first in a series of open houses, attended by NEI Director Dr. Paul Sieving and ARVO and NAEVR representatives. Dr. Zerhouni stressed the importance of peer review, especially in light of the community’s accelerating understanding of complex biomedical systems.

Above (left to right) ARVO representatives included Dr. Robert Barlow (SUNY Upstate Medical University); Dr. Carol Mason (Columbia University); and Dr. Edward Pugh, Jr., (University of Pennsylvania), who conferred with NAEVR’s Jim Jorkasky.

Below CSR Director Dr. Tony Scarpa and Dr. Zerhouni

Research!America Annual Meeting

On March 20, NAEVR participated in coalition partner Research!America’s annual national forum entitled U.S. Investment in Research: Assuring Domestic and Global Dividends.

Left to Right Dr. Alan Leshner (American Association for the Advancement of Science); NAEVR Legislative Counsel John Porter, who also serves as R!A Board Chair; Mary Woolley (R!A President); and Dr. Georges Benjamin (American Public Health Association).