As you read this, Congress has returned for three weeks of work prior to the elections recess. Congress may not return after the November election, meaning that Fiscal Year (FY) 2009 appropriations will not be finalized until the 111th Congress convenes in early 2009. Prior to the election recess, Congress must pass a Continuing Resolution (CR) that funds the government into FY2009, which begins October 1. Whether the CR is stand-alone legislation or included in “must-pass” legislation, such as the FY2009 Defense appropriations bill, is currently unclear.

Our Congressional champions for medical research have been very active in securing real, additional dollars for the National Institutes of Health (NIH) in FY2008 beyond the initial appropriation—$150 million in supplemental appropriations, with $3.5 million for the National Eye Institute (NEI).

Senate Labor, Health and Human Services, and Education (LHHS) Appropriations Subcommittee Chair Tom Harkin (D-IA) and Ranking Member Arlen Specter (R-PA) have also introduced a bill for $5.2 billion in additional FY2008 NIH funding, primarily to restore the 13 percent loss in purchasing power due to flat funding and biomedical inflation in the past five funding cycles. Both the House and Senate have proposed $1 billion increases for the NIH in respective FY2009 appropriations bills, which also include $20 million-plus increases for the NEI.

I was fortunate to have met with Senator Harkin during his late May visit to Los Angeles to thank him for his efforts. I also hosted other champions, such as Cong. Pete Sessions (R-TX) and Cong. Gene Green (D-TX), at the June NAEVR/AEVR 15th Anniversary Capitol Hill reception. In addition to Members of Congress recognizing the Alliances’ efforts, NIH Director Elias Zerhouni, M.D. also sent a letter of congratulations, which I read to attendees, and NEI Director Paul Sieving, M.D., Ph.D. spoke. As recently as mid-July in Senate testimony, Dr. Zerhouni cited the need for funding to build upon discoveries about the genetic basis of disease—such as the NEI-funded research identifying gene variants associated with age-related macular degeneration (AMD)—to develop appropriate prevention, diagnostic, and treatment strategies.

I was pleased to present a case study about NAEVR and AEVR at the recent World Ophthalmology Congress in Hong Kong, highlighting the effectiveness of the Alliances’ message about the value of vision research with Congress, regulators, and coalition partners. In that regard, I am proud that NAEVR Executive Director James Jorkasky authored for the Association for Research in Vision and Ophthalmology (ARVO) an International Advocacy Handbook: Tools to Influence Vision Research Funding, which was released at the 2008 ARVO Annual Meeting in an interactive workshop that Jim hosted. This resource, which is posted on the ARVO Web site, provides insights into influencing potential public and private sector funding source decision-makers nationally, regionally, and locally to support vision research.

As always, I thank you for your commitment to and support for the Alliances.