On July 16, after an opening statement by Chairman Harkin, NIH Director Elias Zerhouni, M.D., testified before the LHHS Appropriations Subcommittee on NIH’s accomplishments and challenges. He was joined by four Institute Directors: Francis Collins, M.D., Ph.D. (National Human Genome Research Institute); Anthony Fauci, M.D. (National Institute of Allergy and Infectious Diseases); Elizabeth Nabel, M.D. (National Heart, Lung and Blood Institute); and John Niederhuber, M.D. (National Cancer Institute).

Dr. Zerhouni elaborated on previous testimony about NIH advances that are transforming the research and healthcare practice paradigm to one that is predictive, personalized, preemptive, and participatory. He noted that the almost-daily announcement of research findings about genes associated with specific diseases (including gene variants associated with AMD, which has emerged from the Human Genome Project), represents a “revolution of knowledge” that NIH must take advantage of by being flexible and adaptive. For example, he stated that NIH must follow up on these gene discoveries by: confirming the findings in large population-based studies; better understanding the complexity of the associated disease process and how the biology works to identify potential targets; and translating the discoveries into prevention, diagnosis, and treatment.

Regarding NIH’s budget, Dr. Zerhouni stated that “medical research is a long-term process that does not operate on a twelve month cycle” and that predictable funding is necessary to sustain the research enterprise. He added that a reasonable success rate is also necessary to maintain the scientific infrastructure (for the first time, the FY2009 NIH success rate is expected to fall under 18 percent), especially to encourage young and first-time investigators. Regarding the latter, when asked what NIH would do with a $1 billion dollar increase, Dr. Zerhouni stated that the first priority should be funding young/first-time investigators by putting a “lock box’ on a specific amount of appropriations. In so stating, he noted that “NIH should be funding at least 3,000 new scientists a year, and it is currently less than that” (FY2008 funding for new/first-time investigators is $60 million, and proposed FY2009 funding is $108 million). Other key NIH priorities with increased funding include: encouraging risk-taking/innovation in research; having adequate resources to conduct clinical trials; and encouraging collaboration across disciplines.

Although NEI Director Dr. Paul Sieving did not testify, NEI provided a written statement. In that regard, Chairman Harkin noted that it is the Subcommittee’s intent to resume hearings with all Institute and Center Directors in the FY2010 appropriations process, as was done in the FY2008 process.