

Highlights of the Meeting of Board of Directors of FASEB, December 4-5, 2006

Virendra B. Mahesh

(Representing the Society for the Study of Reproduction on the FASEB Board)

NIH Reauthorization Bill and Establishment of FASEB as an Important Player in Science Policy on Capitol Hill

It has been recommended that every Federal Agency be reauthorized by Congress every 3 years. The last time Congress passed a Reauthorization Bill for NIH was 13 years ago. Congressman Joe Barton, Chairman of the House Energy and Commerce Committee, wanted Congress to have better acquaintance with and oversight of NIH, particularly after the doubling of NIH and continued requests for increases in funding. Two years ago, Congressman Barton began drafting a Bill based on his understanding of the functions of the NIH. The Bill, as drafted, would have been unacceptable to the scientific community. Over the past two years, FASEB's Office of Public Affairs worked very hard with Chairman Barton's staff; the Bill that resulted, although not perfect, was acceptable. The Bill did incorporate the FASEB recommendation of an increased emphasis on funding R01s, and FASEB endorsed it. Chairman Barton invited the President of FASEB, Dr. Leo Furcht, to testify before Congress in support of the Bill. Anticipating a strong push by disease-oriented groups for line-item funding for particular diseases, Chairman Barton asked the FASEB President to write a letter to him justifying broad-based support of research rather than of line items for certain diseases, citing examples of how findings from broad-based research approaches are often applicable to disease prevention, management, and/or cure. This letter was read on the House floor in discussion of the Reauthorization Bill favoring a broad approach rather than line items for certain diseases. The Bill was passed by the House with a vote of 414 to 2.

Chairman Barton came to the FASEB Board of Directors meeting to thank the FASEB member societies for their support and leadership in formulating science policy for the House of Representatives. He stated that the NIH Reauthorization Bill was passed with bipartisan support; he also emphasized that he has an excellent working relationship with the incoming Democratic Chairman of the House Energy and Commerce Committee. He would remain an influential member of the Committee and looked forward to future interactions with FASEB in issues of funding and science policy. During the meeting, the FASEB Board of Directors also received a message from NIH Director Dr. Elias Zerhouni expressing his appreciation to FASEB for the support it gave to NIH and the future of scientific research.

When the House passed the NIH Reauthorization Bill, it was improbable that the Senate would have time to act on it because few days remained in the session and urgent matters remained to be addressed such as the confirmation hearings of the new Secretary of Defense. However, bipartisan effort in the House and Senate resulted in some modifications of NIH Reauthorization Bill. The major modifications were as follows:

- a) Changing the NIH funding increase from 5% each year for the next 3 years (as written in the original Bill) to 6.7% in 2007, 8.3% in 2008, and as needed in 2009. Based on FASEB's projections, the effect of NIH

doubling was lost this year (2006) with an 8.3% loss of purchasing power due to inflation and flat funding over the last 3 years. It would take an increase of 6.6% for 3 years or 5.8% for 4 years or 5.3% for 5 years to bring NIH back to the trajectory created by the doubling. Thus, the modified recommendations were very appropriate.

b) The original Bill called for 50% of the NIH increase each year to go into the Common Fund to support programs like the NIH Roadmap, until the Common Fund reached 5% of the NIH budget. The modified version of the Bill did not go along with this rapid increase in the Common Fund and called for a determination of the amount each year, which would be no less than the preceding year. The current level is 1.3% of the NIH budget.

c) All changes in the NIH structure will have to be approved by Congress. All the changes that were made had been supported by FASEB but that had not incorporated in the original Bill. With much maneuvering by Chairman Barton in negotiations with the Senate, the NIH Reauthorization Bill was passed by Congress and sent to the President for his signature. The Bill is an authorization Bill and does not ensure funding. However, it does set a tone for increased funding for NIH.

FASEB as a representative of its member societies has established a strong and important role in working with Congress in formulating and influencing funding for science and science policy at Capitol Hill in the future as well.

Meeting with the NIH Institute/Center Directors

In June 2006, NIH Director Dr. Elias Zerhouni addressed the Board of Directors of FASEB and proposed a stronger working relationship between the scientific community and NIH. He also promised transparency in fund allocation at the NIH. In that spirit, Tony Scarpa, Director of the Center for Scientific Review at NIH, discussed the current review process and the proposed changes. At the December meeting of the Board of Directors, presentations were made by Jeremy Berg, Ph.D., Director of the National Institute of General Medical Sciences; Barbara Alving, M.D., Acting Director of the National Center for Research Resources; John E. Neiderhuber, M.D., Director of the National Cancer Institute; and Stephen Katz, M.D., Ph.D., Director of the National Institute of Arthritis, Musculoskeletal and Skin Diseases (NIAMS).

The Institute Directors pointed out that there was no net decrease in the amount of Investigator-Initiated Research grants. The decrease in success rates was due to an 8.3% erosion of purchasing power due to the flat NIH budget over the last 3 years and an increase in new grant applications. In 1999, the number of new and competing grant applications was 3,878. This number did not change significantly in 2003, the end of the NIH doubling period, but increased sharply in 2004. The number of applications reached 6,325 in 2005, and the the submission of 8,000 applications is anticipated by 2008. This increase in activity was a result of the stimulus provided by the doubling of NIH funding.

The NIH Institute/Center Directors recognized the importance of Investigator-Initiated Research and expressed commitment to protect it. However, the charge given to them during the doubling was not to have business as usual but also to come up with new initiatives. The overall NIH budget allocated 54% of the budget for Investigator-Initiated

Awards, 10% on Centers, 9% on Contracts, and 10% on Intramural Research. The remaining 17% was used for items such as administration, research resources, and training. The overall NIH distribution of funds did not represent the distribution in individual Institutes, a decision made by the Director of the Institute in consultation with the National Advisory Council.

The Institute Directors considered the R01s, Program Announcements, and RFAs as Investigator-Initiated Research. They stated that Program Announcements just indicated the NIH's interest in an area, but it is the scientist who initiates a response. The only exception in an RFA is the reservation of funds for the initiative, which in many cases results in a greater competition than for an R01. Furthermore, there is considerable input from the scientific community for putting out Program Announcements or RFAs.

The NIH Institute Directors emphasized the need for a "Team Approach" in solving complex and interdisciplinary problems as a justification for Program Project and Center grants. Dr. Katz, Director of NIAMS, stated that starting in 2005, his Institute does not accept unsolicited Program Project or Center grants. Furthermore, if funded, only one renewal is permitted, limiting the total period of funding to 10 years.

Dr. Barbara Alvin, Acting Director of the National Center for Research Resources, stated that her Center was responsible for Shared Large Instrument Grants, Primate Center Grants, General Research Clinical Centers, and now Translational Research Awards according to the NIH Roadmap. The NIH Roadmap budget is 1.3% for 2006 and 1.7% for 2007. The Center has awarded several Clinical Translational Research Awards and Planning Grants for training and for initiating translational research.

This meeting was the start of a dialogue between NIH Institute/Center Directors and FASEB. Just as FASEB provided feedback to Tony Scarpa relative to his presentation on the Center for Research Review in June, as approved by the Board in December, it is anticipated that the NIH Institute/Center Directors will receive feedback from FASEB representing the scientific community's view on the distribution of funds for research.

FASEB's Office of Public Affairs

On behalf of the member scientific societies of FASEB, the Office of Public Affairs (OPA) has, over the last few years, mounted a dedicated and tireless effort in science policy, funding, and public education issues. The web site can be reached at www.faseb.org and going to OPA page. The OPA's efforts are focused on Policy Issues, Advocacy and Capitol Hill, Publications, About OPA, Press Room, and Public/Educators. Under Public/Educators the various subcategories are Animals in Research and Education, Benefits of Biomedical Research, Breakthroughs in Science, Evolution Resources, and Stem Cells and SCNT.

When Chairman Joe Barton addressed the Board of Directors of FASEB, he emphasized that to establish the levels of funding needed for the rapid advancement of medical science, it is necessary to educate the Public and particularly your Congressman and Senator about the benefits and promise of scientific research. The OPA web site provides you a wealth of information for that purpose.