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Playing politics with medical funding

By Myrl Weinberg

At a time when many are questioning the federal government's expenditures, there is one agency that's completely worthy of appropriation — the National Institutes of Health.

Right now, millions of Americans who suffer from various diseases are depending on President Bush and congressional lawmakers to stop their partisanship and fund the agency.

The NIH, which began in 1887 as a one-room laboratory, is not the white elephant project of some parochial congressman. And NIH money certainly doesn't just sit at the agency's headquarters outside Washington. All 50 states receive substantial funding. California, for example, received \$3.1 billion and 7,235 grants in 2006, and this translates directly to jobs and a strong state economy. (A complete listing of NIH funding to the 50 states can be found at www.nih.gov.)

More important, NIH's contribution to American life is both measurable and significant.

For instance, NIH researchers recently developed advanced imaging techniques to detect Alzheimer's disease and multiple sclerosis earlier — allowing doctors to spot the ailments before the onset of behavioral symptoms.

What's more, NIH laid the groundwork for today's cost-effective, at-home asthma interventions, allowing children with the chronic respiratory illness to spend time at school instead of the emergency room.

Those with diabetes can thank NIH for turning what was once a death sentence into a manageable condition. And due to NIH, new technologies to radically improve the prevention, detection, diagnosis and treatment of cancer have been created. Today, the United States leads the world in survival rates for the four most common types of cancer.

These breakthroughs, and many others, in the fight against diseases, did not happen accidentally. They were the result of a concerted effort on the part of policy-makers. And this effort was ratified year after year by the votes of taxpayers.

Unfortunately, partisanship has stalled this year's appropriations process.

Because of a political fight over this year's level of spending, President Bush has vetoed the appropriations bill containing NIH funding. On Nov. 15, the House failed, by just two votes, to override his veto, leaving the agency without a clear budget for the fiscal year that already began in October.

Crucial efforts to increase the budget substantially cannot go forward if Congress and the president continue to quarrel.

Recently, a bipartisan effort in Congress doubled the NIH budget over five years, from \$13.6 billion in 1998 to \$27.1 billion in 2003. In the past fiscal year, funding stood at \$28.5 billion — virtually static in real dollar terms. The Bush administration has requested just \$28.6 billion for next year, and even the bill President Bush vetoed would have given the agency just \$30 billion.

NIH's current budget is not small, but biomedical inflation has actually robbed it of more than 13 percent of its purchasing power since 2004. And this near-freeze in funding comes at a time when chronic diseases account for more than 75 cents of every health care dollar spent in the United States.

Cancer, heart disease, diabetes, HIV, Alzheimer's and asthma are among many chronic conditions that drive up health care costs. They are also the focus of thousands of research projects that will be cut short or may never even occur without additional investment in NIH.

For Congress to let NIH funding languish would be the epitome of penny-wise, pound-foolish. What NIH really needs is not a modest increase in funding, but a substantial new investment. A doubling of funds would bring untold dividends — dividends that could be measured in extended lives and the alleviation of suffering.

As federal programs go, NIH produces unparalleled results, largely by distributing research grants to organizations throughout the country. Through NIH funding, all 50 states now play a critical role in developing advanced medical cures.

The medical community is committed to finding treatments and cures for the diseases that threaten to overwhelm our health care system. It is high time for our political leaders to demonstrate that same commitment.

Myrl Weinberg is the president of the National Health Council. She wrote this article for the Mercury News.